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A “seemingly normal but strange” case with right basal ganglia infarction

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I am presenting a 72-year-old woman with 14 years of school education, who had forgetfulness but did not consult doctors because of self-unawareness. Her family observed that she had no apparent dementia; however, she was “going her way” since more than 10 years, and recently everything seemed strange than before. She showed confabulation, risk management disorder (ex. fire accident, fraud), and ADL disorder at home (ex. toilet, eating behavior). At the memory clinic, neuropsychological tests revealed her disabilities in free drawing with over-expression of language, suggesting the right frontal lobe dysfunction. Neuroimaging findings of MRI and SPECT successfully revealed cerebral infarction in the right basal ganglia region and decreased cerebral blood flow in the right frontal lobe (remote effect). After a case conference with the patient herself, her daughter, a care manager, a doctor, and a psychologist, which was held for the purpose of informing the diagnosis and importance of drug treatment for improving cerebral blood flow and preventing reattack, she had changed her mind and decided to take medicine and receive social support.

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