Living in the right hemisphere – a large porencephalic cyst

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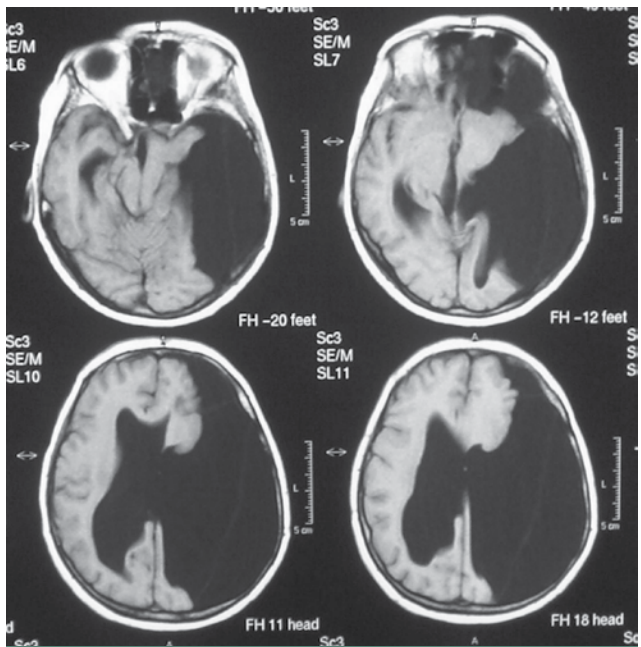
CASE REPORT

Female, 54 years of age, married with one child, admitted to the Internal Medicine service through the Emergency service, with left hemiparesis and dysarthria of sudden onset. Personal history of "meningitis" with right hemiparesis since childhood. Prior to this hospitalization, the patient was independent. On admission, the patient was aware and apparently oriented, with mild right spastic hemiparesis, left hemiparesis, and dysarthria. In the computed axial tomography carried out, a hypodense, left paramedian cerebellar area was observed, suggesting ischemic lesion, and a left parietal frontal-temporal hypotense area occupying nearly all the left cerebral hemisphere, with density approximately equivalent to that of the CSF. The patient was admitted with diagnoses of ischemic stroke in the territory of the right posterior cerebral artery, and cerebral malformation. Magnetic resonance imaging of the brain was carried out for clarification, revealing an extensive porencephalic cavity involving nearly all the left brain hemisphere, with only the occipital cortex and lenticular nucleus being preserved on that side. This cavity is in continuation with the ventricular system (*Fig. 1*). In the evaluation of the posterior fossa, alteration of the posterior-basilar part and left cerebellar hemisphere was noted, which we also relate to sequelae of ischemic accident. The patient showed favorable evolution during hospitalization, presenting, on the date of discharge, the neurological deficits that were present prior to admission. No family history of stroke or cerebral vascular accidents, including in children.

DISCUSSION

Porencephaly is defined as the presence of intraparenchymatous cavities in the cerebral hemispheres, filled with CSF and which communicate with the ventricles and/or subaracnoideal space.[1,2] Porencephaly tends to occur in childhood, and the majority of cases are associated with infection or anoxic-ischemic lesion.[3,4] Despite the severe hypoplasia of the left hemisphere, the neurodevelopment of the patient was relatively preserved. The hypothesis that this alteration could be a sequelae of neonatal stroke appears to be the most likely one. ■



Cerebral MRI in T1 – extensive and near-total destruction of the left cerebral hemisphere, replaced by CSF.

FIG. 1

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