FUNCTIONAL NEUROLOGIC DISORDER MIMICKING STROKE IN THE IMMEDIATE POSTPARTUM PERIOD

Niharika Gupta MD, Nancy H Greenspon MD, Joseph B Bavaro MD, MS
McGaw Medical Center of Northwestern University – Chicago, IL

Background

- Acute neurologic changes in the immediate postpartum period represent a time-sensitive obstetric emergency with potentially devastating maternal outcomes.

- Patients with hypertensive disorders of pregnancy are at an increased risk of cerebrovascular events.

- We present a case of profound neurologic depression and global akinesia following a traumatic, operative vaginal delivery.

Case: A 24-year-old G1P0 with a pregnancy course notable for preeclampsia without severe features presented in active labor.

- One hour after delivery, the patient was found with her eyes open but unresponsive to verbal commands, sternal rub, or painful stimuli.
- Vitals at the time were notable for SBPs >160mmHg.
- Due to concern for acute cerebrovascular pathology, a stroke code was activated.
- CT and MRI of the brain revealed no evidence of intracranial hemorrhage, ischemic stroke, or posterior reversible encephalopathy syndrome (PRES).
- The patient began to spontaneously regain minimal movement in all extremities.
- She was diagnosed with an acute functional neurologic episode following a traumatic delivery.

Teaching Points

- Functional neurologic episodes have a wide array of symptoms including seizures, motor weakness, movement disorders, amnesia**,** and visual symptoms.

- In preeclamptic patients with sudden neurological changes, imaging, labs, and potentially EEG should be pursued to exclude PRES, eclampsia, and stroke.

- Awareness of the acute stress response in the postpartum period may inform clinicians against further unnecessary and even harmful interventions.