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Expect the unexpected- A case of Late Postpartum Eclampsia complicated with atypical lesion of PRES

Posterior reversible encephalopathy syndrome (PRES) is a clinico-radiological syndrome encountered in number of medical conditions like preeclampsia, eclampsia, acute or chronic renal disease, electrolyte imbalance, use of cytotoxic and immunosuppressant drugs. Clinical and radiological features of PRES include headache, seizures, cortical visual changes and parieto-occipital white matter edema on neuro-imaging modalities.

In this case report we present a rare phenomenon, a multiparous woman developing LATE POSTPARTUM ECLAMPSIA complicated with ATYPICAL PRES whose antenatal period was uneventful.

A 38 Y old multigravida admitted at 40 weeks of GA in latent phase of labour whose bp was 130/80 mmhg through out intrapartum delivered vaginally. After 12 hrs of immediate postpartum her bp raised to 170/100 mmHg and it was controlled by MgSO₄ pritchards regimen and IV antihypertensives. Patient was under strict BP surveillance and BP was within normal limits without any antihypertensives till PND 3. On PND4 patient complained of headache, visual disturbances and also had an episode of generalised tonic clonic seizures. Her BP was 170/100mmHg stabilised with MgSO₄ pritchards regimen again and IV antihypertensive and anti epileptics. MRI brain was taken and it showed ischemic changes in left pareito occipital lobe with differential diagnosis as PRES. Patient condition improved within 5 hours after treatment and follow up was uneventful. Our case is an atypical presentation of PRES with ischemic changes due to cerebral vaso constriction following late postpartum eclampsia was reversible due to timely intervention.

Keywords: PRES, Eclampsia, brain MRI, Antiepileptics.

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