

CASE PRESENTATION

MARCHIAFAVA -BIGNAMI DISEASE

BY-T. VIDYA REDDY(PG 2ND
yr RADIODIAGNOSIS)

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- **A 60yr old male pt was referred to the department of radiology for MRI brain from Miryalguda.**

PRESENTING COMPLAINTS

- 1. Pt was having difficulty in speech and decreased memory since few months**
- 2. He was a chronic alcoholic but stopped consuming alcohol since 2yrs.**

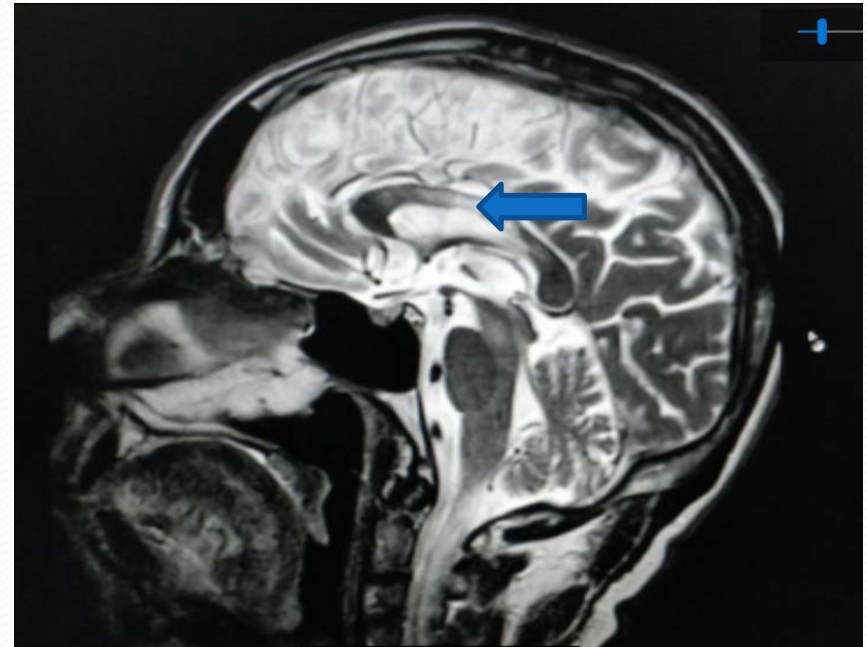
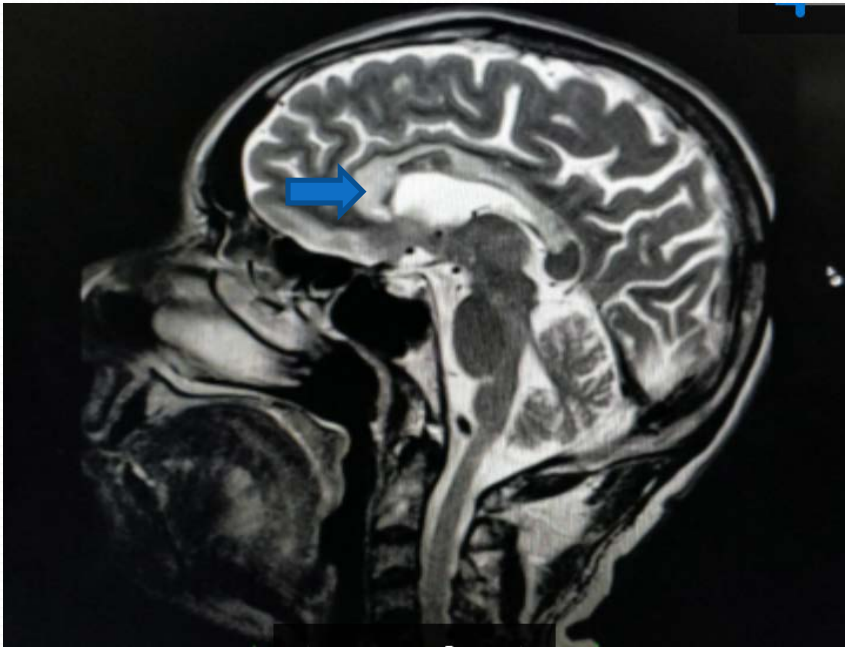
PAST HISTORY – No history of stroke, hypertension , diabetis, epilepsy ,tuberculosis ,asthma and connective tissue disorders.



