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GETTING TO THE ROOT OF THE PROBLEM: AN UNUSUAL CASE OF TRANSIENT NEUROLOGICAL SYMPTOMS

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10.1136/jnnp-2014-309236.192

A 51 year-old gentleman, who was otherwise well, presented with transient left-sided weakness in April 2013. It resolved spontaneously and completely within a few hours, and he was discharged. Symptoms recurred in May 2013 and persisted. MRI brain at that time showed bilateral parietal lobe lesions, the differential diagnosis being thrombotic or metastatic emboli, cavernous malformations, or AVMs. The patient subsequently developed three painful intramuscular masses in his right calf, biopsy of which identified pleomorphic sarcoma and suggested metastatic disease as the unifying diagnosis. Whole body CT identified a soft tissue mass of the ascending aorta, and the patient went on to have a rtic resection in December 2013. He developed epilepsia partialis continua affecting his right arm around the time of surgery, which was difficult to control. Histology identified an intimal sarcoma of the ascending aorta, and this had metastasised to brain and calf. It carries a poor

prognosis. This case of a rare cause of 'TIA-like' symptoms highlights the importance of early brain imaging, and investigation of bilateral parietal lobe lesions.