A 26-year-old man having restricted neck movements for 4 years developed progressive quadriplegia with bladder-bowel involvement over 15 days. His parents and local village residents reported similar symptoms. Hemogram and biochemistry (including vitamin D) analysis were normal. X-ray bilateral forearm showed interosseous membrane calcification (Figure 1).

Bone densitometry at distal radius showed a Z score of $-2.5$. MRI cervicodorsal spine revealed multilevel disco-osteophytic complexes at C3-C4 and C6-C7 with ossified ligament flavum causing cord compression (Figure 2). Excess drinking water fluoride causes osteoblast and osteoclast activation resulting in periosteous tissue ossification and immature bone deposition. Sclerosed ligaments/osteophytes due to fluorosis can cause compressive myelopathy in endemic areas.$^{1,2}$

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Appendix Authors

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alvee Saluja, MBBS, MD, DM</td>
<td>Department of Neurology, Lady Hardinge Medical College, New Delhi</td>
<td>Drafting/revision of the article for content, including medical writing for content; major role in the acquisition of data; and study concept or design</td>
</tr>
<tr>
<td>Rajinder K. Dhamija, MBBS, MD, DNB, FRACP</td>
<td>Department of Neurology, Lady Hardinge Medical College, New Delhi</td>
<td>Drafting/revision of the article for content, including medical writing for content, and study concept or design</td>
</tr>
<tr>
<td>Ravi S. Solanki, MBBS, MD</td>
<td>Department of Radiodiagnosis, Lady Hardinge Medical College, New Delhi</td>
<td>Major role in the acquisition of data, reviewing of the article, and study concept or design</td>
</tr>
</tbody>
</table>

References


Figure 2 Compressive Cervical Myelopathy due to Fluorosis

MRI cervical spine (T2 sagittal sequence) showing ossification of dens (yellow marker) and disco-osteophytic complex at the level of C3-C4 (blue marker) causing cord compression.
Teaching NeuroImage: Fluorosis: A Forgotten Cause of Compressive Myelopathy
Alvee Saluja, Rajinder K. Dhamija and Ravi S. Solanki

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