Neuro *Images*

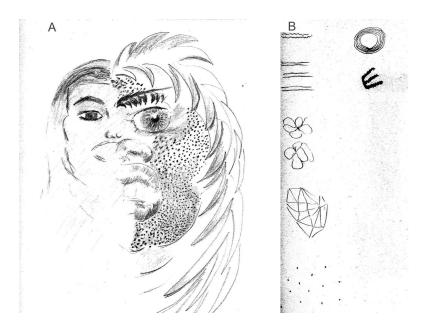


Figure 1. (A) The patient's own drawing of macropsia demonstrates disproportionate magnification of right face of a person. Numerous dots represent magnified hair pores. (B) The patient's own drawing shows the list of unformed hallucinations during seizure.

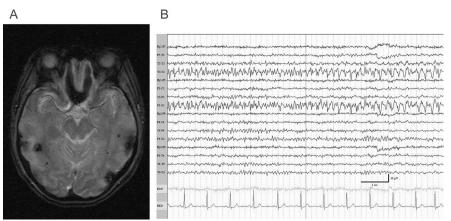


Figure 2. (A) Gradient echo imaging demonstrates multiple cavernous hemangiomas. (B) EEG discovered electrographic seizure in left occipital region.

Visual illusory and hallucinatory phenomena in a patient with left occipital seizures

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A 60-year-old woman had sudden onset transient visual symptoms in her right visual field after having worsening postural headaches for 1 year. Visual symptoms included

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palinopsia or abnormally recurring visual imagery, macropsia, unformed hallucinations, and hemianopia (figure 1). The symptoms lasted from 5 minutes to a few hours. Imaging demonstrated multiple cavernous hemangiomas including one involving the left temporo-occipital region (figure 2). Electrographic left occipital seizures were correlated with unformed hallucinations. The symptoms resolved with topiramate.

Seizures in the occipital region are reported to cause unformed hallucinations or hemianopia, and rarely the ones involving temporo-parieto-occipital junction can present visual illusory symptoms. 1,2

^{1.} Norton JW, Corbett JJ. Visual perceptual abnormalities: hallucinations and illusions. Semin Neurol 2000;20:111-121.

^{2.} Blume WT, Wiebe S, Tapsell LM. Occipital epilepsy: lateral versus mesial. Brain 2005;128(Pt 5):1209-1225.



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