

Asian young man with repetitive seizures

Case report: Male patient, Asian (Malaysia), 27 years old, he related that since 15 years old had sequential tonic-clonic seizures (total of 6 episodes) type "grand mal", with loss of consciousness. These episodes were interpreted by the physician of the neighborhood as convulsive attacks. However, lack of aura, initial pallor and final flushing, without identifying a cause, such as drugs, fever, or other factors. All events occurred at dawn during nighttime sleep. After the crisis there was urinary and fecal incontinence. Several EEGs resulted always normal. He is in regular use of antiepileptic drugs (phenobarbital 100 mg / day), even though the events continued.

Family history: A first-degree uncle died suddenly with 35 years old. Additionally, a younger brother also had seizures.

Physical examination: nothing worthy of note.

ECG 1:

ECG 2: 72h after the first one.

Normal echocardiogram.

ECG signal-averaged (SAECG) with abnormal LPs.

Questions:

1. Which is the diagnosis of the first ECG?
2. Which is the diagnosis of the second ECG? Why atrial fibrillation?
3. Which is the result of ajmaline challenge?
4. Which is the appropriate approach?

We will look forward to your valuable opinions.

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Português - Reporte de caso: Paciente masculino, asiático (Malásia), 27 anos, refere que desde os 15 anos de idade apresenta eventuais episódios convulsivos tônico-clônicos (total 6 episódios) tipo “gran mal”, com perda da consciência e interpretados pelo médico do bairro como sendo ataques comiciais, pela ausência de aura, palidez inicial e rubor final, sem identificação de uma causa, como drogas, febre, ou qualquer outra alteração. Todos os eventos ocorreram de madrugada durante o sono noturno. Sempre após as crises verificou-se incontinência urinária e fecal. Vários eletroencefalogramas resultaram sempre normais. Em uso regular de fenobarbital 100 mg/dia, mesmo assim os eventos continuaram.

Antecedentes familiares: um tio de primeiro grau teve morte súbita com 35 anos, um irmão menor também teve convulsões.

Exame físico: nada digno de nota.

Ecocardiograma normal.

ECG 1:

ECG 2: realizado 72h depois.

ECG A signal-averaged ECG (SAECG) with abnormal LPs

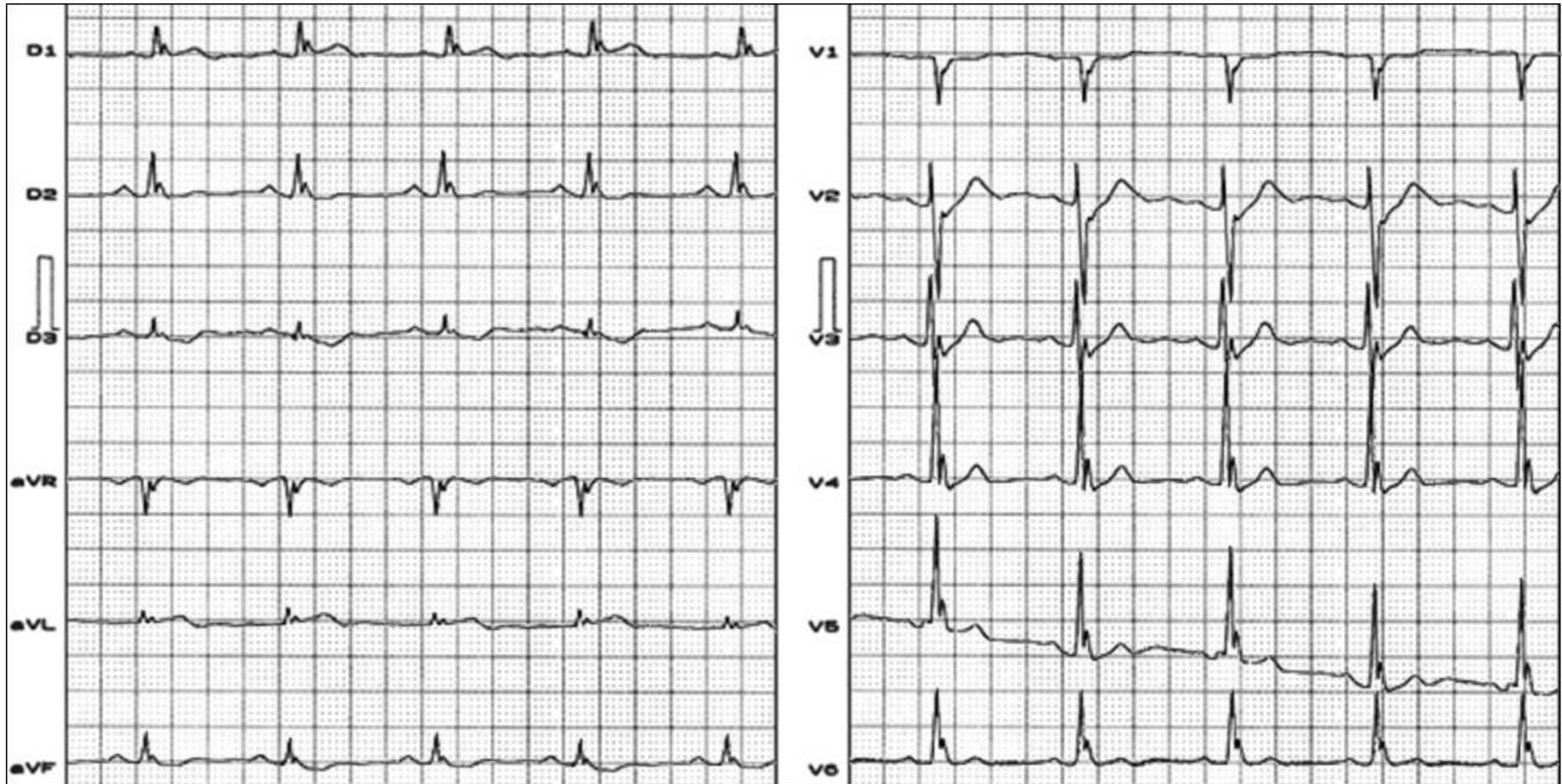
Perguntas:

