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Teaching Video NeuroImage: Reflex Seizures Mimicking Paroxysmal Dystonic Movements in a Patient With Late-Onset Rasmussen Encephalitis

### Author(s):

Andrea Stabile, MD<sup>1</sup>; Silvana Franceschetti, MD, PhD<sup>1</sup>; Francesco Deleo, MD<sup>1</sup>; Roberta Di Giacomo, MD<sup>1</sup>; Giuseppe Didato, MD<sup>1</sup>; Chiara Pastori, MD<sup>1</sup>; Ferruccio Panzica, MSc<sup>2</sup>; Marco De Curtis, MD<sup>1</sup>; Flavio Villani, MD<sup>3</sup>; Laura Canafoglia, MD<sup>1</sup>

**Corresponding Author:** Francesco Deleo, franc.deleo@gmail.com

Affiliation Information for All Authors: 1 Epilepsy Unit, Fondazione IRCCS Istituto Neurologico Carlo Besta, Member of the ERN EpiCARE, Milan, Italy; 2 Clinical Engineering, Fondazione IRCCS Istituto Neurologico Carlo Besta, Milan, Italy; 3 Division of Clinical Neurophysiology, IRCCS Ospedale Policlinico San Martino, Genova, Italy

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### **Equal Author Contribution:**

### **Contributions:**

Andrea Stabile: 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

Silvana Franceschetti: Drafting/revision of the manuscript for content, including medical writing for content; Study concept or design; Analysis or interpretation of data

Francesco Deleo: 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

Roberta Di Giacomo: Drafting/revision of the manuscript for content, including medical writing for content; Major role in the acquisition of data; Analysis or interpretation of data

Giuseppe Didato: Drafting/revision of the manuscript for content, including medical writing for content; Major role in the acquisition of data; Analysis or interpretation of data

Chiara Pastori: Drafting/revision of the manuscript for content, including medical writing for content; Major role in the acquisition of data; Analysis or interpretation of data

Ferruccio Panzica: Drafting/revision of the manuscript for content, including medical writing for content; Analysis or interpretation of data

Marco De Curtis: Drafting/revision of the manuscript for content, including medical writing for content; Study concept or design; Analysis or interpretation of data

Flavio Villani: 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

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## **Case report**

A 35-year-old right-handed man with late-onset Rasmussen encephalitis<sup>1</sup> involving the right hemisphere reported focal aware seizures with motor onset, rare focal to bilateral tonic-clonic seizures, and epilepsia partialis continua to the left upper limb (eAppendix 1 and eFigures 1–3 in the Supplement). Over time, a new seizure type mimicking dystonic posturing of the left arm became recurrent (Video 1), consistently triggered by voluntary movements of the limb.

The EEG-polygraphic recording showed fast activity in the right central region associated with the clinical seizure. Time-varying cortico-muscular coherence (CMC) analysis, a method commonly applied to evaluate the functional connection between the cortex and muscles during muscle contraction, helped us identify the pattern of the paroxysmal dystonic episodes as reflex focal aware seizures (Figure 1), probably evoked by abnormal afferents to the right sensorimotor cortex during voluntary muscle activation.

As expected in this immune-mediated brain disorder, reflex seizures poorly responded to various ASMs, while periodic IV immunoglobulin administration resulted in transient beneficial effect.

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## Video 1 title: Video-EEG with polygraphic recording

# Video 1 Legend

Left deltoid (EMG1), biceps (EMG2), triceps (EMG3), flexor (EMG4), and extensor carpi (EMG5) muscles. Reflex seizures (triggered by voluntary arm lifting) with dystonic features characterized by ulnar deviation and flexion of the wrist, flexion and internal rotation of the forearm. Red arrows indicate fast activity over the right central region.

# Figure 1 title: EEG-polygraphic recording, CMC analysis and brain MRI

# Figure 1 legend

A: Two reflex seizures over the right central leads associated with muscular bursts (boxes).

B: Sudden increase of C4 / left wrist flexor muscles CMC<sup>2</sup> during voluntary movement to seizure shift. C: Brain MRI shows (top) right hemisphere atrophy and (bottom) signal hyperintensity in the right postcentral gyrus (arrows).







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