We describe a 65-year-old male who presented with acute onset inability to read, without any difficulty in writing. A clinical diagnosis of alexia without agraphia was made and the patient was subjected to routine investigations including contrast MRI. MRI showed a ring-enhancing lesion in left occipital area, suggestive of neurocysticercosis supported by quantitative enzyme-linked immunosorbant assay from purified cell fraction of taenia solium cysticerci (PCF--ELISA). Patient was treated with albendazole and prednisolone for one week. The clinical manifestation as well as the radiological finding resolved after treatment.

Key Words: Neurocysticercosis, ataxia, agraphia
cits include a right hemianopia and frequently, a deficit of short-term memory.

The classic syndrome of pure alexia without agraphia is caused by lesion in left occipital cortex and posterior sector of the corpus callosum- (the splenium), thus interrupting the flow of visual input into the language network. There is usually a right hemianopia, but the core language network remains unaffected. Pure alexia may or may not be associated with color naming and visual object agnosia.

Transitory alexia without agraphia has been reported in a HIV positive patient suffering from toxoplasma encephalitis with ring lesion in left posterior white matter,\textsuperscript{4} temporal lobe lesion due to herpes simplex encephalitis,\textsuperscript{5} mitochondrial myopathy and lactic acidemia.\textsuperscript{6}

In this communication, we describe a transitory non-vascular cause of alexia without agraphia, due to single ring-enhancing lesion in the left occipital area. Contrast MRI of the brain revealed a ring-enhancing lesion in the left occipital area disconnecting visual input from language area. The diagnosis of neurocysticercosis was based on the MRI finding, positive PCF-ELISA in CSF and the clinical manifestation as well as the resolution of radiological findings after treatment.

We concluded that our case report is an unusual non-epileptic manifestation of a very common endemic problem, neurocysticercosis. Reversible pure alexia has not been reported with neurocysticercosis. Recognizing this reversible cause will avoid unnecessary treatment and investigation of the patient.

\textbf{References}


\textbf{Accepted on 06.09.2002.}