

Answer

Cerebral Fat Embolism

Figure. Magnetic resonance imaging shows scattered, spotty high-intensity areas on T₂-weighted images.

The magnetic resonance imaging reported “increased densities in T₂-weighted images in the corpus callosum and frontoparietal lobes, consistent with fat embolism” (Figure). The patient remained in a coma and on mechanical ventilation for 3 weeks. He woke up on day 25 and had a slow improvement of his mental status. He was discharged a few days later to a rehabilitation center.

Cerebral fat embolism may occur without any respiratory or other symptoms.¹⁻³ The cerebral manifestations may include confusion, lethargy, convulsions and coma. The history of the fractures, unexplained cerebral manifestations, and unexplained anemia and thrombocytopenia should alert the clinician to the possibility of cerebral fat embolism. The brain CT scan is usually normal. The magnetic resonance imaging is diagnostic and shows scattered, spotty high-intensity areas on T₂-weighted images involving the cerebral white matter, corpus callosum, and basal ganglia.⁴ The prognosis is usually good and most patients recover slowly.

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