IMAGING

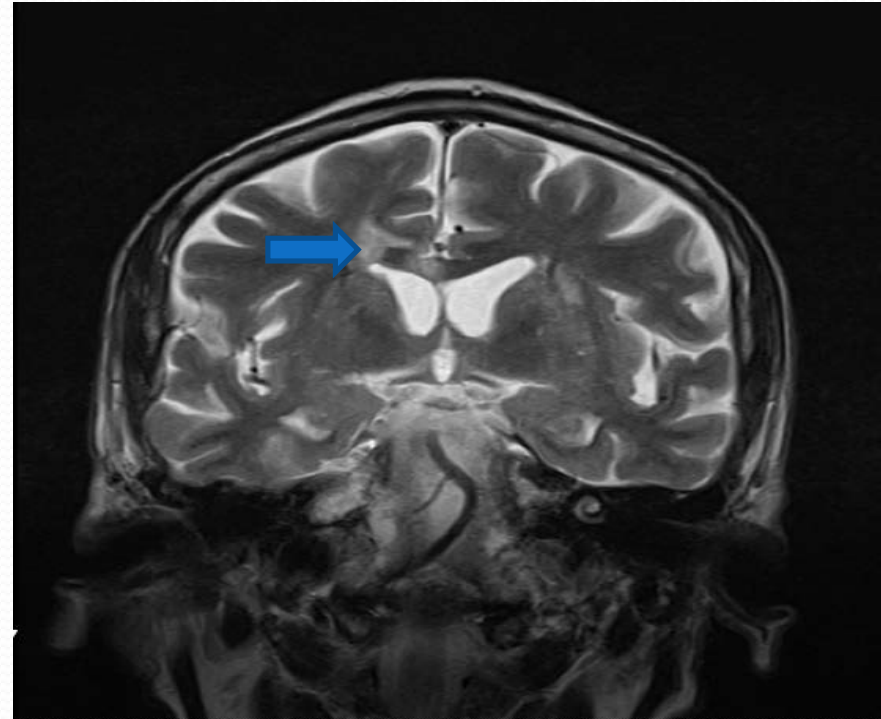
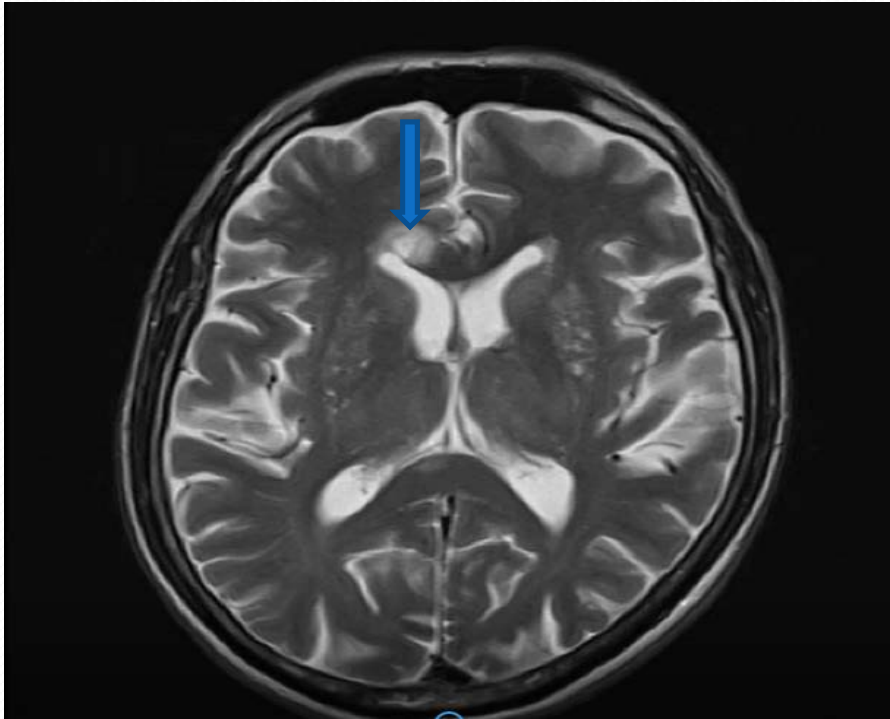
MRI T2 weighted sagittal image