1. Qual o diagnóstico do primeiro ECG?
2. Qual o diagnóstico do segundo ECG? Por que fibrilação atrial?
3. Qual o resultado do teste de ajmalina?
4. Qual a conduta adequada neste caso?

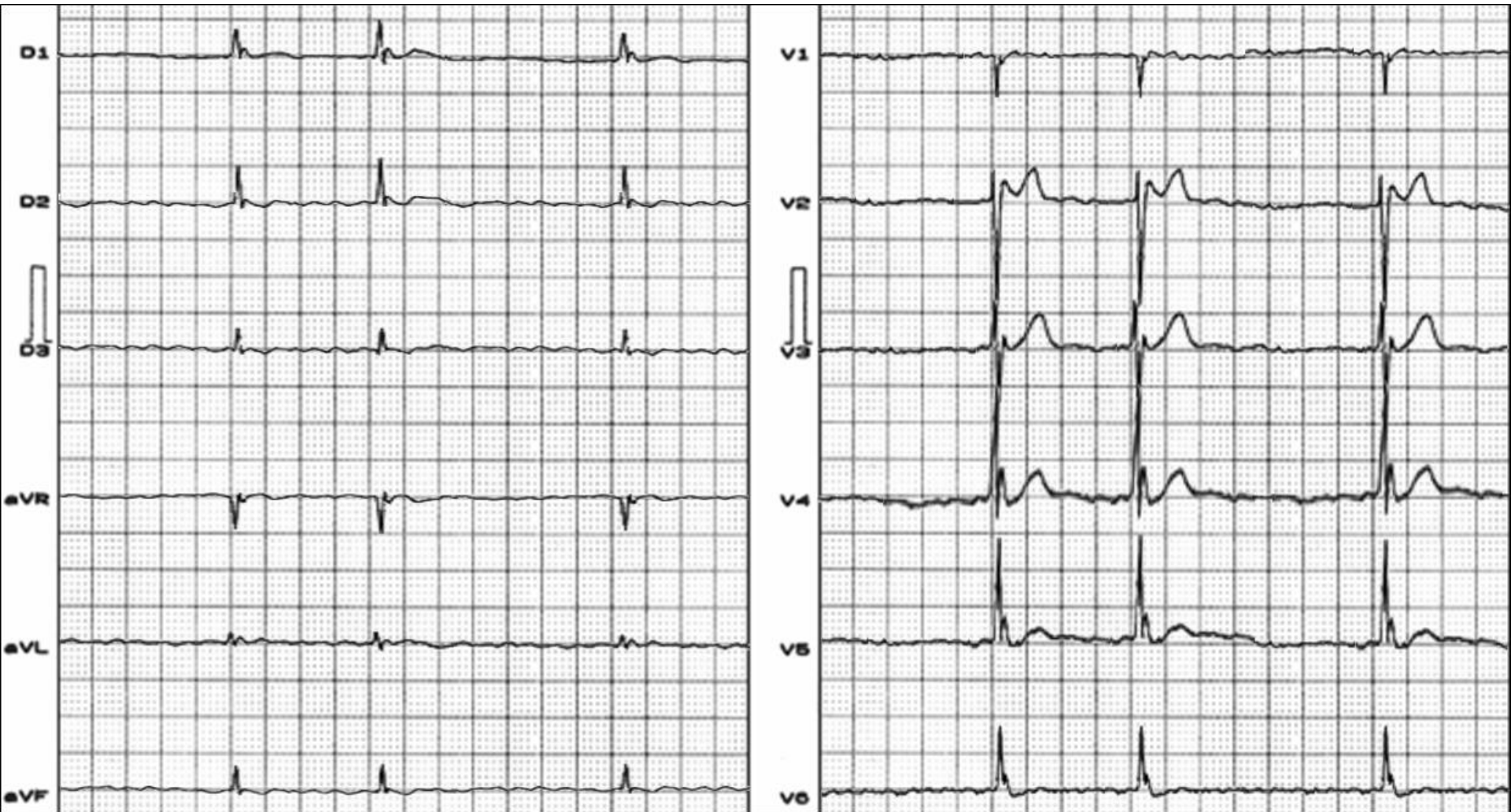
Esperamos pelas suas valiosas opiniões.

Andrés Ricardo **Pérez-Riera**, M.D.Ph.D.

ECG 1 – First consultation



ECG 2 – 72h later. He complained of palpitations



We performed intravenous ajmaline test. See next slide.

Before ajmaline



After ajmaline

