Pseudo-porencephaly Mimicking Multiple Intracerebral Hemorrhages

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An 80-year-old female with an unknown medical history developed sudden right hemiparesis and was therefore transferred to our hospital. Neurological examinations revealed right hemiparesis, motor aphasia, and a disturbance of consciousness. Non-contrast CT on admission revealed multiple high-density areas, a picture compatible with multiple intracerebral hemorrhages (ICHs) (Picture A and B). However, a CT scan obtained one year previously revealed a basal structural brain abnormality (Picture C and D), which is considered to have played a role in the mimicking multiple ICHs; an inflow hematoma via a ventricular perforation of an ICH in the left frontal subcortex filled the space in the right occipital subcortex and forebrain. A brain CT image obtained 24 hours after onset, demonstrated high-density areas in the right occipital subcortex and the basal forebrain appeared to be less apparent than that in left frontal subcortex (Picture E and F), which indicated the wash out of the hematoma by cerebrospinal fluid (CSF), according to the density changes over time after the formation of the hematoma. Porencephaly is a rare congenital disorder that causes cystic degeneration and encephalomalacia with the formation of porencephalic cysts. (1) Organic abnormalities with an acquired etiology, such as stroke, are called “pseudo-porencephaly”. (2) In this case, with a medical interview of the patient’s family and past radiological images obtained later, a personal history of repeated subcortical cerebral hemorrhages with ventricular perforation due to cerebral amyloid angiopathy, followed by a structural brain abnormality presenting as pseudo-porencephaly was thus revealed. This condition can mimic multiple ICHs by an inflow hematoma filling pseudo-porencephaly via a ventricular perforation.

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Statement of Ethics
Written informed consent was obtained from the patient for the publication of this case report and any accompanying images.

References

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