

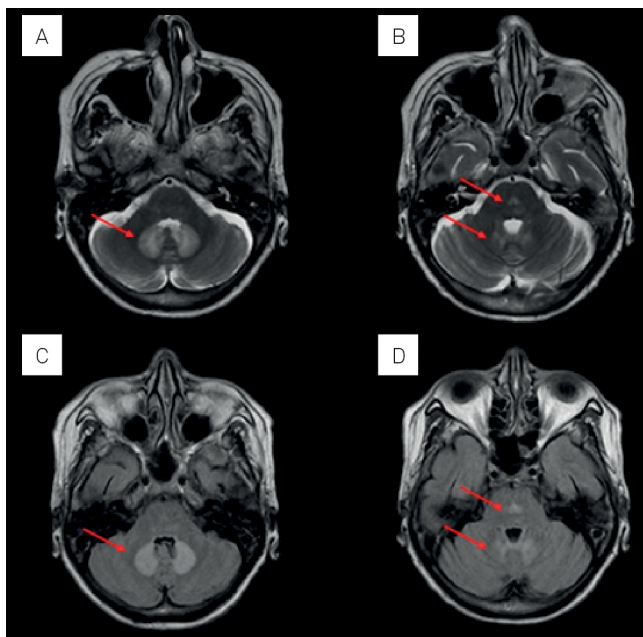
# Metronidazole neurotoxicity in late liver transplantation

Neurotoxicidade por metronidazol em pós-operatório de transplante de fígado

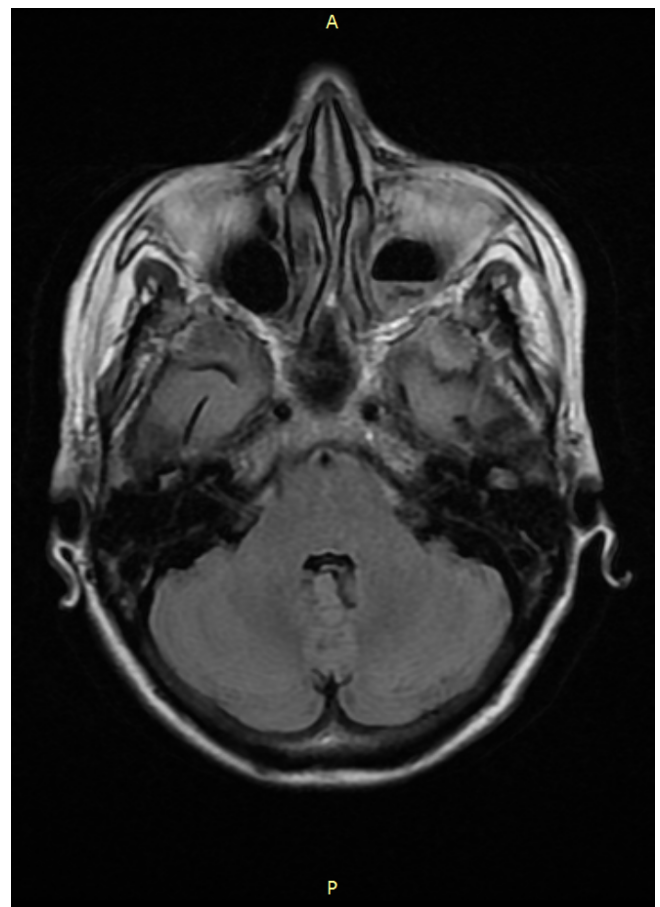
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A 67-year-old female developed subacute peripheral neuropathy, nystagmus and encephalopathy. She was on continuous metronidazole use for 65 days for a liver abscess after receiving a transplantation. Diagnostic workup revealed a sensory axonal polyneuropathy in electroneuromyography. Brain magnetic resonance imaging (MRI) showed hyperintensities at the dentate nucleus and pons (Figure 1). Metronidazole treatment was discontinued and within the first week the patient evolved with complete improvement of encephalopathy. However, she maintained the

neuropathy symptoms. A control brain MRI was normal after 30 days (Figure 2). Metronidazole neurotoxicity was previously reported with these same imaging findings and clinical course<sup>1-4</sup>.





**Figure 1.** Brain MRI with symmetric hyperintensity on axial T2-weighted images at the dentate nucleus (A, B) and pons (B), and increased signal on axial FLAIR images (C, D).



**Figure 2.** Axial FLAIR image 30 days after metronidazole interruption demonstrates complete reversal of signal changes

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