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Bilateral thalamic glioblastoma presenting as parkinsonism: A case report

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A 63-year-old man, three to four weeks after recovering from mild COVID-19, began experiencing episodic memory problems and a bilateral, predominantly right-sided, resting hand tremor. His medical history included arterial hypertension, but he was otherwise healthy. Initial neurological examination revealed mild left-sided central weakness, mild parkinsonism (hypokinetic-rigid syndrome predominantly right-sided, with rest and action tremor in the right hand), and cognitive impairment (MMSE score of 25). Visual and sensory systems were normal. Over the next three weeks, his parkinsonism worsened, and cognitive impairment rapidly progressed, reducing his MMSE score to 15. Parkinsonism was effectively treated with dopaminergic medication, resolving completely after administering 100 mg levodopa three times a day.

Keywords

Glioblastoma · Acute necrotizing encephalopathy · Parkinsonism



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