A woman with language disturbance
B Menon, B Vengamma

Answers on page 342.

A 42 year old right-handed woman presented to the emergency services with sudden onset of weakness of the left upper and lower limbs with inability to speak in the past 24 hours. She had type 2 diabetes mellitus for the past five years and was normotensive. Her birth and developmental history was normal. She had studied until 10th standard (12 years of education) and spoke only her mother tongue. She did not have any childhood brain damage. General examination was normal. She was conscious and had a non-fluent aphasia with impaired comprehension and intact repetition. She was unable to read and write. She had Medical Research Council (MRC) grading 4 weakness on her left upper and lower limbs. Plantar response was extensor on the left side. Her haemogram and renal function tests were normal. Her fasting and postprandial plasma glucose was 7.2 mmol/l and 11.7 mmol/l respectively. Her lipid profile showed hypertriglyceridaemia (7.7 g/l) and hypercholesterolemia (2.2 g/l). Figure 1 shows the computed tomogram of the head at admission.

QUESTIONS
(1) What does the patient’s computed tomogram show?
(2) What is her language dysfunction?
(3) How can her language dysfunction be explained on the basis of the computed tomogram?
(4) What would be the recovery profile of this patient?

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Authors’ affiliations
B Menon, B Vengamma, Sri Venkateswara Institute of Medical Science, Tirupati, India

Correspondence to: Dr B Menon, Department of Neurology, Sri Venkateswara Institute of Medical Science, Tirupati, Andhra Pradesh, India 517507; bindumenon_2003@yahoo.com

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IMAGES IN MEDICINE

White retinal vessels

A 69 year old woman with a history of diabetes mellitus presented with acute abdominal pain, nausea, and vomiting. Clinical, laboratory, and radiological findings were consistent with a diagnosis of acute pancreatitis. Fundus examination showed a milky-white discoloration of some blood retinal vessels in both eyes (fig 1). This ophthalmoscopic appearance, termed lipoaemia retinalis, is an unusual retinal manifestation of hypertriglyceridaemia and occurs only in pronounced raised concentrations of serum triglycerides.1 Our patient had a triglyceride concentration of 82.64 mmol/l (reference <2.03 mmol/l). She made an uneventful recovery, and one week after admission triglycerides decreased to 6.17 mmol/l while the creamy-white appearance of retinal vessels reverted to normal.

N Akritidis, E Galiatsou, K Paparounas
Department of Internal Medicine, Hatzikosta General Hospital of Ioannina, Greece

Correspondence to: Dr K Paparounas, Department of Internal Medicine, Hatzikosta General Hospital, 45001 Ioannina, Greece; kostpap@otenet.gr

REFERENCE
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N Akritidis, E Galiatsou and K Paparounas

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