

## When the Liver Commands the Brain

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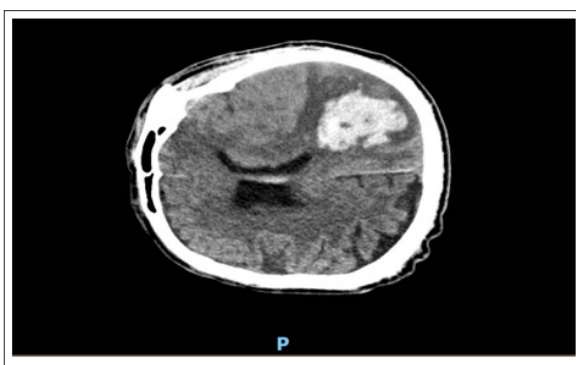
**Background:** Liver disease is associated with clinical and laboratory evidence of coagulopathy. The association between liver disease and intracranial hemorrhage (ICH) remains unclear [1].

**Case History:** 64-year-old man with acute right hemiparesis and dysarthria. Recent hospitalization for melena with findings of gastric ulcer and need for blood transfusion. Patient alert, aphasic, right brachio-crural hemiplegia, spontaneously moves left limbs, right hemispatial neglect, apraxic, pupils equal and reactive, spontaneous breathing. CT scan of the brain shows an intraparenchymal hemorrhage in the left parieto-occipital region measuring 40x60 mm. Mass effect on the posterior sectors and midline shift. PMH: liver cirrhosis with esophageal varices and thrombocytopenia, type II diabetes mellitus, arterial hypertension. Laboratory tests show: hb 9.8, htc 30, platelets 65,000. INR 1.98. PT 46%. aPTT 47.7 sec. Management according to the ICH care bundle: target systolic blood pressure <140 mmHg, blood glucose <180 mg/dL, hyperpyrexia treatment with target <37.5°, correction of INR where possible with target values <1.5.

**Discussion:** There is a modest, independent association between liver disease and the risk of intracranial hemorrhage [1]. Future studies are needed to clarify the association between ICH and liver diseases of different causes and grades of severity [2].

### References

1. Neal S Parikh, Babak B Navi, Sonal Kumar, Hooman Kamel (2016) Association between Liver Disease and Intracranial Hemorrhage. *J Stroke Cerebrovasc Dis* 25: 543-548.
2. Chien Hsu Lai, Pei Yu Cheng, Yen Yu Chen (2011) Liver Cirrhosis and Risk of Intracerebral Hemorrhage: A 9-Year Follow-Up Study. *Stroke* 42: 2615-2617.



**Figure:** CT scan of the Brain Shows an Intraparenchymal Hemorrhage

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