

# Teaching NeuroImages: Reversible ectropion in myasthenia gravis

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**Figure 1** Asymmetric ectropion due to weakness of orbicularis oculi before neostigmine



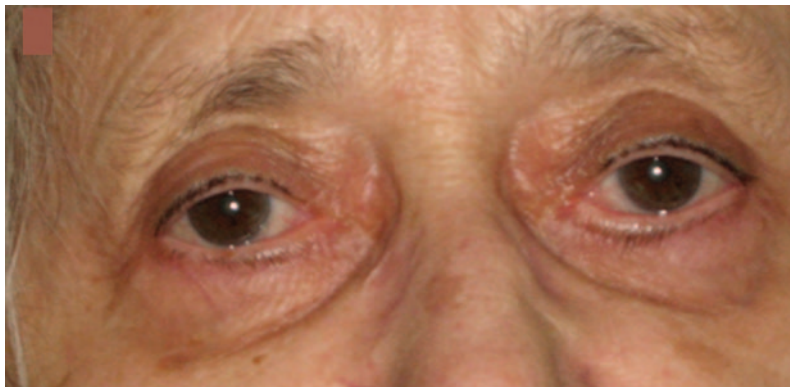
A 77-year-old woman was admitted with 1 month of progressive generalized weakness, camptocormia, dysarthria, dysphagia, and transient ectropion (figure 1). These symptoms and signs worsened after exercise. Repetitive nerve stimulation showed a decremental response ( $-32\%$  for the nasalis and  $-54\%$  for the deltoid), and serum acetylcholine receptor antibodies were positive, leading to the diagnosis of myasthenia gravis. Subcutaneous injection of 0.25

mg neostigmine improved signs consistently and ectropion disappeared (figure 2). This response was confirmed 1 month later after treatment with 300 mg pyridostigmine daily. Ectropion can be a sign of facial weakness in myasthenia gravis.<sup>1</sup>

## REFERENCE

1. Cohen MM, Lessell S. Retraction of the lower eyelid. *Neurology* 1979;29:386–389.

**Figure 2** Dramatic improvement after injection of 0.25 mg of neostigmine



Created with Photoshop elements.

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