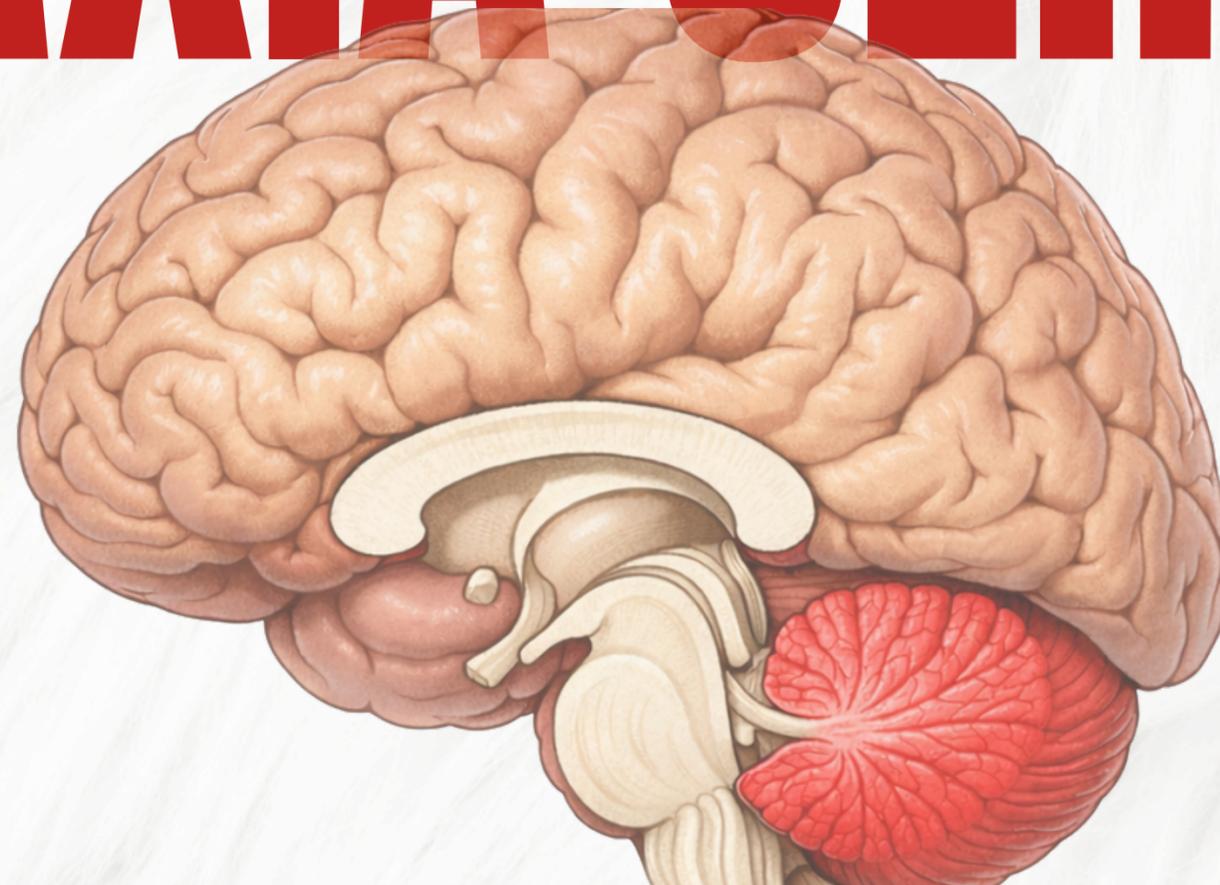


MOVEMENT DISORDERS

ATAXIA CEREBRI



MOVEMENT DISORDERS

1. CONTROL OF VOLUNTARY MOVEMENT BECOMES DYSREGULATED IN MOVEMENT DISORDERS DUE TO DISRUPTION OF NEURAL CIRCUITS. THESE IMPAIRMENTS CAN ARISE FROM BASAL GANGLIA, MOTOR CORTEX, OR CEREBELLUM

DIFFERENTIATED:



