

included and, full detailed history and examination were conducted by a neurologist.

Result

The study included 31 women whose ages range between (18) years old to (65) years old. It revealed that 83.8% patients had generalized epilepsy, 12.9% had focal epilepsy. 15 women out of 31 were well controlled, and 13 were not well controlled ($n = 28$). Cosmetic effects were recognized to be 64.6% due to the drugs and 32.2% were due to post-epileptic trauma. 26.6% showed a catamenial seizure, 13.3% and 6.4% of the patients had primary and secondary infertility respectively. As a obstetrical complications 6.5% had miscarriage, 3.22% preterm delivery, and 3.22% neonatal death. Also 64.6% of patients were stigmatized.

Conclusion

Cosmetic effects of antiepileptic drugs are more frequent in women. Also the drugs have effect on the reproductive health of the female, like obstetrical complications, fatal abnormalities, and infertility.

Keywords: Sudanese women, Epilepsy

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Poster Session 2

Neurosyphilis presenting as longitudinal extensive transverse myelitis [LETM]

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Introduction

Neurosyphilis can affect spinal cord with meningomyelitis, meningovascular disease or tabes dorsalis. Rarely it can present as Long segment extensive transverse myelitis [LETM].

Case report. A 47 years old male presented with acute onset progressive weakness with gait disturbance, parasthesia over bilateral hands, legs with bladder bowel dysfunction for 15 days. He did not have fever, trunk weakness, dysphagia, dysarthria, vision impairment.

Cognitive functions and cranial nerves were normal. He had hypertonia in all 4 limbs with a power grade 4/5, with exaggerated deep tendon reflexes, extensor plantars and absent abdominal reflexes. He had sensory ataxia with positive Romberg's sign and Lhermitz sign.

MRI spine showed altered signal intensity areas from medulla to mid body of T7 vertebra, with lesion extending over 3 or more vertebral segments typically involving centre of the cord over more than 2/3 of spinal cord area suggestive of LETM raising a suspicion of neuromyelitis optica (NMO). Hemogram, renal function and electrolytes were normal and HIV was negative. CSF analysis showed lymphocytic pleocytosis and elevated proteins with normal glucose. His S. RPR and CSF VDRL were positive. He was treated with intra-venous methylprednisolone and Ceftriaxone for 2 weeks followed by oral prednisolone. On follow up, his symptoms

improved and repeated S. RPR showed reduced titre values and repeat CSF was normal.

Conclusion. Eleven patients with syphilitic LETM have been reported in literature, all with positive HIV. Syphilitic meningo-myelitis in absence of HIV is rare. Exclusion of syphilis is important prior to considering neuromyelitis optica in LETM cases.

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Poster Session 2

A case report: Successful treatment of influenza B associated acute necrotizing encephalopathy in an adult using combination of high dose oseltamivir-ivig-pulse methylprednisolone

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Summary

Influenza associated acute necrotizing encephalopathy is a disease rarely seen in an adult and is rather frequently poor prognosis presented as disturbance in consciousness followed by 1–3 days of upper respiratory tract infection symptoms. Although existence of findings for necrosis of bilateral thalami in radiological imaging and history of recent influenza are indicators of diagnosis the absence of definite diagnostic criteria and indistinguishable clinical presentation, makes influenza associated acute necrotizing encephalopathy diagnosis hard. Definite treatment has not been achieved yet and various treatment methods have been declared in relation with case reports. In this paper, a successful treatment of influenza B associated acute necrotizing encephalopathy with high oseltamivir - IVIG - high dose methylprednisolone is presented in a case of an adult female of age 40 who didn't have any medical history and referred with encephalopathy.

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Poster Session 2

Fasudil in combination BMSCS attenuates Alzheimer's disease-related changes through the regulation of the peripheral immune system

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