

Paraneoplastic encephalitis from breast cancer as a stroke mimic

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80 year old woman with no significant medical history was admitted for left hemiparesis and aphasia that appeared two and a half hours before. The clinical examination revealed: two generalized tonic-clonic seizures, left hemiparesis, global aphasia, left visual preference, left central facial palsy, alert and right inverted nipple. Cerebral CT scan revealed doubtful left internal capsule hypodensity. The symptoms were interpreted as an acute stroke and IV thrombolysis was performed. 24 hours cerebral control CT was normal. Given the unmodified neurological status with signs of diffuse cerebral lesions and no single vascular territory involved, a possible encephalitis was considered. The lumbar puncture revealed: elevated protein concentration, normal glucose level, normal cell count and negative culture. The MRI showed a signal alteration in the white matter of the left frontal lobe that could suggest a pathological substrate of an encephalitis. Under IV Acyclovir and without any clinical improvement a paraneoplastic etiology was more plausible. The ultrasonography of the breast revealed: hypoechoic, inhomogeneous nodular lesion, microcalcifications and significant vascularisation. The needle aspiration showed a specific aspect for invasive lobular mammary carcinoma. 5 days after the admittance we started administrating IV immunoglobulin. Under immunoglobulin administration the clinical state of the patient improved spectacularly in 2 weeks. Case particularity: mimic of a stroke.