A 47-year-old man presented to clinic with progressive right-hand bradykinesia and shuffling gait for 8 months. He was diagnosed with parkinsonism. Brain MRI demonstrated diffusion-weighted imaging (DWI)–hyperintense signal involving bilateral corona radiate (figure 1) and extensive white matter hyperintensity lesions involving bilateral lateral periventricular regions without enhancement (figure 2).

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T2-weighted MRI showed white matter changes (figure 2). Colony-stimulating factor 1 receptor (CSF1R) gene sequencing revealed the pathogenic variant c.2381T>C(p.Ile794Thr), confirming the diagnosis of hereditary diffuse leukoencephalopathy with spheroids. The patient was treated with levodopa and selegiline with minimal response.

**Acknowledgment**
The authors thank Dr. Feng-Tao Liu for his help in the patient’s care.

**Study Funding**
No targeted funding reported.

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

### References

### Appendix Authors

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Teaching NeuroImages: Parkinsonism Presenting With Watershed Pattern Lesions
Yi Dong, Xin Cheng and Qiang Dong
Neurology 2021;97:e222-e223 Published Online before print April 26, 2021
DOI 10.1212/WNL.0000000000012056

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