

## Judul: Case of ischemic stroke with recurrent hypoglycemia in pregnant woman during the period of pregnancies

S. Tanumihardja, Y. Dikot, Y. Hoo, D. Supantini

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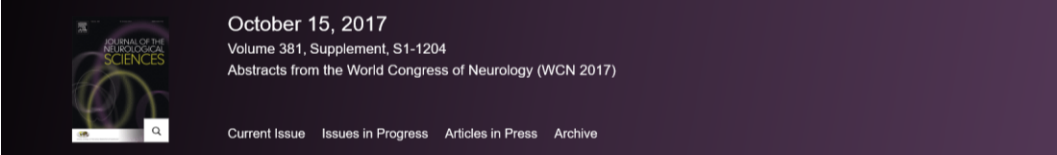
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DOI: <https://doi.org/10.1016/j.jns.2017.08.3128>

**Background:** We report a rare case, 30 years-old woman 12 weeks of her first pregnancy admit to emergency department Immanuel Hospital with impaired of consciousness for 3 days, laboratory finding present hypoglycaemia, after four days there was paraparetic, CT scan finding bilateral infarction.

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### Abstract

**Background:** We report a rare case, 30 years-old woman 12 weeks of her first pregnancy admit to emergency department Immanuel Hospital with impaired of consciousness for 3 days, laboratory finding present hypoglycaemia, after four days there was paraparetic, CT scan finding bilateral infarction. **Objective:** Hypoglycaemia in pregnancy can caused by increased hormones progesterone, estrogen, lactogen plasenta, GH, cortisol that affect hormones insulin and there will be disturbances in blood sugar levels. The symptoms of hypoglycemia are classified as neuroglycopenic symptoms, caused by the stimulation of sympathetic nervous system which can induce vasoconstriction, platelet aggregation and might lead to decreased cerebral glucose availability – include confusion and focal cerebral impairment. **Patients and Methods / Material and Methods:** Laboratory findings are normal except for Hb 9.1 mmol/l, blood glucose 37 mmol/l. There is no external cause for hypoglycaemia, investigation for insulinoma, nesidoblastosis, NIPHS, with USG and laboratory test of Fasting serum insulin, serum C peptide levels, Islet cell cytoplasmic autoantibodies and glutamic acid decarboxylase autoantibodies and ANA panel test were normal. Laboratory investigation for prothrombotic state of pregnancy itself or an underlying predisposition for thrombophilia were not perform. EEG shows left frontal slowing. **Results:** The hypoglycemia controlled by dextrose 5% infusion, low glycemic diet and antiplatelet treatment. She completed the pregnancy and delivered full term healthy baby. **Conclusion:** We report a rare case of a pregnant woman who suffered recurrent severe reactive hypoglycemia and ischemic stroke. We concluded that platelet activation occurred after severe and prolonged hypoglycemia with increments in platelet monocyte aggregation lead to arterial thrombosis and caused Ischemic stroke.

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