

## P1949

**Prevalence of alcohol use among seizure patients admitted to the emergency room**

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Both epilepsy and alcohol misuse represent a frequent cause of admission to the Emergency Room (ER). The number of people abusing alcohol is increasing in Belarus and represents a serious public health problem. A history of alcohol misuse or dependence among patients with seizures is at least twice as frequent as in the general population in Western European countries. No information is available for Belarus and most of other east European countries.

**Objective:** To study the frequency of alcohol history among patients admitted with seizure to the emergency department of a general hospital in Belarus.

**Materials and methods:** Clinical charts of all the admissions to the ER of the 9th University Hospital in Minsk during one year were evaluated. Data on medical history, general and neurological examination, and laboratory investigations were collected.

**Results:** Among 31,658 patients admitted to the emergency department during 2011, a seizure was diagnosed in 1504 (4.8%). Two-hundred-fifty-one seizure patients (14%) had a history of alcohol abuse: 35 presented with a new-onset seizure, 74 had previous seizures and for 141 without data of epileptic history. Associated pathology included brain injury of varying severity (32 patients), and stroke (1). None of the patients' EEG showed focal lesions.

**Conclusions:** Patients with seizures and a history of alcohol represent an important burden of neurological emergency. The prevalence of alcohol abusers among seizure patients was similar to Western European countries. However, ascertainment of a history of alcohol abuse may be challenging in the ER because patients often hide their alcoholic history.

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**Fatal outcome in acute Marchiafava-Bignami in relation to pure alcohol consumption**

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**Introduction and methods:** Marchiafava-Bignami disease (MBD) is the symmetrical demyelization of the corpus callosum rarely seen in chronic alcoholics. There is no specific clinical feature of MBD. The diagnosis is based on the association of clinical and typical Brain MRI findings. We describe a case of MBD after a relatively short period of massive pure alcohol consumption.

**Results:** A 30-year-old woman, was admitted to hospital because of acute confusional state. She had been binge drinking for one year, but 4 weeks before admission she started with massive daily intake (250-300ml) of commercial pure alcohol. She was disoriented, agitated, with generalized hypertonicity, and bilateral Babinski sign. There were no asymmetries or meningeal signs. The extensive laboratory tests were within normal values with exception for mild hypochromic macrocytic anaemia. The electro-encephalogram showed diffuse lentification of cerebral activity. The brain MRI on T2W, DWI and FLAIR images showed diffuse hypersignal of corpus callosum, more intense in the splenium, without water restriction. On T1W and on ADC images the lesion appeared hypo-intense. On the basis of the history of alcohol abuse in association with the imaging findings the diagnosis of MBD was made. She started on supportive measures, corticosteroids, high-dose intravenous vitamin B complex, including 1000mg/day thiamine, but her condition did not improve. She died a week later.

**Conclusion:** This case of MBD is atypical because of the preceding short time of alcohol abuse and also the association with pure alcohol consumption which has never been described before.