

Posterior Reversible Encephalopathic Syndrome: Treating the Puzzling Syndrome of PRES

Lorraine Valeriano BSN, RN, CNRN
Lehigh Valley Health Network, Lorraine.Valeriano@lvhn.org

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Posterior Reversible Encephalopathic Syndrome: Treating the Puzzling Syndrome of PRES

Lorraine Valeriano, B.S.N., R.N., C.N.R.N., Lehigh Valley Health Network, Allentown, Pennsylvania

Objectives

1. Discuss the puzzling clinical features of PRES.
2. Review case studies that illustrate the devastation that can occur quickly in the presence of PRES.
3. Outline diagnostic and treatment modalities that can limit the evolution of brain injury caused by PRES.

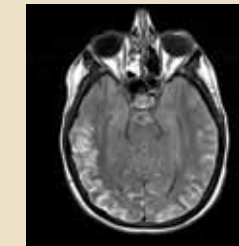
Clinical Presentation

- Headache
- Nausea/vomiting
- Confusion
- Lethargy/stupor
- Behavioral changes
- Vision changes
- Blurred vision
- Hemianopsia
- Cortical blindness
- Epileptic manifestations

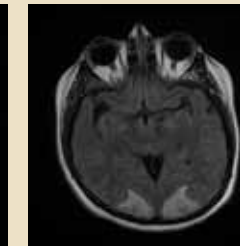
Solving the Symptom Puzzle Can Cause Time Lost to Find the Correct Diagnosis

- Rule out migraine
- Rule out spine/disc disease
- Rule out GI virus/infection
- Rule out malignant HTN
- Rule out muscular/skeletal process
- Rule out post-partum symptoms
- Rule out vision/retina process
- Rule out narcotic related symptoms
- Rule out seizure disorder

Definitive Diagnostic Modality



Case Study 1



Case Study 2

Treatment Modalities

- Aggressive BP control
- Seizure prevention
- Osmotic diuresis to reduce cerebral edema
- Prevent shift/herniation using EVD
- Vaginal delivery

Case Studies

24 year-old female

- Bifrontal Headache 4 days Post partum
- Blurred vision 10 days post partum
- Blind 11 days post partum
- Clinical findings
 - Vasogenic edems bilateral temporal and parietal regions
- Outcome
 - Home in 2 weeks with minimal deficits

56 year-old female

- C/O neck and shoulder pain
 - MRI normal
 - Muscle relaxants
 - Pain medications
 - Trigger point injections
- Increased confusion/amnesia
- Sudden onset of 10/10 headache
- Loss of visual acuity
 - Clinical findings
 - Vasogenic edema bilateral occipital lobes
- Outcome
 - Intracranial Bleed
 - D/C to Rehab with Moderate deficits