

Teaching Video NeuroImage: Scurvy Presenting as Proximal Myopathy in a Young Boy

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Figure X-Ray Knee (Anteroposterior View) of Patient Showing Signs of Scurvy



Lines of Fränkel (zone of provisional calcification at metaphysis; red arrow), Trümmerfeld zone (lucent metaphyseal band; black arrow), and Pelkan spurs (metaphyseal spurs; white arrow).

Five-year-old boy presented with progressive difficulty in running, climbing stairs, and walking for 3 months. Examination showed irritability, wide-based gait, imbalance, proximal lower limb muscle weakness, Gower sign (Video 1, links.lww.com/WNL/C321), normal tendon reflexes, and no sensory loss. On questioning, parents revealed that the child had been eating only wheat bread and milk for the past year. X-ray of knees was obtained and showed classic signs of vitamin C deficiency¹: lines of Fränkel, Trümmerfeld zone, and Pelkan spurs (Figure). Ascorbic acid was started at 250 mg/d. Complete resolution of symptoms was noted within 2 months (Video 1, links.lww.com/WNL/C321). Neurologic and musculoskeletal presentations of scurvy include myalgia, arthralgia, neuralgia, limb weakness (pseudoparalysis), hemarthrosis, hematomas, and neuropsychiatric symptoms.² Scurvy, although rare, should be considered in children with neuromuscular symptoms even in the absence of mucocutaneous manifestations,

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Teaching slides links.lww.com/WNL/C320.

especially in children with restrictive diets and comparatively rapid progression of symptoms.

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Appendix Authors

Name	Location	Contribution
Meenal Garg, MD	Department of Pediatric Neurology, Surya Hospitals, Jaipur, India	Drafting/revision of the manuscript for content, including medical writing for content; major role in the acquisition of data; study concept or design; analysis or interpretation of data; Additional contributions: Patient management

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