TENSION-TYPE HEADACHE AND FAHR'S DISEASE: A CASE REPORT

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Bilateral, symmetric, calcium and other mineral deposits occur in basal ganglia, thalamus, cerebellum, and white matter off cerebral hemisphere are rare disorders. Tha basal ganglia are the most common site of involvement. This disease may be lined sporadic such as radiation, systemic disease, toxins, hypoparathroidy, pseudohipoparathroidy and hyperparathroidy also familial. Hypoparathyroidism and Fahr's disease (progressive idiopathic strio-pallidodentat calsinozis) are the most common two pathologies in etiology of bilateral calcifications. Clinically it may present frequently with neurophyschiatric, extrapyramidal or cerebellar symptoms. Extrapyramidal problems are the most commonly seen clinical finding in these patients. In this article we presented a 55 year-old woman with Fahr disease but lacking extrapyramidal symptoms or a metabolic disorder with severe headache.