

HASHIMOTO'S ENCEPHALOPATHY

A RARE DISORDER: Case report

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Background

Hashimoto's encephalopathy (HE) is a rare, progressive and relapsing multiform disease, characterized by seizures, movement disorders, subacute cognitive dysfunction, psychiatric symptoms and responsiveness to steroid therapy.

Case report

A 55-year-old woman was admitted to hospital with a history characterized by nocturnal confusional episodes and subacute neurological symptoms as cognitive decline, neuropsychiatric symptoms and tremor. The patient had subclinical hypothyroidism. On neurological examination there were apathy, partial orientation in time and space, distractibility, speech fluent, no cranial nerve deficits, no cerebellar signs, no motor and sensory deficits. Blood tests, including complete blood, liver function tests, kidney function tests and electrolytes, homocysteine levels and neoplastic markers were all normal. The Venereal Disease Research Laboratory test (VDRL) was negative. Laboratory tests for viral markers including the human immunodeficiency, hepatitis C viral antibodies and hepatitis B virus antigen were negative. Thyroid hormone level was normal, Antithyroid peroxidase antibodies were elevated. Examination of cerebrospinal fluid (CSF) demonstrated unspecified inflammation characterized by lymphocytic pleocytosis and slightly elevated proteins, normal levels of tau/fosfo-tau and beta-amyloid. CSF Antithyroid peroxidase antibodies were positive. Brain magnetic resonance Imaging (MRI) and brain computed tomography (CT) scan were normal. Electroencephalography showed a normal record. FDG-PET showed widespread hypometabolism. The neuropsychologic evaluation showed impairment in working memory, processing speed and executive functioning. During the hospitalization the patient presented a progressive recovery without pharmacological treatment. Confusional episodes regressed and cognitive symptoms improved. A neuropsychological evaluation after two months showed a complete recovery of cognitive functions.

Conclusions

Hashimoto's encephalopathy (HE) is a rare disease and neuropsychiatric disorders are common manifestations. Our case showed a complete recovery without steroid therapy and could explain other undiagnosed cases had spontaneous recovery. A systematic review is required with the aim of examining clinical factors related to neuropsychiatric manifestations and to the treatment of HE cases described in the literature to assist physicians and formulating accepted criteria in HE diagnosis.

References

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