

Abstract

Hashimoto's encephalopathy is a rare autoimmune disease which is often diagnosed late due to its variable presentation. Even though it usually has a dramatic response to steroids, some patients develop relapses when steroids are tailed off, making it a challenging entity to treat.

We report a female with Hashimoto's encephalopathy diagnosed on the basis of elevated antithyroid antibodies. She was successfully treated with intravenous methyl prednisolone pulses and then oral prednisolone.

This case outlines the importance of having a high clinical suspicion for this treatable disease and further illustrates the use of intravenous and oral steroid regime, which is the recommended therapeutic option.