

DEJERINE-ROUSSY SYNDROME SECONDARY TO PERMEABLE OVAL FORAMEN CASE REPORT.

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Introduction: Déjerine-Roussy syndrome or thalamic syndrome is characterized by mild transient hemiparesis, hemicoreoathetosis, hemihypoesthesia, hyperalgesia, allodynia and hemiataxia with astereognosia of variable intensity, and presents with lesions of the posterior nuclei of the thalamus. The presence of this syndrome associated with patent foramen ovale is quite rare. Case presentation: This is a 51-year-old female patient who presents a clinical picture of neurological deterioration with hemiparesis, hyperalgesia with ataxia and astereognosis of the left hemibody with initially cryptogenic etiology. During her hospitalization, a patent foramen ovale was evidenced on the transthoracic echocardiogram. Discussion: The presence of Déjerine-Roussy syndrome associated with foramen ovale is quite infrequent with few descriptions in the literature. Conclusions: In view of the reported event, it was considered given that there was an associated apical aneurysm to perform its closure since it was the only risk factor identified in the patient, little is known about the epidemiology of this event and the long-term management

