

critical features of both infantile and adult human glycogen storage disease type II. *J Biol Chem* 1998;273:19086–19092.

27. Phillips MF, Smith PE, Carroll N, Edwards RH, Calverley PM. Nocturnal oxygenation and prognosis in Duchenne muscular dystrophy. *Am J Respir Crit Care Med* 1999;160:198–202.
28. Vianello A, Bevilacqua M, Salvador V, Cardaioli C, Vincenti E. Long-term nasal intermittent positive pressure ventilation

in advanced Duchenne's muscular dystrophy [see comments]. *Chest* 1994;105:445–448.

29. Bach JR. Perspectives of nasal ventilation: indications, methods and complementary techniques for patients with neuromuscular disease. *Eur Respir Rev* 1993;3:243–244.
30. Simonds AK. Nasal intermittent positive pressure ventilation in neuromuscular and chest wall disease. *Monaldi Arch Chest Dis* 1993;48:165–168.

NeuroImages

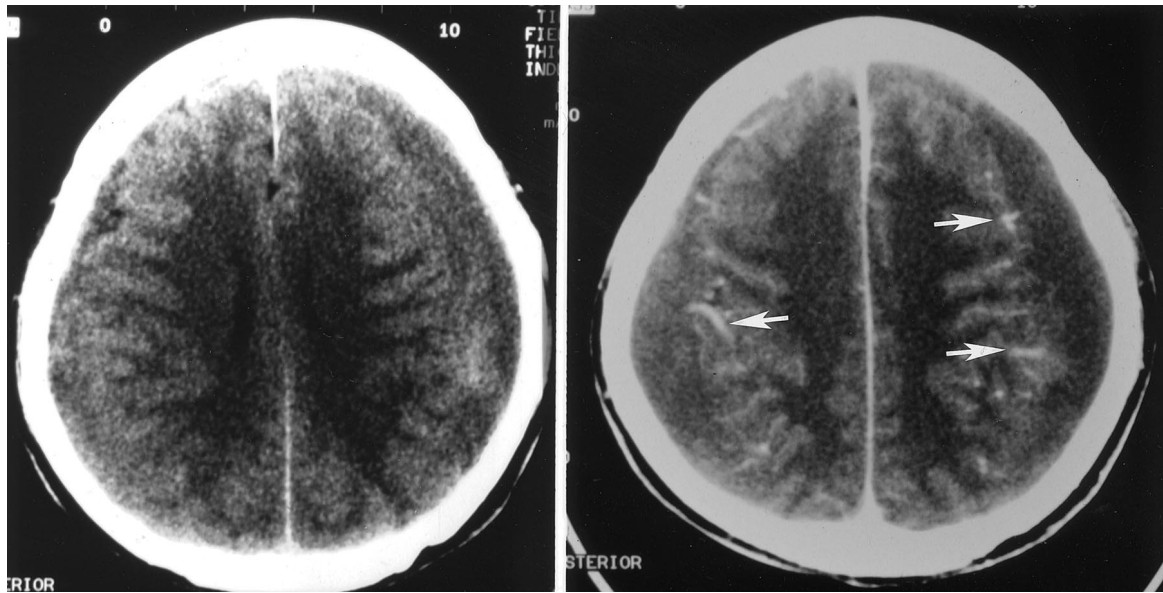


Figure. Noncontrast brain CT scan (left) shows isodensity in extra-axial region. Contrast CT scan (right) shows the isodense lesions with enhancement and medial displacement of cortical veins (arrows), indicating bilateral chronic subdural hematomas.

Deteriorating parkinsonism and subdural hematomas

Samuel M. Chou, MD, Ludwig Gutmann, MD, Morgantown, WV

A 69-year-old physician with stable PD (well controlled with carbidopa/levodopa, pramipexole, and selegiline for 4 years) had rapid deterioration of various findings of parkinsonism to a semi-invalid state over 1 month. An increase in carbidopa/levodopa dosage was without benefit. Recalling minor head trauma several weeks before deterioration onset prompted per-

formance of a CT scan (figure), with subsequent evacuation of bilateral subdural hematomas. He returned to his active baseline state 2 days later.

Rapid deterioration in PD is unusual. Subdural hematomas causing this have occasionally been reported.^{1,2} Recognition and treatment of subdural hematomas resulted in a favorable outcome.

1. Accardi R, Arnetoli G, Ammannati F. Parkinsonism caused by chronic subdural hematoma. A case report. *Ital J Neurol Sci* 1985;6:109–111.
2. Wiest RG, Burgunder JM, Krauss JK. Chronic subdural hematomas and parkinsonian syndromes. *Acta Neurochir (Wien)* 1999;141:753–757.

Neurology®

Deteriorating parkinsonism and subdural hematomas

Samuel M. Chou and Ludwig Gutmann

Neurology 2001;57;1295

DOI 10.1212/WNL.57.7.1295

This information is current as of October 9, 2001

Updated Information & Services	including high resolution figures, can be found at: http://n.neurology.org/content/57/7/1295.full
References	This article cites 2 articles, 0 of which you can access for free at: http://n.neurology.org/content/57/7/1295.full#ref-list-1
Subspecialty Collections	This article, along with others on similar topics, appears in the following collection(s): Brain trauma http://n.neurology.org/cgi/collection/brain_trauma CT http://n.neurology.org/cgi/collection/ct Parkinson's disease with dementia http://n.neurology.org/cgi/collection/parkinsons_disease_with_dementia Parkinson's disease/Parkinsonism http://n.neurology.org/cgi/collection/parkinsons_disease_parkinsonism
Permissions & Licensing	Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at: http://www.neurology.org/about/about_the_journal#permissions
Reprints	Information about ordering reprints can be found online: http://n.neurology.org/subscribers/advertise

Neurology® is the official journal of the American Academy of Neurology. Published continuously since 1951, it is now a weekly with 48 issues per year. Copyright . All rights reserved. Print ISSN: 0028-3878. Online ISSN: 1526-632X.

