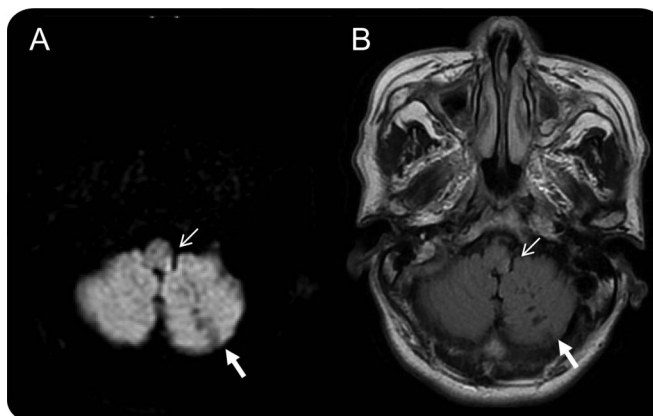


# Vibration-induced reversal of spontaneous nystagmus in lateral medullary infarction



**Figure** Acute lateral medullary infarction



Brain MRI shows an acute infarct (thin arrows) in the left lateral medulla on diffusion-weighted imaging (A) and fluid-attenuated inversion recovery (B). There are also multiple old infarcts (thick arrows) in the left cerebellar hemisphere.

A 68-year-old man developed vertigo with a lateral medullary syndrome (figure). Right-beating nystagmus, seen under Frenzel lenses, reversed when a vibrator (60 Hz) was applied on either sternocleidomastoid muscle or either mastoid. When the vibrator was turned off, the nystagmus returned to right-beating (video on the *Neurology*<sup>®</sup> Web site at [www.neurology.org](http://www.neurology.org)).

Vibration-induced nystagmus, usually beating toward the intact side, is seen in unilateral peripheral vestibulopathy.<sup>1</sup> We describe a patient with lateral medullary infarction in whom vibration reversed the spontaneous nystagmus, a pattern differing from that typically seen with peripheral lesions.<sup>2</sup> This finding implies that a central vestibular nystagmus may be altered by labyrinthine or nuchal proprioceptive stimulation.

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*Author contributions:* T.-P. Chang: drafting/revising the manuscript. Y.-C. Wu: study concept or design.

*Acknowledgment:* The authors thank Prof. David Zee for critically reviewing the manuscript.

*Study funding:* No targeted funding reported.

*Disclosure:* The authors report no disclosures relevant to the manuscript. Go to [Neurology.org](http://Neurology.org) for full disclosures.

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*Neurology* 2013;80;1353

DOI 10.1212/WNL.0b013e31828ab336

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