Mum, why can't I see?: pediatric PRES with atypical presentation

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Background: Posterior reversible encephalopathy syndrome (PRES) is a rare but treatable condition characterized by seizures, headache, altered mental status, and visual disturbances, often associated with hypertension. Pediatric cases remain uncommon and diagnostically challenging, making early recognition essential.

Case Presentation: An 11-year-7-month-old, previously healthy, rugby-playing boy (60 kg) presented with sudden–onset acute vision loss after an afternoon nap. Earlier, he had experienced a presyncopal episode at school followed by persistent headache and vomiting without fever. He developed two generalized tonic-clonic seizures, the second with facial twitching requiring IV diazepam. He had a year-long history of orthopnea, apnea, morning somnolence, and sneezing. On arrival, he was confused with a GCS E3V4M4, disoriented to time, place, and person, BP 188/98, HR 115, and SpO_2 92% under room air. Examination showed reduced bibasal air entry, left-sided crepitations, mild motor weakness, absent reflexes, asymmetrical Babinski sign, and vision limited to hand movements with normal fundoscopy. He developed another generalized tonic-clonic seizure and was intubated for cerebral and airway protection. Bedside ultrasound demonstrated bilateral pleural effusions, pulmonary edema, left ventricular enlargement, and a distended IVC. CT brain showed posterior cerebral white matter edema involving the left parieto-occipital region. Chest X-ray demonstrated increased vascular markings with a batwing appearance. He received IV phenytoin, while blood pressure was controlled with IV furosemide and nitrates before transfer to a tertiary center.

Conclusion: Pediatric PRES is an uncommon clinicoradiological syndrome requiring early recognition and prompt blood pressure and seizure control to prevent permanent neurological damage, morbidity, and mortality and improve outcomes.

Keywords: Pediatric PRES, posterior reversible encephalopathy syndrome, hypertension, pulmonary edema, seizures, acute vision loss, pediatric emergency.