

Teaching Video *NeuroImages*: Myoedema in hypothyroidism



Giovary G. Capistrano,
MD*
Gabriela S. Galdino,
MD*

Correspondence to
Dr. Capistrano:
giovarygc@yahoo.com.br

**Supplemental data
at Neurology.org**

**Download teaching slides:
Neurology.org**

A 22-year-old man with 2 years of malaise and diffuse muscular enlargement complained of slow movements. Clinical examination showed myxedematous facies, lentification of deep tendinous reflexes, and a mound-ing phenomenon (video on the *Neurology*[®] Web site at Neurology.org). Laboratory examinations revealed hypothyroidism and elevated muscular enzymes, suggesting the diagnosis of myxedematous myopathy.

This intriguing physical examination finding known as myoedema, occasionally associated with hypothyroidism,¹ is due to prolonged muscle contraction caused by delayed calcium reuptake by sarcoplasmic reticulum, following local calcium ion release brought out by percussion of biceps belly.²

AUTHOR CONTRIBUTIONS

Giovary Gomes Capistrano: drafting/revising the manuscript, analysis or interpretation of data, accepts responsibility for conduct of research and

final approval, acquisition of data. Gabriela Studart Galdino: drafting/ revising the manuscript, accepts responsibility for conduct of research and final approval, acquisition of data.

STUDY FUNDING

No targeted funding reported.

DISCLOSURE

The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

REFERENCES

1. Bhansali A, Chandran V, Ramesh J, et al. Acute myoedema: an unusual presenting manifestation of hypothyroid myopathy. *Postgrad Med J* 2000;76:99–100.
2. Vignesh G, Balachandran K, Kamalanathan S, et al. Myoedema: a clinical pointer to hypothyroid myopathy. *Indian J Endocrinol Metab* 2013;17:352.

*These authors contributed equally to this work.

From the Universidade Federal do Ceará, Hospital Universitário Walter Cantídio, Serviço de Clínica Médica, Fortaleza, Ceará, Brazil.

Neurology®

Teaching Video *NeuroImages*: Myoedema in hypothyroidism

Giovany G. Capistrano and Gabriela S. Galdino

Neurology 2015;84:e24

DOI 10.1212/WNL.0000000000001195

This information is current as of January 26, 2015

Updated Information & Services	including high resolution figures, can be found at: http://n.neurology.org/content/84/4/e24.full
Supplementary Material	Supplementary material can be found at: http://n.neurology.org/content/suppl/2015/01/24/WNL.0000000000001195.DC1 http://n.neurology.org/content/suppl/2015/01/24/WNL.0000000000001195.DC2
References	This article cites 2 articles, 1 of which you can access for free at: http://n.neurology.org/content/84/4/e24.full#ref-list-1
Subspecialty Collections	This article, along with others on similar topics, appears in the following collection(s): All Movement Disorders http://n.neurology.org/cgi/collection/all_movement_disorders Clinical neurology examination http://n.neurology.org/cgi/collection/clinical_neurology_examination Endocrine http://n.neurology.org/cgi/collection/endocrine Muscle disease http://n.neurology.org/cgi/collection/muscle_disease
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 © 2015 American Academy of Neurology. All rights reserved. Print ISSN: 0028-3878. Online ISSN: 1526-632X.

