A 68-year-old woman presented with a four-year history of progressive difficulty performing daily activities like dressing, and sometimes colliding with objects when walking. An ophthalmology consultant excluded primary visual changes. Evaluation revealed apperceptive visual agnosia, simultanagnosia, optic ataxia, oculomotor, dressing and constructive apraxia. Other cognitive domains were relatively spared. Brain [18F]FDG-PET-CT showed bilateral temporoparietal hypometabolism with occipital cortex extension (Figure), compatible with the hypothesis of posterior cortical atrophy, a neurodegenerative syndrome with an early and progressive decline in visuospatial and visuoperceptual skills, attributable to Alzheimer’s disease pathology in most patients, that could be assessed by cerebrospinal fluid biomarkers, which were not available in this case.

**Figure.** Brain [18F]FDG-PET images showing bilateral temporoparietal hypometabolism with extension to the occipital cortex, including its superior parts and transition with the temporal and parietal lobes. Left column - 3D-SSP reconstructions of the brain metabolic map in the right lateral projection (A1) and projection of the Z-map comparison with a group of healthy individuals in the right lateral (A2) and posterior views (A3). Right column - [18F]FDG-PET transaxial views.
References

