



# 08/24/21 Neuro Morning Report with @CPSolvers



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<p><b>CC:</b> Memory Loss</p> <p>82yF with memory loss for the past year. Comes in with daughter. She finds herself <b>repeating herself several times</b> during a conversation. <b>Has handed over finances and medical management to daughter.</b> Not driving anymore because her daughter “felt nervous”.</p>	<p><b>Vitals:</b> Normal  <b>Exam:</b>  <b>Systemic:</b> Normal  <b>Neuro</b></p> <ul style="list-style-type: none"> <li>- <b>Mental Status:</b></li> <li>- <b>Cranial Nerves:</b> Normal</li> <li>- <b>Motor:</b> Normal</li> <li>- <b>Reflexes:</b> Normal</li> <li>- <b>Sensory:</b> Normal</li> <li>- <b>Cerebellar:</b> Normal</li> <li>- <b>Memory: Orientation</b> (Time %, Place %), <b>Registration:</b> 3/3, <b>Attention and Calculation:</b> %, <b>Language:</b> 5/8, <b>Recall</b> 0/3, <b>Copying</b> % Total score= 20/30</li> </ul>	<p><b>Problem Representation:</b> Elderly female w/CV risk factors presents w/ chronic and progressive memory loss without changes in motor/sensory exam.</p> <p><b>Teaching Points (Vale):</b> #EndNeurophobia  <b>Memory loss:</b> Who is the patient? Older age</p> <ul style="list-style-type: none"> <li>- <b>Tempo is queen:</b> Hyperacute (vascular) Acute (toxins, infections, metabolic), subacute (inflammatory, autoimmune), chronic (age-related, dementia, depression).</li> <li>- <b>Localization:</b> Episodic Memory (Temporal lobe-Hippocampus), working memory (Frontal Lobe). You cannot test memory if there is attention impairment. <ul style="list-style-type: none"> <li>- HSV has tropism for limbic system. NMDA encephalitis.</li> <li>- Creutzfeldt-Jakob Disease: rapid onset, myoclonus.</li> <li>- PCA territory: Occipital lobe + hippocampus and part of thalamus.</li> </ul> </li> </ul> <p><b>Transient Global Amnesia:</b> Sudden loss of anterograde memory. Keep asking the same question over and over again. Triggered by an emotional event, lasts less than 24 hours.</p> <p><b>Toxicities:</b> B12, B1 and B3 deficiency, copper deficiency due to zinc ingestion, cobalt toxicity (associated w/hip prosthetics).</p> <p><b>Dementia:</b> Reversible causes (depression, hypothyroidism, B12 deficiency, neurosyphilis) vs Irreversible causes (Alzheimer, Vascular-executive functions impaired, UMNs signs, stepwise progression is not so common, Frontal Lobe, Lewy Body, HIV associated neurocognitive disorder). Alzheimer progresses 3 points in the MMSE/year.</p>
<p><b>PMH:</b> ACD triple vessel CABG. Depression and hyperlipidemia.</p> <p><b>Meds:</b> Aspirin, atorvastatin B complex, magnesium, zinc, Sertraline.</p>	<p><b>Fam Hx:</b> None</p> <p><b>Soc Hx:</b> Widow. Lives with daughter</p> <p><b>Health-Related Behaviors:</b> None</p> <p><b>Allergies:</b> None</p>	<p><b>Notable Labs &amp; Imaging:</b>  <b>Hematology:</b> WBC, CMV, TSH, Vit B12, UA, RPR, HIV were normal.</p> <p><b>Imaging:</b>  CT w/o contrast: <b>Mild generalized cerebral atrophy w/o further changes.</b></p> <p><b>Final Diagnosis: Probable Alzheimer's disease.</b></p> <p>MMSE 3mo and 1 year later 18/30 and stop driving.</p>