Case Description A 36 year old woman presented seven days post-partum with a one day history of confusion, progressive headache, sudden loss of vision and a seizure. She had a normal pregnancy and her baby was delivered by an uncomplicated elective caesarean section.

On arrival in hospital, she was febrile at 38.2oC, hypertensive with a blood pressure of 171/103 mm Hg rising to 200/100 mm Hg and she had a Glasgow Coma Scale score of E1V3M5.

Her blood pressure was promptly managed with intravenous antihypertensives. There was initial debate regarding her diagnosis due to the atypical and delayed presentation of eclampsia. Differential diagnoses including pituitary apoplexy, meningoencephalitis and venous sinus thrombosis were considered and specialists from the endocrinology, obstetrics and neurology teams were consulted.

The radiology findings were typical for PRES, enabling the diagnosis to be made.

Discussion This case describes PRES secondary to eclampsia seven days postpartum, when typically, eclampsia in the postpartum period occurs within the first 48 hours. Prompt management of PRES often results in a good prognosis and brain lesions in PRES are often reversible.

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POSTERIOR REVERSIBLE ENCEPHALOPATHY SYNDROME IN PUERPERIUM

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Introduction PRES is characterised by headaches, seizures, disturbed vision and altered mental function in combination with classical radiological findings.