Cerebellar limb tremor and inferior olivary hypertrophy

Alberto J. Espay, MD, MSc; and Fredy J. Revilla, MD, Cincinnati, OH

A 49-year-old wheelchair-bound man was rendered left hemiparetic, dysarthric, and diplopic after a brainstem hemorrhage. Several months later he developed a progressively disabling left arm tremor. Examination showed skew deviation, left hemiparesis, left hemianesthesia, truncal ataxia, and a postural and action proximal left arm tremor (video). Brain MRI demonstrated a cavernous malformation in the right upper brainstem and enlarged ipsilateral inferior olivary nucleus secondary to a lesion in the central tegmental tract (figure). Cerebellar limb tremor is associated with contralateral hypertrophic inferior olive, analogous to secondary palatal tremor, whose delayed onset by weeks or months after injury may be due to compensatory changes in the motor system.

Disclosure: The authors report no conflicts of interest.

Address correspondence and reprint requests to Dr. Alberto J. Espay, Assistant Professor of Neurology, Department of Neurology, University of Cincinnati, 231 Albert Sabin Way, MSB 4503, Cincinnati, OH 45267-0525; e-mail:alberto.espay@uc.edu

Additional material related to this article can be found on the Neurology Web site. Go to www.neurology.org and scroll down the Table of Contents for the October 10 issue to find the title link for this article.

Cerebellar limb tremor and inferior olivary hypertrophy
Alberto J. Espay and Fredy J. Revilla

*Neurology* 2006;67;1250
DOI 10.1212/01.wnl.0000243947.26950.43

This information is current as of October 9, 2006

<table>
<thead>
<tr>
<th>Updated Information &amp; Services</th>
<th>including high resolution figures, can be found at: <a href="http://n.neurology.org/content/67/7/1250.full">http://n.neurology.org/content/67/7/1250.full</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplementary Material</td>
<td>Supplementary material can be found at: <a href="http://n.neurology.org/content/suppl/2006/10/08/67.7.1250.DC1">http://n.neurology.org/content/suppl/2006/10/08/67.7.1250.DC1</a></td>
</tr>
<tr>
<td>References</td>
<td>This article cites 2 articles, 0 of which you can access for free at: <a href="http://n.neurology.org/content/67/7/1250.full#ref-list-1">http://n.neurology.org/content/67/7/1250.full#ref-list-1</a></td>
</tr>
</tbody>
</table>
| Subspecialty Collections      | This article, along with others on similar topics, appears in the following collection(s):  
Cerebellum [http://n.neurology.org/cgi/collection/cerebellum](http://n.neurology.org/cgi/collection/cerebellum)  
MRI [http://n.neurology.org/cgi/collection/mri](http://n.neurology.org/cgi/collection/mri)  
Tremor [http://n.neurology.org/cgi/collection/tremor](http://n.neurology.org/cgi/collection/tremor) |
| Permissions & Licensing       | Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at: [http://www.neurology.org/about/about_the_journal#permissions](http://www.neurology.org/about/about_the_journal#permissions) |
| Reprints                      | Information about ordering reprints can be found online: [http://n.neurology.org/subscribers/advertise](http://n.neurology.org/subscribers/advertise) |