

Clinical-Medical Image

Schizencephaly in the Adult with Epilepsy

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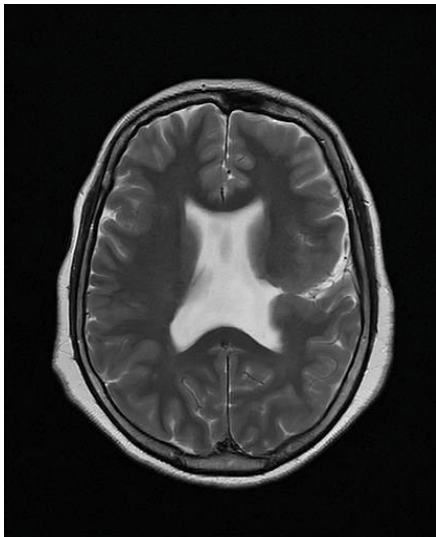


Figure 1: Magnetic resonance, T2-weighted images, axial section showing the left frontal sulcus widened and communicated with the left ventricle, and widening of bilateral ventricles.

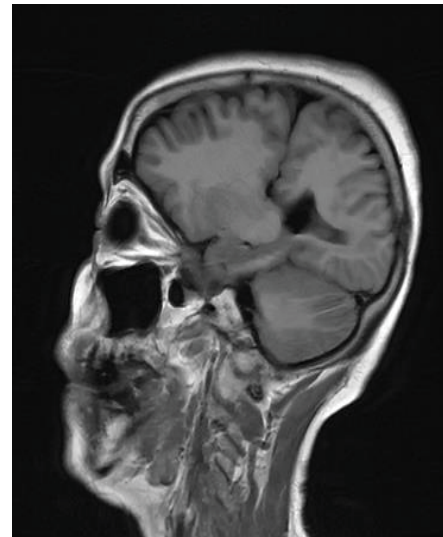


Figure 2: Magnetic resonance, T1-weighted images, sagittal section, showing the left frontal sulcus widened and communicated with the left ventricle, and without showing the septum pellucidum.

Clinical-medical Image

A 52-year-old woman was admitted to the hospital from the emergency department after spasms with paroxysmal. Her medical history was more than 40 years of symptomatic epilepsy and irregular oral antiepileptic drugs. After receiving phenobarbital and sodium valproate treatment, the symptoms improve. But the patient developed excessive daytime sleepiness after discontinuing sodium valproate, the heart rate was 66 beats per minute, and the blood pressure was 116/70 mm Hg. On physical examination, she had hypersomnia, with Limb muscle strength of Grade 3, a positive Bilateral Babinski sign. Magnetic resonance imaging of the head showed that the left frontal sulcus widened and communicated with the left ventricle, and without showing the septum pellucidum (Figures 1 and 2). A diagnosis of Schizencephaly was made. The patient was awake on the 6th day after stopping phenobarbital use. At follow-up 3 month later, the patient had no recurrence [1-3].

Keywords: Schizencephaly; Hypersomnia

References

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