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Comments on “Unilateral Reversible Posterior Leukoencephalopathy Syndrome after Coiling of an Aneurysm”

Louis R Caplan

Division of Cerebrovascular Disease, Department of Neurology, Beth Israel Deaconess Medical Center, Harvard Medical School, Boston, MA, USA

I write concerning the case described as *Unilateral reversible posterior leukoencephalopathy syndrome after coiling of an aneurysm* reported by Huijgen et al.¹

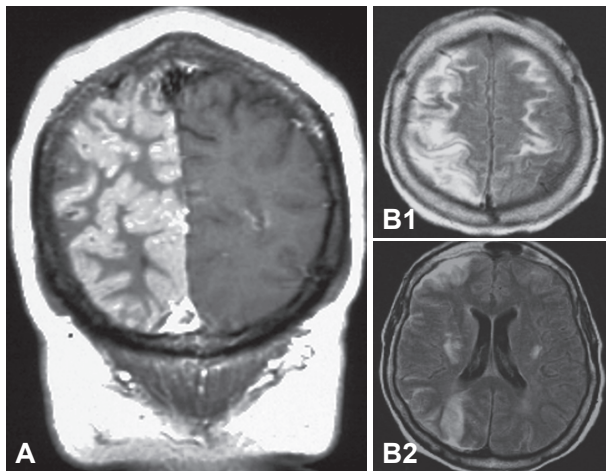


Fig. 1. Fluid attenuated inversion recovery sequences of MRI scans. MRI show increased signal involving unilateral (A) or bilateral (but predominantly unilateral) (B1 and B2) gyri and their underlying white matter in two patients who developed severe migraine.

The patient reported in this case study developed a very severe headache during triple-H therapy after coiling of an aneurysm. The abnormalities that developed on MRI are those of edema that followed the pattern of involving gyri and their underlying white matter. I have seen this pattern in two other patients who developed severe migraine (Fig. 1) Each had a history of migraine. The findings in each of my patients and the patient reported by Huijgen et al.¹ were fully reversible. I am confident that these findings represent an unusually severe migraine syndrome and not posterior reversible encephalopathy syndrome. These clinical and MR findings have not been sufficiently reported in the literature.

Conflicts of Interest

The author has no financial conflicts of interest.

REFERENCE

1. Huijgen W, van der Kallen B, Boiten J, Lycklama À Nijeholt G. Unilateral reversible posterior leukoencephalopathy syndrome after coiling of an aneurysm. *J Clin Neurol* 2014;10:59-63.

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Correspondence

Louis R Caplan, MD, Division of Cerebrovascular Disease, Department of Neurology, Beth Israel Deaconess Medical Center, Harvard Medical School, Palmer 127, West Campus, 330 Brookline Ave, Boston, MA 02215, USA

Tel +1-617-632-8910, **Fax** +1-617-632-8920

E-mail lcaplan@bidmc.harvard.edu

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