

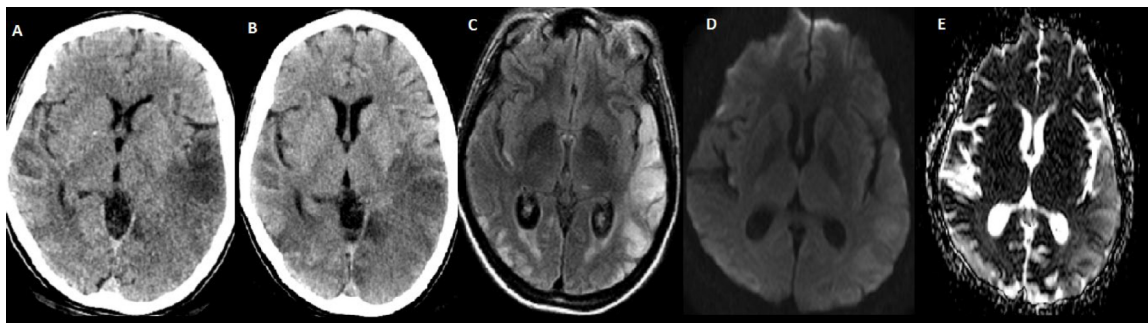
# Proton spectroscopy: a simple and useful tool in the investigation of mitochondrial disease

Espectroscopia de prótons: uma ferramenta simples e útil na investigação de doença mitocondrial

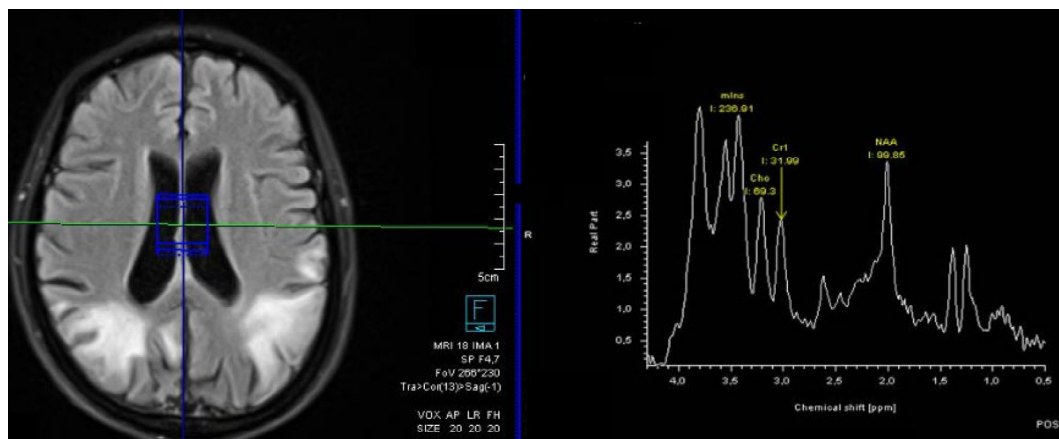
Daniel Venturino NASSIF<sup>1</sup>, Luiz Felipe Rocha VASCONCELLOS<sup>1</sup>

A 38-year-old woman presented to the emergency department with right hemiparesis. Brain computed tomography (CT) and magnetic resonance imaging (MRI) were recommended (Figures 1 and 2). Genetic study confirmed the presence of a point mutation m.3243 A>G of mtDNA, confirming the diagnosis of Mitochondrial myopathy, Encephalopathy, Lactic Acidosis, and Stroke-like episodes (MELAS).

MELAS is a rare mitochondrial disorder that can be manifested by stroke-like episodes, epilepsy, hyperlactatemia, myopathy, headaches, deafness, diabetes, and short stature<sup>1</sup>. Although not pathognomonic, the lactate peak observed in spectroscopy can be an indication for MELAS diagnosis, which is found to be correlated with the severity of clinical manifestations<sup>2</sup>. Genetic testing confirms the diagnosis<sup>3</sup>.



**Figure 1.** Brain computed tomography during hospital admission (A), 72 hours later (B), and fluid attenuated inversion recovery imaging (C) demonstrating bilateral lesions that do not respect arterial vascular territories. Diffusion-weighted imaging and apparent diffusion coefficient (D–E) demonstrating T2 shine through effect, representing vasogenic rather than cytotoxic edema.



**Figure 2.** Magnetic resonance imaging spectroscopy demonstrates elevated lactate peak in cerebrospinal fluid.

<sup>1</sup>Hospital Federal dos Servidores do Estado, Serviço de Neurologia, Rio de Janeiro, RJ, Brazil.

DVN <https://orcid.org/0000-0003-4203-5765>; LFRV <https://orcid.org/0000-0001-9080-7833>

**Correspondence:** Daniel Venturino Nassif; Email: danielvnassif@hotmail.com.

**Conflict of interest:** There is no conflict of interest to declare.

**Authors' contributions:** DVN, LFRV: design or conceptualization of the study, analysis or interpretation of the data, and drafting or revising the manuscript for intellectual content.

Received on October 16, 2021; Received in its final form on November 23, 2021; Accepted on November 28, 2021.

## References

---

1. El-Hattab AW, Adesina AM, Jones J, Scaglia F. MELAS syndrome: Clinical manifestations, pathogenesis, and treatment options. *Mol Genet Metab*. 2015 Sep-Oct;116(1-2):4-12. <https://doi.org/10.1016/j.ymgme.2015.06.004>
2. Kaufmann P, Shungu DC, Sano MC, Jhung S, Engelstad K, Mitsis E, et al. Cerebral lactic acidosis correlates with neurological impairment in MELAS. *Neurology*. 2004 Apr;62(8):1297-302. <https://doi.org/10.1212/01.wnl.0000120557.83907.a8>
3. Lorenzoni PJ, Werneck LC, Kay CSK, Silvado CES, Scola RH. When should MELAS (Mitochondrial myopathy, Encephalopathy, Lactic Acidosis, and Stroke-like episodes) be the diagnosis? *Arq Neuro-Psiquiatr*. 2015 Nov;73(11):959-67. <https://doi.org/10.1590/0004-282X20150154>