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### **Introduction**

Marchiafava-Bignami Disease is a rare complication in malnourished patients with chronic alcohol use. Due to its rarity, its pathogenesis is poorly understood. Patients suffering from Marchiafava-Bignami Disease can present with a plethora of symptoms including acute change in mental status, dementia, seizures and neurological dysfunction. This condition is characterised by corpus callosum demyelination with reported cases of white matter involvement.

### **Objectives**

To highlight the possibility that patients exhibiting predominant psychiatric symptoms with a history of chronic alcohol use might also be suffering from Marchiafava-Bignami Disease and that such a diagnosis should not be ruled out purely because of the psychiatric symptoms.

### **Case Report**

We report a 41-year-old man who presented with sub-acute cognitive decline, poorly defined psychotic symptoms and minimal neurological signs. MRI showed atrophy of the corpus callosum, consistent with Marchiafava-Bignami Disease. Despite timely diagnosis and adequate treatment, his psychotic symptoms have remained persistently debilitating.

During our review, the psychiatric symptoms proved to be a red-herring which masked the real diagnosis of this patient. However, based on the MRI findings, he was finally diagnosed with Marchiafava-Bignami Disease. Arrangements have been made to place him in a rehabilitation setting with regular neurological follow-ups to assess disease progression, which would facilitate further management.

### **Conclusions**

This case highlights an atypical presentation of Marchiafava-Bignami Disease and raises the importance of thorough investigations in patients with a long history of alcohol consumption and the need to have a high index of suspicion. Concomitant conditions associated with chronic alcohol use should also be considered.