Early onset of propriospinal-like myoclonus in a child following a vertebral fracture

Figure Spinal cord MRI

(A) Spinal MRI performed the day after the back trauma shows a wedge fracture with edema of the T7 vertebral body without evidence of spinal parenchymal lesions. (B) Spinal MRI performed a month after the back trauma shows resolution of edema of the T7 vertebral body.

A 9-year-old girl presented with trunk and limb myoclonic status (video at Neurology.org) that started immediately after back trauma that caused a T7 vertebral body fracture without spinal involvement (figure). Myoclonic status became more severe after tactile stimuli and spontaneously disappeared within 32 hours. The jerk-locked back-averaging analysis excluded a cortical origin and the somatosensory evoked potentials, performed after 36 hours, were normal. Full neuropsychological examination and Child Behavior Checklist scores were within normal limits. This represents a novel presentation of early posttraumatic propriospinal-like myoclonus in a child. We hypothesize a transient spinal impairment due to mechanical compression.^{1,2}

Carlotta Facini, MD, Marina Barsacchi, MD, Benedetta Piccolo, MD, Emanuela Claudia Turco, MD, Francesco Pisani, MD

From the Child Neuropsychiatry Unit, Neuroscience Department (C.F., M.B., F.P.), University of Parma; and Child Neuropsychiatry Unit, Mother and Child Department (B.P., E.C.T., F.P.), University-Hospital of Parma, Italy.

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Correspondence to Dr. Facini: carlottaFacini@gmail.com

Supplemental data
at Neurology.org

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