- **Hyperintensities in genu and body of corpus callosum predominantly involving the central fibres and Mild edema of the corpus callosum can be noted.**



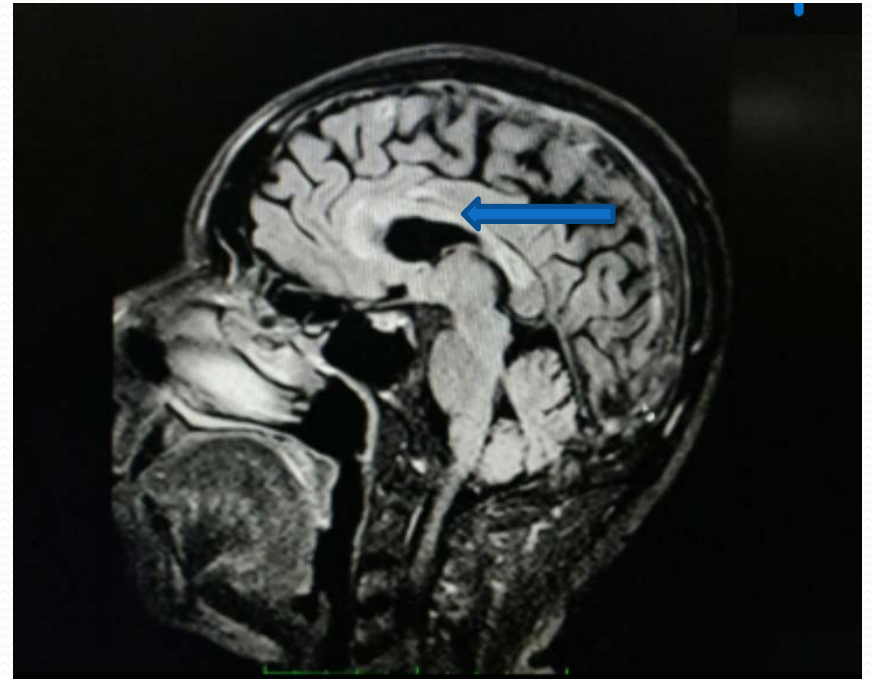
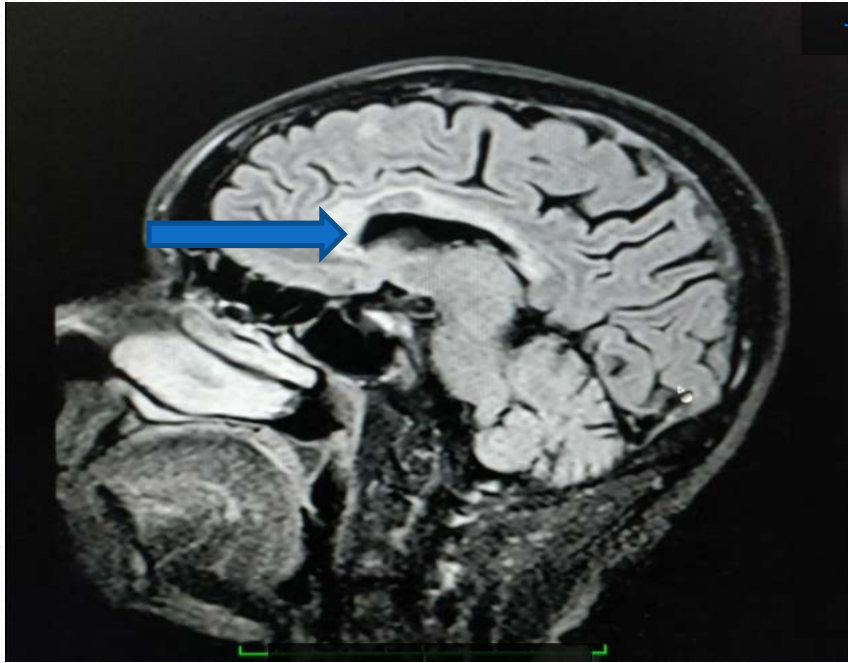
MRI T2 weighted images

