



Fahr Syndrome: Pure Dementia Presentation

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Abbreviations

MMSE: Mini-Mental State Examination; MoCA: Montreal Cognitive Assessment

Clinical Image

Fahr syndrome is defined as the accumulation of calcium deposits throughout the basal nuclei structures, which has an estimated prevalence of 1/1000,000 [1-2]. Calcinosis of the central nervous system can be an incidental finding in a large percentage of patients and can become unnoticed without being related to a particular disease [3-4]. Here, we present the case of a 74-year-old male patient with a three-year history of insidious cognitive decline, characterized by memory impairment, difficulty in planning complex activities, changes in personality, and unremarkable medical history. Neuropsychological assessment revealed multidomain cognitive impairment with alterations in working memory, episodic memory, semantic memory, and executive functions; MMSE: 21/30, MoCA: 19/30. Brain computed tomography revealed extensive bilateral symmetrical calcifications, located mainly in the basal and periventricular regions. Laboratory workup showed abnormal parathyroid hormone levels: 6.88 pg/mL (normal: 15-65 pg/ml), and the rest of laboratory test was unremarkable; an idiopathic hypoparathyroidism diagnosis was made (Figure 1).

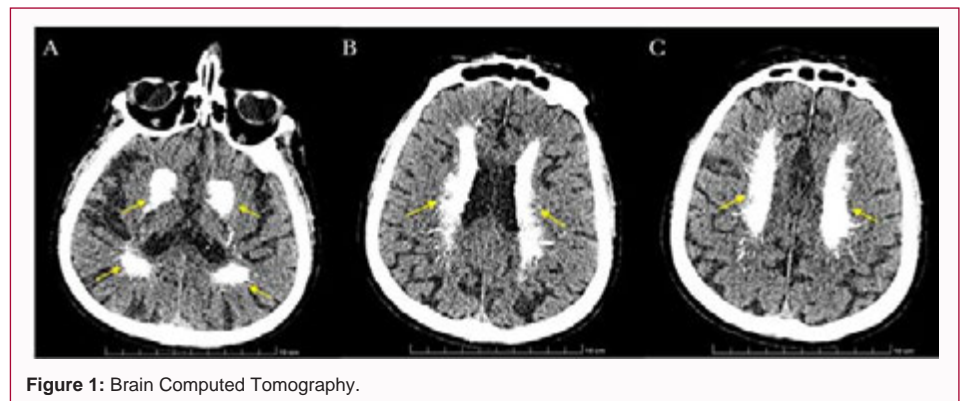


Figure 1: Brain Computed Tomography.

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References

1. Saleem S, Aslam HM, Anwar M, Anwar S, Saleem M, Saleem A, et al. Fahr's syndrome: Literature review of current evidence. *Orphanet J of Rare Dis.* 2013;8:156.
2. Al Abbudi SJR. Diagnostic correlates of psychiatric presenting symptoms of idiopathic basal ganglionic calcification (Fahr's Disease). *Open Access J Neurol Neurosurg.* 2020;12(4):555843.
3. Soares FB, Amorim FF, Santana AR, de Moura EB, Margalho SB, Amorime APP, et al. Fahr's syndrome due to hypoparathyroidism following thyroidectomy. *J Med Cases.* 2013;4(6):380-84.
4. Goswami R, Sharma R, Sreenivas V, Gupta N, Ganapathy A, Das S. Prevalence and progression of basal ganglia calcification and its pathogenic mechanism in patients with idiopathic hypoparathyroidism. *Clin Endocrinol (Oxf).* 2012;77(2):200-6.