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MELIORA 2023-THE STUDENT MEDICAL CONFERENCE OF KMC MANIPAL Day-3: Case Oral/Podium Presentation,Case Poster Presentation

Aug 3rd, 9:00 AM - 1:00 PM

A CASE OF RECURRENT STROKE IN AN ELDERLY

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A CASE OF RECURRENT STROKE IN AN ELDERLY

Presenter's Name : Khushi Garg Year of study : 2023 Phone no. 7042473362 Department : Emergency Medicine

INTRODUCTION:

Stroke is a cerebrovascular accident with reduced blood supply to a part of the brain causing acute disruption of brain function. Cerebrovascular Accidents are classified into Ischemic Stroke and Hemorrhagic Stroke. Ischemic Stroke results from occlusion of cerebral blood vessels due to blood clot or thrombus while Hemorrhagic Stroke is due to rupture of blood vessels causing bleeding . Recurrent cases are usually seen in larger arteries due to atherosclerosis and Cardioembolic strokes. 5-20% of recurrent stroke cases occur in the first year alone.

<u>**CASE PRESENTATION**</u>: A 70 year old lady presented with acute onset of Left Upper Limb weakness noticed on waking up , which progressed to Left Lower Limb within 2 hours. No history of Chest pain and Palpitation.

Past history with similar episode of Right Sided Hemiparesis and Global Aphasia one year back. With conservative treatment she was able to walk but aphasia persisted. History of BPAD \sim 5 years , on Antipsychotic Drugs .

Hypertension and Diabetes Mellitus ~ 2 years ,not on treatment.

On examination, patient was conscious but not oriented. Vitals are stable.

Lipid profile was deranged. CT scan revealed acute and chronic infarct of Left Middle Cerebral territory and subacute infarct of Right Middle Cerebral territory.

GCS: E4V1M4

Global Aphasia

Left upper and lower limb hypotonia and Right upper and lower limb hypertonia . Bilaterally exaggerated DTR with Babinski's Sign positive.

CASE DISCUSSION:

An elderly female with non compliance to known comorbidities came with two strokes in past one year. First episode involved Right Hemiparesis with Global Aphasia and repeated stroke involved Left Hemiparesis. History is suggestive of Thrombotic Stroke. In this case cause of recurrence could be poorly managed hypertension, diabetes mellitus, dislipidemia and poor secondary prevention following the first stroke.

MANAGEMENT :

Antiplatelets and Statins Medication for Diabetes and Hypertension Supportive care with physiotherapy