

Natureza do trabalho: Relato de caso

TÍTULO

CATAMENIAL EPILEPSY ASSOCIATED WITH NEUROCYSTICERCOSIS: A CASE REPORT

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RESUMO

Introduction: The phenomenon of women who experience exacerbation of epileptic seizures with the menstrual cycle is called Catamenial Epilepsy. Several catamenial patterns have been reported, including perimenstrually (the most common), in the periovulatory period, and in anovulatory cycles. We present a case of catamenial epilepsy in association with neurocysticercosis, a main cause of acquired epilepsy. **Case report:** Z.F.P.A., a 30-year-old female, started to have near daily unprovoked tonic-clonic generalized seizures by the age of 6. She became seizure free on (unknown) medication after 3 years and for the next 7 years. The seizures then recurred, 2-3 times a month, and a diagnosis of neurocysticercosis was eventually made, and carbamazepine was initiated. The treatment of neurocysticercosis could not be determined. In the last 3 years, the seizures occurred during the menstrual period only, as many as 5 times a day for 15 days. Hence the diagnosis of a catamenial epilepsy has been made. The general and neurological physical examinations were unremarkable. The gynecological and obstetrical investigation revealed one cesarean section and two unprovoked abortions. Blood tests results were normal. The treatment with progesterone was precluded for the patient wants to get pregnant. **Discussion:** Catamenial epilepsy patterns differ between ovulatory and anovulatory cycles. During ovulatory cycles, most seizures occur approximately 3 days before onset of menstrual flow and persist for about 6 days. These seizures appear to be triggered by the perimenstrual progesterone withdrawal. The first-line treatment for catamenial seizures, as for any seizure type, is the most effective antiepileptic drug in monotherapy. Studies have demonstrated that there is a subset of those with catamenial epilepsy who may benefit from intermittent progesterone, but the pattern of exacerbation that would predict benefit remains unknown. Yet, there is no evidence in the literature supporting any connection between neurocysticercosis and catamenial epilepsy.