- Hyperintensities noted in the genu and body of corpus callosum



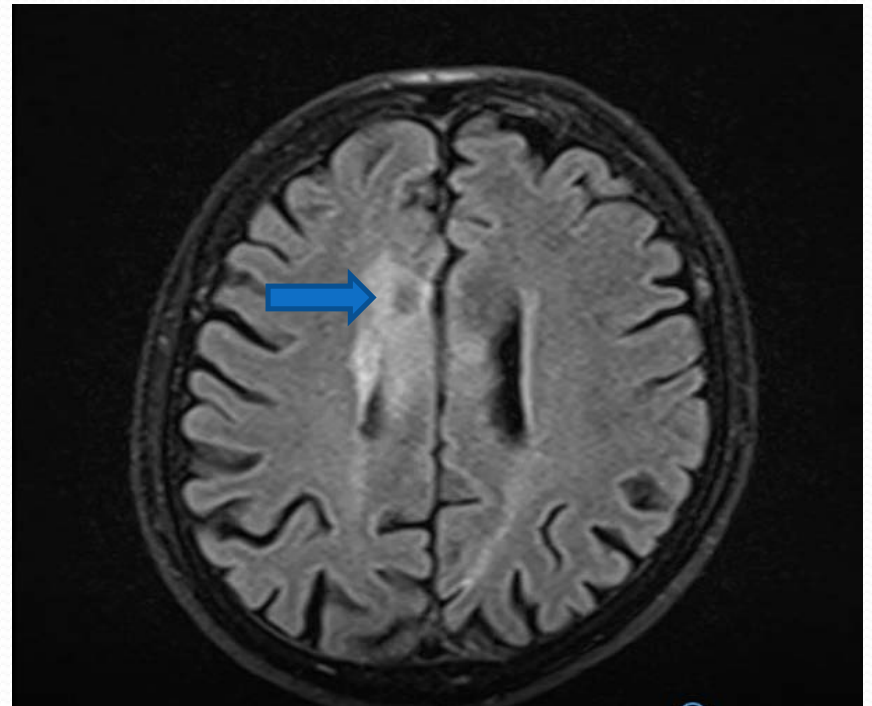
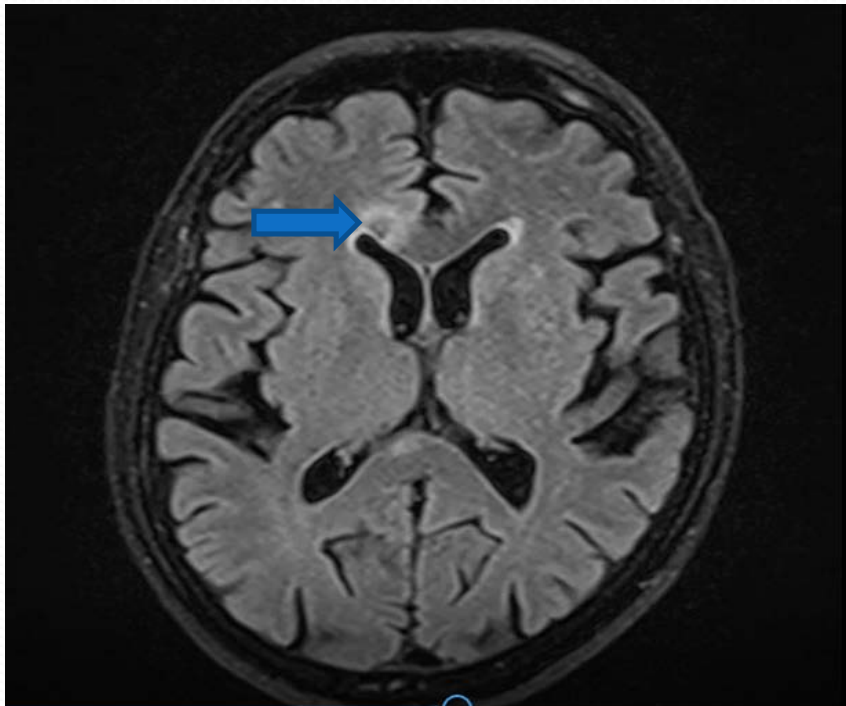
MRI FLAIR images

- Hyperintensities noted in the genu and body of corpus callosum .



