Stroke as an unusual manifestation of systemic diseases: three case reports

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Abstract

In stroke there is a sudden damage of brain cells in a localized area due to inadequate blood flow. Several pathophysiologic processes may be involved: intrinsic to the vessel or to the blood; embolic; hypoperfusion; and rupture of a vessel. Various systemic conditions may trigger these processes and cause brain ischemia. The authors present three cases of ischemic stroke:

Case 1: A 26-year-old woman with systemic lupus erythematosus was admitted with headache and seizures. Cranial CT revealed left ischemic lesions. The patient then presented newly onset right hemiparesis. Cranial MRI confirmed subcortical lesions. Cyclophosphamide and corticosteroids were administered with improvement of general status and the patient was discharged with minor sequelae.

Case 2: A 28-year-old pregnant woman with 34 weeks of gestation, previously healthy, was admitted with severe headache and nausea. Cranial MRI showed thrombosis of left lateral dural sinus. The patient had obstetric history of one low-weight term birth. The investigation of prothrombotic states was suggestive of antiphospholipid syndrome and treatment with metilprednisolone, aspirin and low molecular weight heparin was started. The birth occurred at 38 weeks of gestation without complications and the newborn was healthy and normal weighted.

Case 3: A 36-year-old woman, with history of tuberculosis, in the third month of antibacilar therapy, was admitted with left peripheral facial paralysis and lack of strength on the right side of the body. During hospitalization, the patient presented left hemiplegia and worsening of the state of consciousness. Cranial CT scan showed right ischemic stroke and hydrocephalus. Ventriculoperitoneal shunt was performed with consciousness improvement but persistence of left hemiplegia.

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