



Subcortical T2 Hypointensity in the Setting of Diabetic Non-Ketotic Hyperglycemia

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Keywords

Hyperglycemia; T2 hypointensity; MRI

Abbreviations

FLAIR: Fluid-Attenuated Inversion Recovery

Clinical Image

A 59-year-old right-handed diabetic man who presented with two days of altered mental status and intermittent right sided shaking. His blood glucose level was 350 mg/dl with HbA1c level of 15%. EEG showed seizures originating from the left posterior quadrant. MRI brain showed T2 hypointensity in the subcortical white matter of the left occipital lobe with superficial enhancement (Figure 1 and 2). Follow-up MRI showed marked improvement in signal abnormalities. There have been only few case reports describing focal T2hypointensity in seizures with diabetic non-ketotic hyperglycemia [1,2].

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Received Date: 25 Oct 2017

Accepted Date: 20 Nov 2017

Published Date: 27 Nov 2017

Citation:

Al Kasab S, Yazdani M. Subcortical T2 Hypointensity in the Setting of Diabetic Non-Ketotic Hyperglycemia. *Neurol Disord Stroke Int.* 2017; 1(1): 1001.

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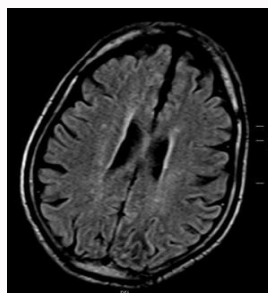


Figure 1: FLAIR weighted image shows hypointensity in the subcortical white matter of the left occipital lobe.

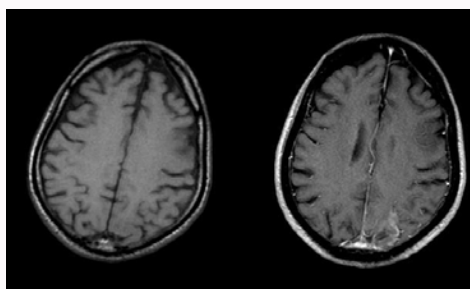


Figure 2: T1-weighted pre and post contrast MRI image showing contrast enhancement in the left occipital area that corresponds with T2 signal abnormality.

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