**BARIATRIC SURGERY AS TREATMENT OF PRIMARY PSEUDOTUMOR CEREBRI IN A MALE ADOLESCENT: CASE REPORT**

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**BACKGROUND**

Primary Pseudotumor cerebri characteristics includes:

- Increased intracranial pressure
  - lumbar puncture > 90th percentile (28 cm of H2O)
- Alert and oriented patient
- Normal neuroimaging
- Normal cerebrospinal fluid analysis
- Papilledema may or may not be present
- Headache (most common symptom – up to 84%)
- Visual loss (major morbidity - up to 68%)
- Obesity (consistent risk factor)

**CASE PRESENTATION**

A 16-year-old morbidly obese African-Brazilian boy:

- Weight: 133.6 kg;
- BMI: 44.1 kg/m² (Z: +3.83)
- Tanner 5
- Complaint: headaches (bi-parietal, high intensity and pulsatile)
- Normal Cranial CT
- Lumbar puncture: pressure of 40 cm of H2O
- Ophthalmologic evaluation: bilateral papilledema with normal visual acuity and absence of abducens nerve palsy (Figure A; arrow).

**DIAGNOSE = Primary Pseudotumor cerebri**

He was started on acetazolamide, which provided partial improvement of his symptoms.

After 3 months of treatment, his symptoms had not completely resolved and bariatric surgery was recommended.

**REFERENCES**


**CONCLUSIONS**

Our case showed complete resolution of Primary Pseudotumor cerebri signs and symptoms in a male adolescent who underwent bariatric surgery and experienced 67.5% excessive weight loss after 1 year. The treatment option seemed to be safe and effective.