MRI AXIAL FLAIR IMAGES

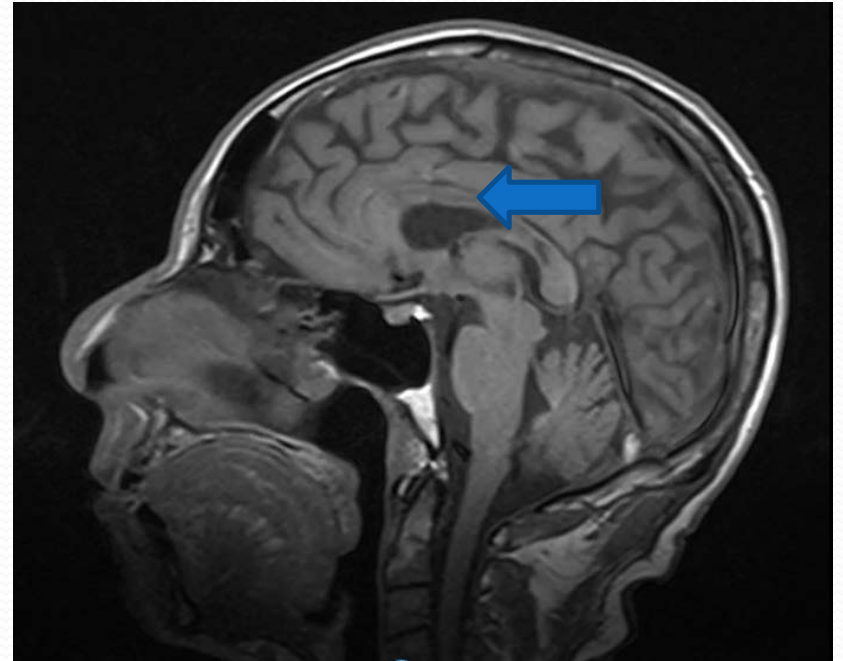
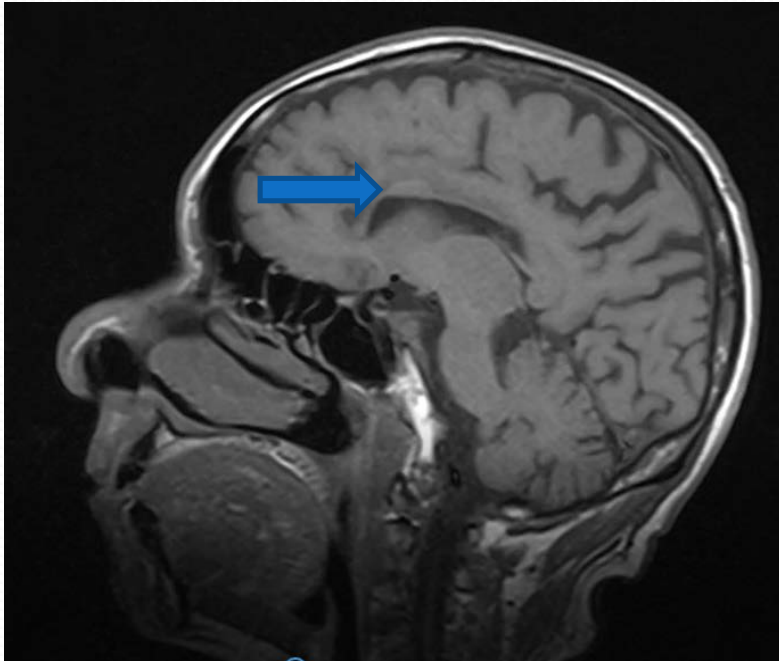
- Hyperintensities noted in genu of corpus callosum



