

# Teaching Video NeuroImages: A treatable rare cause of chorea

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A 72-year-old woman developed progressive choreic movements involving the right hemibody and the orofacial muscles (video 1). Her examination was otherwise unremarkable, without ataxia. Brain MRI, blood glucose, thyroid function, and rheumatologic panel were unremarkable. Genetic testing for Huntington disease and C9orf72 expansions were negative. Initial hematocrit and hemoglobin levels were normal, but increased to abnormal values (56% and 18.5 g/dL) 1 year after chorea onset. The JAK2V617F mutation was positive, suggesting a diagnosis of chorea due to polycythemia vera. Chorea disappeared with phlebotomy and hydroxyurea. Neurologists should suspect this rare treatable entity in elderly patients with chorea even with initially normal hematocrit levels.<sup>1</sup>

## Author contributions

Malco Rossi: study concept and design, acquisition, analysis, and interpretation of data, draft of manuscript. Angel Cammarota: study concept and design, acquisition, analysis, and interpretation of data, draft of manuscript. Marcelo Merello: study concept and design, interpretation of data, critical revision of manuscript for intellectual content. Martin Nogues: study concept and design, interpretation of data, critical revision of manuscript for intellectual content.

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## Disclosure

The authors report no disclosures relevant to the manuscript. Go to [Neurology.org/N](http://Neurology.org/N) for full disclosures.

## Reference

1. Bruyn GW, Padberg G. Chorea and polycythaemia. *Eur Neurol* 1984;23:26–33.

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