

Título em inglês

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Keywords: Wernicke Encephalopathy, ocular motility disorders, nystagmus, pathologic.

História Clínica e exame físico sucintos em inglês. Exemplo de trecho: A 34-year-old woman presented in our emergency department with symptoms of encephalopathy characterized by visual hallucinations, gait disturbance and oscillopsia. Her family reported a previous diagnosis of schizophrenia and a 3-month history of severe restrictive food intake, self-induced vomiting, with no reports of alcohol abuse, tobacco, or any recreational drugs use. On neurological examination, the patient was disoriented in time and space, with reduced attention span and apathy. **Exames complementares realizados. Exemplo de texto:** Exams such as full blood count.... Brain MRI showed a symmetric hyperintensity lesions in the medial thalamus and in the periaqueductal gray matter (figure 1). Clinical and neuroimaging findings supported the diagnosis of Wernicke's encephalopathy (WE) and an intravenous thiamine treatment was started for five days followed by an oral treatment. One month later, her upbeat nystagmus showed nearly complete resolution.

Revisão breve sobre o diagnóstico final. Exemplo de texto: : Wernicke's encephalopathy results from thiamine (vitamin B1) deficiency and is characterized by the classical triad of gait ataxia, encephalopathy and oculomotor manifestations¹. Although oculomotor signs are present in 93% of the cases², being most common the presence of ophthalmoparesia, descriptions of different types of nystagmus are uncommon in this entity³. Historically, WE has been associated with alcoholism, however, its association has been recognized in patients with nutritional deficiencies of any origin, like malnutrition, hyperemesis gravidarum and gastric surgery⁴.

Referências em Inglês:

References:

1. Galvin R, Bråthen G, Ivashynka A, et al. EFNS guidelines for diagnosis, therapy and prevention of Wernicke encephalopathy. *Eur J Neurol* 2010;17:1408-1418.
2. Harper CG, Giles M, Finlay-Jones R. Clinical signs in the Wernicke-Korsakoff complex: a retrospective analysis of 131 cases diagnosed at necropsy. *J Neurol Neurosurg Psychiatry* 1986;49:341-345.
3. Kesler A, Stolovitch C, Hoffmann C, Avni I, Morad Y. Acute ophthalmoplegia and nystagmus in infants fed a thiamine-deficient formula: an epidemic of Wernicke encephalopathy. *J Neuroophthalmol* 2005;25:169-172.
4. Wilson RK, Kuncel RW, Corse AM. Wernicke's encephalopathy: beyond alcoholism. *Nat Clin Pract Neurol* 2006;2:54-58; quiz 58.
5. Abdou E, Hazell AS. Thiamine deficiency: an update of pathophysiologic mechanisms and future therapeutic considerations. *Neurochem Res* 2015;40:353-361.
6. Seo Y, Reed M, Chang JS, Lui F. Wernicke's Encephalopathy Presenting With Confusion in a Patient With Schizophrenia. *Cureus* 2022;14:e32320.
7. Sharma S, Sumich PM, Francis IC, Kiernan MC, Spira PJ. Wernicke's encephalopathy presenting with upbeating nystagmus. *J Clin Neurosci* 2002;9:476-478.
8. COGAN DG, VICTOR M. Ocular signs of Wernicke's disease. *Trans Am Ophthalmol Soc* 1953;51:103-116.
9. Theodoreson MD, Zykaite A, Haley M, Meena S. Case of non-alcoholic Wernicke's encephalopathy. *BMJ Case Rep* 2019;12.

Legendas de Figuras, Fotos e Vídeos(as figuras podem ser em arquivos separados a depender da revista)

Figure 1. Axial brain MRI shows symmetric hyperintensity lesions

Video.

Essa parte depende de cada revista, mas é de bom tom ter para dar mais seriedade e credibilidade aos relatos. São perguntas óbvias, inclusive aprovação do comitê de ética do hospital (ou termo de consentimento caso seja necessário).

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