MRI T1 weighted images

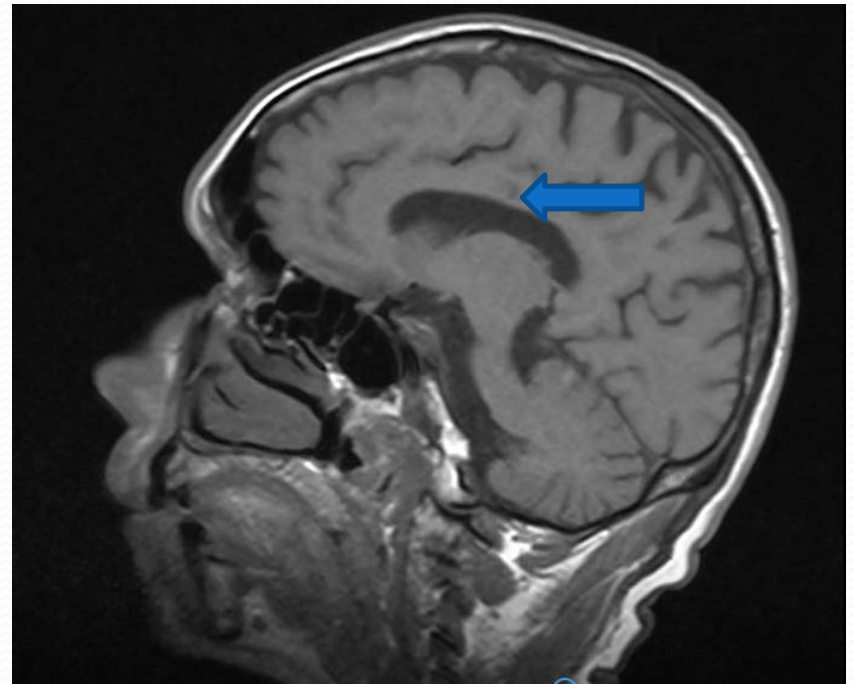
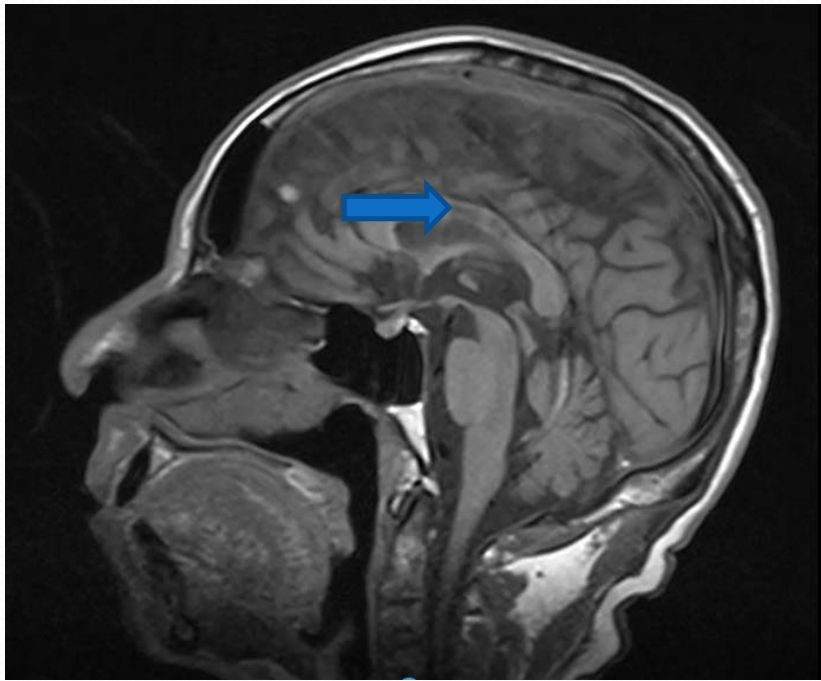
sagittal

