

Abstract

Hashimoto encephalopathy is an uncommon disease entity characterized by subacute onset of confusion with altered level of consciousness, seizures and myoclonus. Because of its dramatic response to steroids it is also known as steroid sensitive encephalopathy. We present a case of 82-year-old female with no known previous comorbidities presented with new onset recurrent GTC seizures with altered consciousness. Infection screening, metabolic panel, CSF analysis and thyroid status were normal. She was found to have high thyroid peroxidase antibodies in serum and EEG showed frontal lobe epilepsy with diffuse cerebral damage and encephalopathy. She was diagnosed with Hashimoto encephalopathy and started with steroid along with antiepileptics for which she showed dramatic response. This case highlights the importance of high index of suspicion and thorough investigation in patients with compatible clinical features as it has good response to available treatment and can improve quality of life in patients.