A female infant was born at 35-week gestation by emergency C-section because of abnormal cardiotocography. No birthmarks were evident. Cord pH was 6.87; therefore, an amplitude-integrated electroencephalography monitoring was performed soon after birth, showing left-sided electrical seizures. Cranial ultrasound revealed left hemisphere atrophy, with subcortical...
hyperechoic areas in the frontoparietal lobe. Frontoparietal NIRS monitoring showed interhemispheric asymmetry of cerebral oxygenation and total hemoglobin concentration (figure 1) that serves as a proxy for cerebral blood volume. Brain CT and MRI (figure 2) revealed characteristic features consistent with Sturge-Weber syndrome. Based on the evidence of polymicrogyria, the insult was dated back to the second trimester of pregnancy. The ophthalmologic examination results were unremarkable. The infant was started on phenobarbital, with seizure remission.

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**Disclosure**
The authors report no disclosures relevant to the manuscript. Go to Neurology.org/N for full disclosures.

**Appendix Authors**

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Silvia Martini, MD</td>
<td>S. Orsola-Malpighi University Hospital, Bologna, Italy</td>
<td>Acquired and analyzed NIRS and aEEG data and drafted the manuscript for intellectual content.</td>
</tr>
<tr>
<td>Francesco Toni, MD</td>
<td>IRCCS Istituto delle Scienze Neurologiche, Bologna, Italy</td>
<td>Acquired and analyzed neuroimaging data and revised the manuscript for intellectual content.</td>
</tr>
<tr>
<td>Vittoria Paoletti, PhD</td>
<td>S. Orsola-Malpighi University Hospital, Bologna, Italy</td>
<td>Contributed to NIRS data acquisition and revised the manuscript for intellectual content.</td>
</tr>
<tr>
<td>Luigi Corvaglia, MD</td>
<td>S. Orsola-Malpighi University Hospital, Bologna, Italy</td>
<td>Interpreted the data and revised the manuscript for intellectual content.</td>
</tr>
<tr>
<td>Duccio Maria Cordelli, MD</td>
<td>S. Orsola-Malpighi University Hospital, Bologna, Italy</td>
<td>Interpreted the data and revised the manuscript for intellectual content.</td>
</tr>
</tbody>
</table>

**References**

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