

Posterior reversible encephalopathy syndrome in rapid progressive glomerulonephritis

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Posterior reversible encephalopathy syndrome (PRES) is a disease that developed reversible vasogenic edema on brain. Although the pathophysiology of PRES is not fully understood, several clinical conditions are related with the development of PRES, for example renal failure, use of cytotoxic drugs or eclampsia which associated with endothelial dysfunction. Here we report a case of PRES related with rapid progressive glomerulonephritis (RPGN) that associated with P-ANCA. A 66 year-old woman with history of P-ANCA related RPGN was consulted for generalized seizure. She admitted on nephrology because of AKI and was taking immunosuppressive agents. Brain MRI demonstrated high signal intensity which suggested vasogenic edema on T2 weighted image in both frontoparietal lobes, posterior temporal and occipital lobes and right cerebellum. EEG suggested diffuse cortical dysfunction. Follow up brain MRI revealed improved vasogenic edema. PRES is a benign and reversible when the causative factor can be treatable. In this case, improvement of renal failure and discontinuation of immunosuppressive agents seem to have improved PRES.