2025/06/26 05:34 1/2 Central pontine myelinolysis

Central pontine myelinolysis

Central pontine myelinolysis, is a rare disorder of pontine white matter.

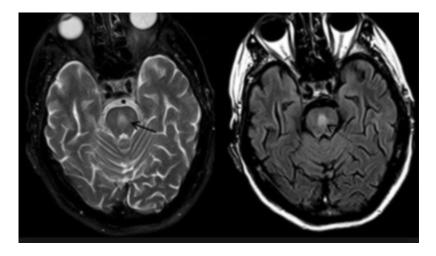
Some cases of inordinately rapid hyponatremia treatment have been associated with osmotic demyelination syndrome (which includes central pontine myelinolysis (CPM) ¹⁾ and extrapontine myelinolysis, as well as other areas of cerebral white matter.

First described in alcoholism ²⁾ producing insidious flaccid quadriplegia, mental status changes, and cranial nerve abnormalities with a pseudobulbar palsy appearance. In one review ³⁾ no patient developed CPM when treated slowly.

And yet, the rate of correction correlates poorly with CPM; it may be that the magnitude is another critical variable ⁴⁾. Features common to patients who develop CPM are ⁵⁾

- delay in the diagnosis of hyponatremia with resultant respiratory arrest or seizure with probable hypoxemic event
- rapid correction to normo-or hypernatremia(>135mEq/L) within 48 hours of initiating therapy
- increase of serum sodium by >25 mEq/L within 48 hours of initiation of therapy
- over-correcting serum sodium in patients with hepatic encephalopathy
- NB: many patients developing CPM were victims of chronic debilitating disease, malnourishment, or alcoholism and never had hyponatremia. Many had an episode of hypoxia/anoxia ⁶⁾
- presence of hyponatremia >24 hrs prior to treatment 7).

Diagnosis



Axial FLAIR MRI.

1)

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2)

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