Teaching NeuroImages: Neurocysticercosis With Unilateral Vision Loss

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Neurology® 2021;96:e2035-e2036. doi:10.1212/WNL.0000000000011319

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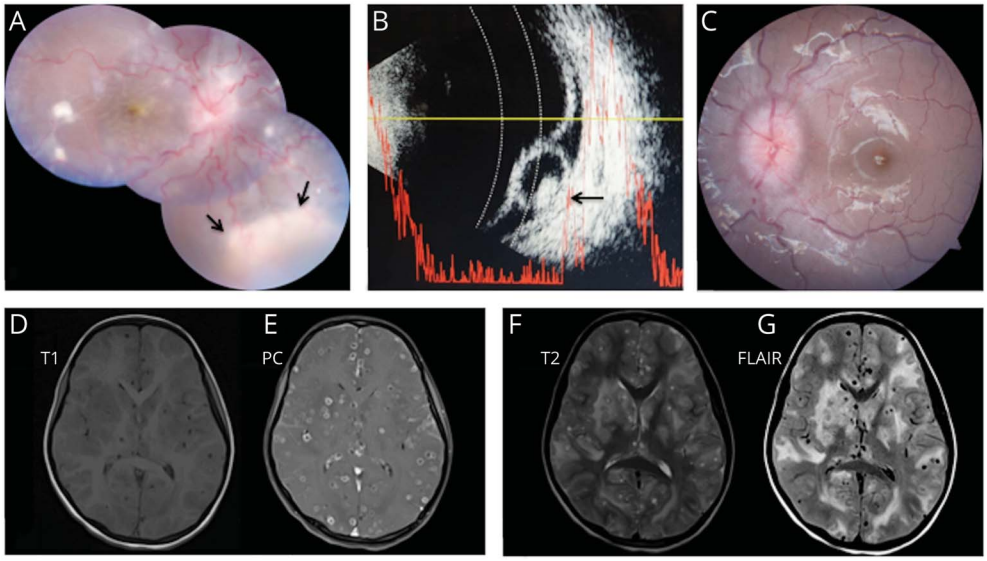
Figure Ocular and Brain MRI Images



(A) Fundus photograph of right eye shows disc edema, vascular tortuosity, vitritis, neurosensory detachment, and whitish subretinal lesion inferonasally (arrows). (B) Ocular ultrasound of right eye shows hyporefractive lesion with internal hyperreflectivity (scolex; black arrow) suggestive of subretinal cysticercosis. (C) The left eye shows disc edema with normal posterior pole. Brain MRI shows multiple parenchymal neurocysticercosis in various stages on T1-weighted (D) and T2-weighted (F) images, gadolinium enhancement of multiple cyst walls (E), and significant pericystic edema on fluid-attenuated inversion recovery (FLAIR) sequence (G).

A 10-year-old girl presented with right eye diminished vision for 6 months along with headache and intermittent vomiting for 3 weeks. Right eye examination (figure, A) revealed light perception vision, panuveitis, and an inferonasal whitish subretinal lesion confirmed as subretinal cysticercosis (SC) on ocular ultrasound (figure, B). The left eye (figure, C) was unremarkable except for disc edema. Brain MRI findings (figure, D–G) along with clinical features of intracranial hypertension including headache and vomiting suggested multiple neurocysticercosis (MNCC).[1] Oral steroids improved headache and vomiting, but not vision. Although surgical removal of SC was advised, the child's caregivers declined consent. Unilateral vision loss with panuveitis in MNCC may result from concurrent SC.[2]

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Study Funding

No targeted funding reported.

Disclosure

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

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Name	Location	Contribution
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Sreeram Jayaraj, MBBS	All India Institute of Medical Sciences, Rishikesh	Writing the first manuscript
Shalaka Ramesh Waghamare, MBBS	All India Institute of Medical Sciences, Rishikesh	Drafting the manuscript, review
Athul S. Puthalath, MBBS	All India Institute of Medical Sciences, Rishikesh	Review and critique
Niraj Kumar, MD, DM	All India Institute of Medical Sciences, Rishikesh	Conception, design, review and critique

References

1. Del Brutto OH, Nash TE, White AC Jr, et al. Revised diagnostic criteria for neurocysticercosis. J Neurol Sci 2017;372:202–210.
2. Ganesh SK, Priyanka. Analysis of clinical profile, investigation, and management of. ocular cysticercosis seen at a tertiary referral centre. Ocul Immunol Inflamm 2018;26:550–557.

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Neurology 2021;96;e2035-e2036 Published Online before print December 4, 2020
DOI 10.1212/WNL.0000000000011319

This information is current as of December 4, 2020

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