Teaching Video *NeuroImages*: Focal cortical myoclonus in progressive multifocal leukoencephalopathy

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Figure PML lesion

Fluid-attenuated inversion recovery (A) and T2-weighted (B) MRIs showing a typical hyperintense crescent-shaped progressive multifocal leukoencephalopathy (PML) lesion (arrow) involving the U fibers under the precentral gyrus of the right hemisphere. No contrast material enhancement was detected (data not shown).

A 52-year-old man with recently diagnosed HIV infection (CD4 count 105/ μ L; normal range 700–1,200/ μ L) presented with a 5-week history of irregular shaking of his left hand triggered by lifting his arm accompanied by “feeling of stiffness and clumsiness.” On clinical examination, focal myoclonus with positive and negative components affecting the left upper limb with distal predominance was detected (see video on the *Neurology*® Web site at Neurology.org). Cerebral MRI revealed a demyelinating lesion affecting the juxtacortical white matter of the precentral gyrus (figure). The CSF PCR for JC virus was strongly positive, confirming the diagnosis of progressive multifocal leukoencephalopathy.¹

AUTHOR CONTRIBUTIONS

Michael Rittweger: analysis or interpretation of data, accepts responsibility for conduct of research and will give final approval, acquisition

of data. Gordian Branding: study concept or design, analysis or interpretation of data, accepts responsibility for conduct of research and will give final approval, acquisition of data. Keikawus Arastéh: drafting/revising the manuscript, analysis or interpretation of data, accepts responsibility for conduct of research and will give final approval, acquisition of data. Pascal Grosse: drafting/revising the manuscript, analysis or interpretation of data, accepts responsibility for conduct of research and will give final approval. Juri Katchanov: drafting/revising the manuscript, accepts responsibility for conduct of research and will give final approval, acquisition of data.

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DISCLOSURE

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Supplemental data
at Neurology.org

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