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An unusual neurological consequence of Cardiac Arrest: Hypoxic brain injury mimicking spinal cord disease

Abstract:

Cardiac arrest (CA) remains a major cause of both death and long-term disability, particularly neurological impairment. The well-known complication of CA is hypoxic-ischemic encephalopathy (HIE), typically manifesting with altered consciousness and cognitive impairment. We report a rare case of a 51-year-old male who developed bilateral lower limb weakness and neurogenic bladder after an out-of-hospital cardiac arrest due to an inferior ST-elevation myocardial infarction (STEMI). Given the clinical presentation, a spinal cord lesion such as a watershed ischemic spinal cord stroke was suspected. However, extensive spinal imaging revealed no abnormalities. Instead, brain MRI findings were consistent with hypoxic-ischemic encephalopathy (HIE), suggesting cerebral hypoxia as the underlying cause of the patient's lower limb dysfunction. This case highlights the importance of considering HIE as a differential diagnosis in post-cardiac arrest patients presenting with lower limb weakness, particularly when spinal imaging is unremarkable. Early recognition is essential for appropriate management and prognosis.

Biography

Nida Shabbir, is affiliated with the Devonshire Centre for Neurorehabilitation at the Northern Care Alliance NHS Trust in Greater Manchester, UK, where he contributes to advancing neurorehabilitation practices and patient care.