- Hypointensities noted in genu and body of corpus callosum sparing the splenium



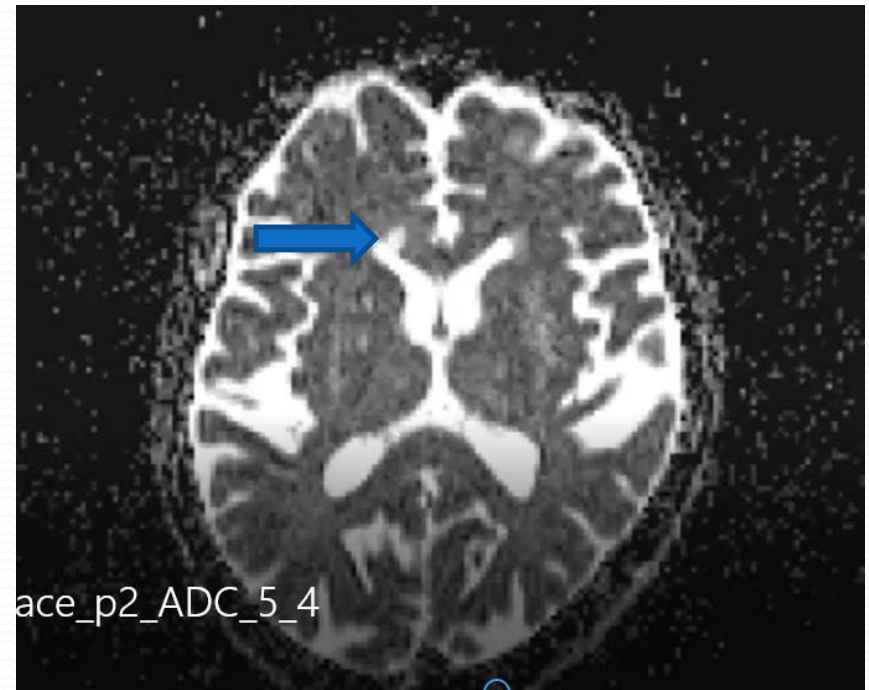
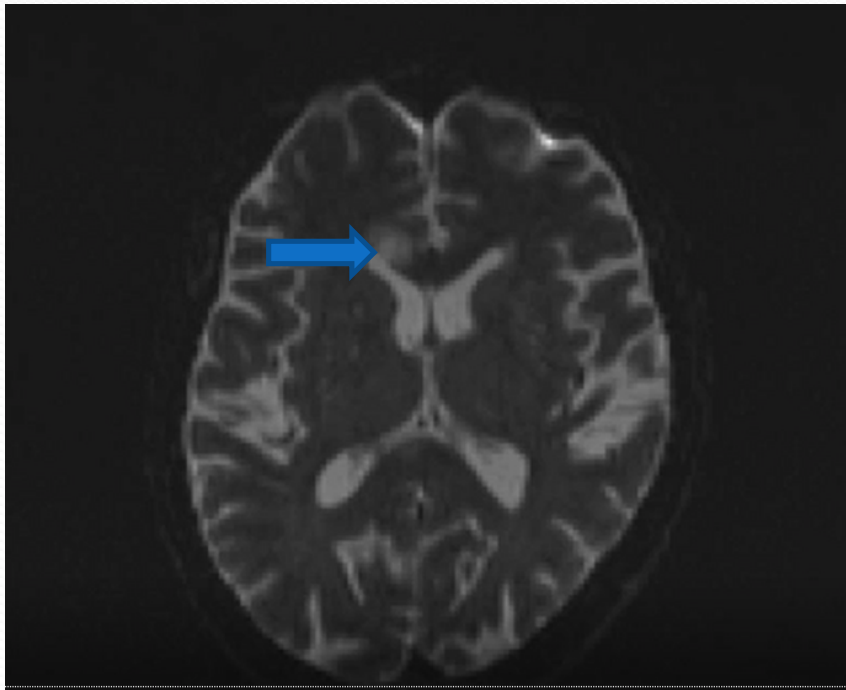
MRI T1 weighted images

- Hypointensities noted in genu and body of corpus callosum sparing the splenium



MRI Diffusion weighted images

No diffusion restriction.



FINAL DIAGNOSIS

- **Corpus callosum was predominately involved in all MRI sequences involving the central fibres of the genu and body .**
- **Final diagnosis was made by a combination of MRI findings and clinical features as**
- **MARCHIAFAVA-BIGNAMI DISEASE.**

DIFFERENTIAL DIAGNOSIS

- **INFARCT** : Isolated infarcts of corpus callosum are unlikely as corpus callosum is a highly vascular structure.
- **MULTIPLE SCLEROSIS** : Presentation is usually between adolescence and the sixth decade.
- Lesions occur in calloseseptal interface.
- **SUSAC SYNDROME**: Typically effects young females
- It presents with triad of features.
- Encephalopathy , branch retinal artery occlusion and hearing loss.



THANK YOU