A 32-year-old woman with leukemia underwent allogenic bone marrow transplantation and was subsequently treated with cyclosporine A (CsA) and prednisone. Three weeks after initiation of treatment the patient presented with acute onset of brachial diplegia. NCS MG studies and cervical MRI were negative. Brain MRI revealed increased signal limited to the prerolandic regions, bilaterally (figure, A). CsA treatment was interrupted, and the brachial diplegia improved within a few days. A repeated MRI revealed no abnormalities (figure, B).

CsA induces neurotoxicity in 40% of patients. Most of the neurologic side effects of CsA involve the CNS. However, the involvement limited to the prerolandic areas has not been observed to date.

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