A reversible severe gait disorder

A 53-year-old man was admitted for a 6-month progressive disabling gait disorder, weight loss, and increasing fatigue. Examination revealed a markedly impaired gait and flexion contractures of hips and knees, with limited extension (video 1 at Neurology.org). EMG and whole neuraxis MRI were normal. Laboratory workup proved primary adrenal insufficiency (AI) (serum cortisol 2.4 µg/dL, ACTH 513.8 pg/mL). Flexion contractures of the lower limbs^{1,2} (FCLL) due to AI was suspected. Prompt treatment with hydrocortisone supplementation led to a substantial clinical improvement (video 2). FCLL is a well-known but infrequent sign of AI. Prompt identification and treatment may reverse this disorder.

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Study funding: No targeted funding reported.

Disclosure: The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

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**Supplemental data
at Neurology.org**

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Neurology 2016;87;1521

DOI 10.1212/WNL.00000000000003190

This information is current as of October 3, 2016

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