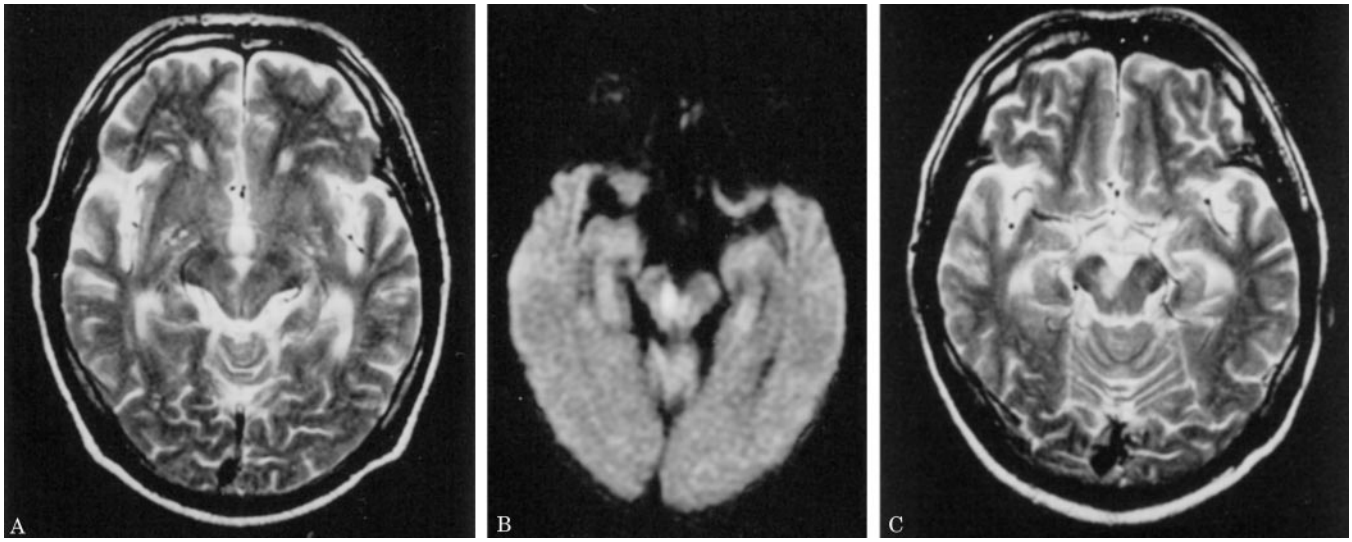

Figure. (A) T2-weighted MR image performed 6 hours after the onset of symptoms demonstrates a subtle hyperintensity area in the midbrain. (B) Diffusion-weighted MR image performed at the same time clearly demonstrates a hyperintensity area around the superior cerebellar peduncle just below and medial to the red nucleus. (C) T2-weighted MR image performed 4 days after the onset demonstrates a hyperintensity in the corresponding area.

MRI of Claude's syndrome

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A 74-year-old man presented with sudden onset of right oculomotor palsy with sparing of the pupil and marked ataxia of the left upper limb. In 1912, the French neurologist Henri Claude first described the syndrome of ipsilateral oculomotor nerve palsy with contralateral asynergia that bears his name.[1] Claude syndrome is caused by a lesion of the ventromedial midbrain, resulting in the combination of an ipsilateral oculomotor palsy and contralateral ataxia. There have been few studies describing the MR appearance of lesions associated with this syndrome.[2] MR imaging clearly localized the lesion of Claude syndrome in this case (figure).

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