A 60-year-old man presented with 3 months of finger paresthesias. Neurologic examination showed pseudoathetosis in arms, loss of joint position and vibration sensation in toes and fingers, brisk deep tendon reflexes in arms and knees with depressed ankle jerks, and extensor plantar responses. T2-weighted MRI of the cervical spine showed hyperintensity of the cord extending from the level of C1 to C4 (figure 1). Transverse T2-weighted MRI at the C2 level demonstrated bilateral symmetric signal intensity abnormality within the dorsal columns (inverted V sign; figure 2). Hematologic tests showed macrocytic, hypochromic anemia with pancytopenia and hypersegmented neutrophils. Mean corpuscular volume was 110 fL (normal 82–92 fL), and serum B12 concentration 108 pg/mL (normal 200–600 pg/mL). Subacute combined degeneration of the spinal cord due to vitamin B12 deficiency was diagnosed.1,2

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