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Dijagnostički izazovi u Behçetovoj bolesti s zahvaćanjem središnjeg živčanog sustava: prikaz slučaja

Diagnostic Challenges in Behçet Disease With Central Nervous System Involvement: A Case Report

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Background: Neuro-Behçet disease (NBD) is a rare neurological manifestation of Behçet disease (BD) that may mimic multiple sclerosis (MS), creating diagnostic challenges.
Case Presentation: A 34-year-old man presented with progressive headache, dizziness, gait instability, and right lower-limb weakness. Six months earlier, he had experienced transient left-leg numbness and weakness, initially raising suspicion of MS. Examination showed right-sided pyramidal weakness, hyperreflexia, and mild ataxia. Brain MRI revealed a large T2/FLAIR hyperintense lesion involving the left cerebral peduncle and brainstem, atypical for MS and suggestive of parenchymal NBD. CSF showed mild pleocytosis and elevated protein without oligoclonal bands, while CRP and ESR were elevated. Further history revealed recurrent oral and genital ulcers, previous erythema-nodosum-like lesions, a positive pathergy test, and evidence of previous uveitis. After excluding infectious and alternative inflammatory/demyelinating disorders, parenchymal NBD was diagnosed. High-dose intravenous methylprednisolone followed by corticosteroids and immunosuppressive therapy resulted in marked clinical improvement and substantial MRI lesion regression.
Conclusion: NBD should be considered in patients with CNS lesions atypical for MS, particularly when oligoclonal bands are absent and systemic inflammation is present. Careful assessment for mucocutaneous and ocular manifestations of BD can provide crucial diagnostic clues.

Ključne riječi: Bolest Behçet, neuro-Behçetova bolest, multipla skleroza
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