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Teaching Video Neuro*Images*: Hand tremor, tongue and perioral fasciculation in a patient with Kennedy disease

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Correspondence to Dr. Rohani: mohammadroohani@gmail.com A 54-year-old man presented with a 10-year history of progressive gait difficulty, muscle weakness, and fatigue. Clinical examinations revealed mild nasal speech; postural hand tremor; absence of deep tendon reflexes; atrophy and fasciculation in tongue, facial (perioral), and limb muscles; and gynecomastia (video on the Neurology® Web site at Neurology.org). Nerve conduction studies had normal results; however, needle EMG demonstrated a neurogenic pattern with spontaneous activity (fibrillation, positive sharp wave, and fasciculation) in cranial and limb muscles. Genetic testing confirmed (CAG expansion of the androgen receptor gene on X chromosome) the diagnosis of spinobulbar muscular atrophy or Kennedy disease, an X-linked adult-onset degenerative disorder of motor neurons.1,2

AUTHOR CONTRIBUTIONS

Dr. Mohammad Rohani: acquisition of data, drafting and revising the manuscript. Dr. Shahnaz Miri: drafting and revising the manuscript.

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DISCLOSURE

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

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