

Cerebral Arteriovenous Malformation Presenting as Epilepsy

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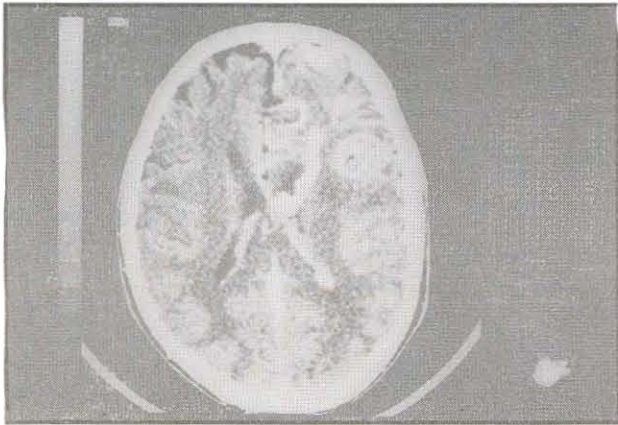


Fig. 1

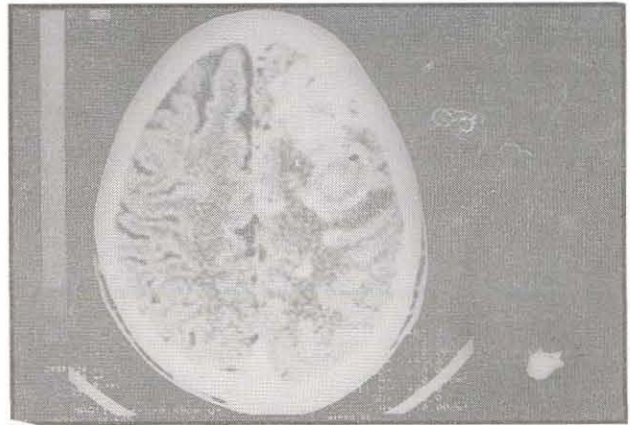


Fig. 2

C.T. Scan of brain of a 58 year old male patient showing a large left fronto parietal AVM (Fig. 1) with haemorrhage in it(Fig-2). Our patient, a 58 year old male who had history of seizures since the age of 15 years, was taking anticonvulsants off an on with frequency of seizures as once or twice in a year. There was no history of headache, vomiting or visual disturbance. Only for the last six months he noticed right sided progressive weakness for which he came to the hospital. On examination he was normotensive, nondiabetic, having grade 3 weakness on right side with supranuclear 7th nerve palsy and right planter was upgoing. Fundus examination was normal. CT scan of the brain showed large AVM in left frontoparietal area with haemorrhage in it which might be responsible for causing weakness on the right side of body. The diagnosis was established when he got weakness and underwent CT scan examination otherwise he was being treated as idiopathic epilepsy.

Arteriovenous Malformation(AVM) consist of a tangle of dilated vessels which form an abnormal communication between the arterial and venous systems. AVM's can manifest as seizures, headache, progressive weakness & TIA's. Most AVM's are clinically silent for a long time but sooner or later they bleed. The first haemorrhage may be fatal but in more than 90% of cases the bleeding stops and the patient survives. The rate of haemorrhage in untreated patient is about 4% per year. The treatment of choice is surgical excision. AVM's have also been treated with low dose focused proton beam.

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