

A Case of Jaundice with Ischemic Stroke

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A 21-year-old gentleman presented with acute onset left hemiparesis. Clinical examination suggested anaemia with jaundice with normal vitals. There were no significant history of recent febrile illnesses, bleeding manifestations, arthralgia, rash. His urine colour revealed brownish-red urine with significant diurnal variation of colour (Panel A showing 4am, 10am and 4pm urine respectively). MRI brain showed acute infarct of right parietal lobe with restricted diffusion (Panel B). What is the likely diagnosis?

Keywords: PNH; Stroke; CD 55; CD 59; Hemolytic Anemia

Investigations showed pancytopenia with reticulocytosis (Hb 3.2g/dL, TLC 1800/mm³, N 40, L 50, Platelets grossly reduced, reticulocyte 3.2%, severe anisopoikilocytosis, MCV 112fL) and indirect hyperbilirubinemia with elevated LDH (2026 U/L). Infective work up was negative. Urine was acidic with normal RBC/WBCs. Bone marrow aspiration revealed reversed myeloid to erythroid ratio, reactive erythroid hyperplasia with megaloblastic maturation. His ANA profile, Vitamin B12, Folate, G6PD, Rheumatoid factor and direct Coomb's test were negative. His flow cytometry showed CD 55 and CD59 deficient red cells being 10.1% and 28.1% respectively (Normal <3%) confirming the diagnosis of Paroxysmal Nocturnal hemoglobinuria (PNH) and was treated with steroids with normalization of WBC and platelets counts with improvement of hemoglobin withing 4 weeks. This case stresses on diagnosis of PNH in young patient presenting with thrombophilia with hemolytic jaundice [1].

Consent

The authors confirm that consent for submission and publication of this case report has been obtained from the patient in line with COPE guidance.

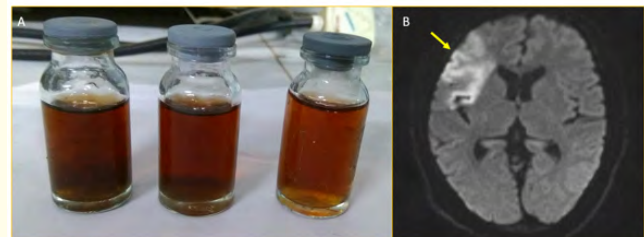


Figure 1: Panel A showing 4am, 10am and 4pm urine respectively, note the night urine is darkest with decremental intensity of urine colour subsequently in day time; Panel B showing MRI brain diffusion-weighted image showing acute infarct (yellow arrow) in right fronto-parietal lobe.

Conflict of Interest

None.

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Ethical Approval

Not required according to guidelines as it is an anonymous case report.

Bibliography

1. Ahsan MJ, *et al.* "Ischemic Stroke Presenting as the First Symptom in a Setting of Paroxysmal Nocturnal Hemoglobinuria". *Cureus* 9 (2017): e1439.