HYPOKENETIC

HYPERKENETIC

ATAXIC DISORDER

UMN DYSFUNCTION

HYPOKINETIC DISORDER

**1. ARISE FROM BASAL
GANGLIA**



**EX: PARKINSON'S
DISEASE**

**BRADYKINESIA
RIGIDITY
RESTING TREMOR
POSTURAL INSTABILITY**

HYPERKINETIC DISORDERS

1. ARISE FROM BASAL GANGLIA



Ballismus

Violent, proximal, flinging movements
Often unilateral (Hemiballismus)



Violent, proximal, flinging movements

EX: BALLISMUS



VIOLENT FLINGING MOVEMENT

ATAXIC DISORDERS

1. CEREBELLUM



Wide-Based Gait



Intention Tremor



Dysmetria



Dysdiadochokinesia



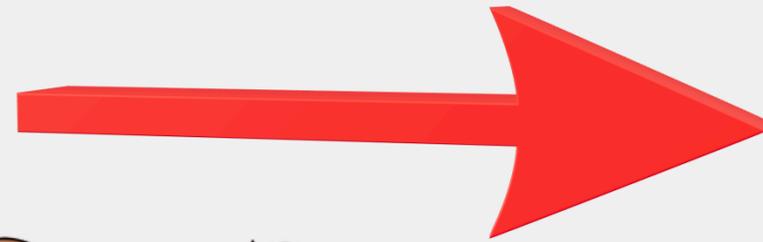
EX: CEREBELLAR ATAXIA



WIDE-BASED GAIT
INTENTION TREMOR
DYSMETRIA
DYSDIADOCHOKINESIA

UMN DYSFUNCTIONS

1. MOTOR CORTEX



UMN LESION DUE TO
STROKE



Spasticity



Clonus



Hyperreflexia



Weakness



SPASTICITY
CLONUS
HYPERREFLEXIA
WEAKNESS

WHAT IS CEREBELLAR ATAXIA

- CEREBELLAR ATAXIA IS THE DYSFUNCTION OF THE CEREBELLUM THAT IS RESPONSIBLE FOR VOLUNTARY MOVEMENT, BALANCE AND POSTURE, MOTOR LEARNING, AND PRECISION TIMING

- SYMPTOMS:
GAIT INSTABILITY (HALLMARK)
DYSMETRIA
INTENTION TREMOR
DYSARTHRIA
NYSTAGMUS
DYSDIADOCHOKINESIA
SLURRED SPEECH

- CAUSE: STROKE, HEMORRHAGE(PICA), DRUG TOXICITY, ALCOHOL INTOXICATION, AUTOIMMUNE, VITAMIN DEFICIENCY (B1, B12, VITAMIN E), PARANEOPLASTIC CEREBELLAR DEGENERATION, POST INFECTION (MOST COMMON)
GENETIC: FRIEDREICH'S ATAXIA

CEREBELLAR ATAXIA

IN EXAMINATION PATIENTS WILL HAVE IMPAIRED COORDINATION. AN EXAMPLE: FINGER TO NOSE TEST.

CEREBELLAR VS. SENSORY ATAXIA: IN SENSORY ATAXIA CLOSING THE EYES WOULD RESULT IN POSITIVE ROMBERG SIGN. IN CEREBELLAR ATAXIA THE INSTABILITY OF BALANCE ALWAYS PRESENT.

CEREBELLAR ATAXIA

**DIAGNOSIS: MRI*, DRUG
SCREENING, GENETIC
TESTING, LUMBAR
PUNCTURE,
TOXICOLOGY
SCREENING, VITAMIN
LEVELS**

**MRI IS VERY ESSENTIAL TO RULE
OUT ANY STRUCTURAL LESIONS**

CEREBELLAR ATAXIA TREATMENT

TREATMENT:

GENETIC: SUPPORTIVE

**VITAMIN DEFICIENCY:
SUPPLEMENT**

**TOXIC: REMOVING THE TOXIC
TUMOR: SURGERY/RADIATION**

AUTOIMMUNE: STEROIDS

INFECTION: SUPPORTIVE

**REHABILITATION: PHYSICAL
THERAPY, SPEECH THERAPY,
OCCUPATIONAL THERAPY IS
KNOWN TO SIGNIFICANTLY
IMPROVE QUALITY OF LIFE**

