



Abdominal Aura as a Presentation of Cavernous Hemangioma

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Keywords

Abdominal pain; Epilepsy; Temporal lobe; Cavernous Hemangioma; Pediatrics

Clinical Image

We report the case of an 8-year-old girl with self-limited episodes of colicky abdominal pain for months. The family consulted for 5 episodes of similar abdominal pain in the last 8 days that woke the patient at night, followed by a vacant gaze, sialorrhea, and spasmodic movements in the 4 limbs for approximately 15 seconds, after which the pain subsided and the patient remained asymptomatic. Physical examination was normal. Electroencephalography suggested right mesial temporal lobe epilepsy, and magnetic resonance imaging showed a lesion consistent with cavernous hemangioma (Figure 1). The patient was treated with carbamazepine to control the seizures and referred to neurosurgery to remove the lesion.

Focal seizures with impaired consciousness are the most common presentation of mesial temporal lobe epilepsy. They can be preceded by an epigastric aura and may be the consequence of a structural brain abnormality [1].

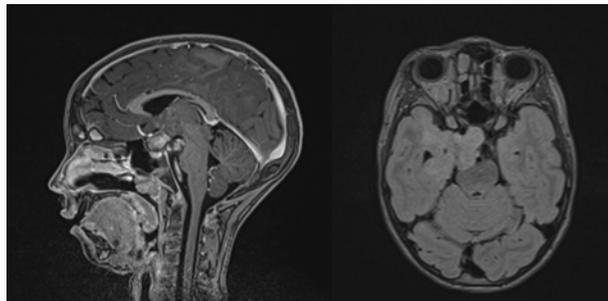


Figure 1: Magnetic resonance: Sellar and suprasellar mass with lobulated margins, invading and displacing. The pituitary stalk with mass effect on the midbrain and pons. Edema of the right temporal lobe.

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Reference

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