

HEMIDYSTONIA IN STROKE

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Introduction: Dystonia is a rare complication of cerebrovascular disease. Hemidystonia can be associated with structural brain lesion, a storage or degenerative neurological disorder. A preexisting hemiparesis and evidence of striatal damage on imaging were risk factors for the development of Dystonia. Aim: This communication considers 12 patients with hemidystonia with cerebrovascular disorders seen over a period of 5 years. Methods: Twelve patients with cerebrovascular disorders with hemidystonia, aged, 14 to 75 years were analyzed. All were investigated with routine biochemistry, EEG and CT/MRI. They were all video filmed in the Movement Disorders clinic. Infections and Drug induced Dystonia were excluded. 100 units of Botox were given to three patients and analyzed at three weeks and three months. Results: There were eight males and four females. All patients had hemiparesis before the development of Dystonia. The latency period between abnormal posturing and hemiparesis was one month to 3 years. The duration of dystonia was 15 days to 9 years. CT/MRI showed striatal damage in all. When dystonia appeared within three months only, two patients showed a marginal improvement in spasticity with Botulinum Toxin injection. Discussion: 1) Delayed onset dystonia is related to aberrant neuronal sprouting in the CNS following static lesions 2) Any lesion capable of isolating the striatum from thalamus while preserving the cortico spinal pathway can cause Dystonia. Observation: Post hemiplegic dystonia is common in children and adults. Treatment is often disappointing. Botox Injection, alleviated hemidystonia marginally if occurred within three months.