OBJECTIVES: Fahr's is a familial disease which characterized with presence of wide and progressive calcifications in basal ganglions, cerebellar nucleus and deep cortical anatomical structures. Calcifications may be shown by computerized tomography provided for another reason. The clinic manifestations of the disease are variable but commonly progressive mental disorder, tremor, ataxia, disartria, convulsion, Parkinson-like symptoms and neuro-psychological disorders may be seen. This kind of cases could be mimicking subarachnoid hemorrhage on admission to emergency. There later conditions which may cause to Fahr’s Disease are anoxia, radiation, systemic disorders, toxins, disorders of calcium metabolism and encephalitis. Here, we presented a patient with headache which were diagnosed as Fahr’s Disease. CASE: 45 year-old male patient was admitted our clinic with complaints of headache continued for 1 year. The patient’s pain was showed propagation taken from head to neck. His headache was respond to analgesics. Neurological examination was natural, personal and family history was unremarkable. Biochemical analysis Ca, parathyroid hormone (PTH), thyroid and liver function tests were normal. Brain CT scans; In bilateral cerebellar dentate nucleus, bilateral thalamus, bilateral basal ganglia and bilateral centrum semiovale hyperdense areas of calcification were observed. As a result of the examination to the patient was diagnosed with Fahr's disease. For Headaches were treated symptomatically. Fahr’s disease patient was discharged with recommendations for follow-up.

CONCLUSION: When bilateral diffuse calcifications found in cranial CT and If we can not connect to any etiological factors of pathology, in the differential diagnosis of Fahr’s disease should consider. In these cases usually detected incidentally, the underlying etiologic factors such as of hypoparathyroidism can be treated well, we must be thoroughly examined in the underlying pathology. In the future Extrapyramidal signs, progressive mental damage, epilepsy, Parkinson’s disease and cerebellar symptoms can be occured Even if these cases are asymptomatic, long-term follow up is necessary.

Keywords: Fahr disease, Intracerebral calcification, Radiological view