



Ro 52 VASCULITIS WITH RECURRENT CHOREA

Neurology

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KEYWORDS

23 year old female presented with involuntary movement of right upper and lower limb of 2 years duration. Apparently normal since 2 years back developed sudden onset of involuntary movements and weakness of right upper and lower limbs. On examination patient had choreiform movements of right upper limb and lower limb, right hemiparesis with power 4/5. On neuroimaging, MRI brain showed decreased perfusion in caudate, lentiform nucleus and anterior limb of internal capsule with multiple ischemic areas in the cerebral parenchyma; suggestive of CNS vasculitis. On rheumatological evaluation, positive for anti-nuclear antibody (ANA). ANA profile was positive for Anti- Ro- 52 antibodies. Patient was on maintenance immunotherapy with oral steroids and immunosuppressant. Patient had 3 episodes of involuntary movements of right upper and lower limbs in the past 2 years. This episode of involuntary movements lasted for 10 days, since she discontinued the maintenance immunotherapy. The involuntary movements subsided one week after restarting the immunotherapy. These involuntary movements are choreiform in nature.



DISCUSSION:

Autoimmune disorder is a condition arising from an abnormal immune response to a normal body part.

Autoantibody is an antibody, produced by the immune system that is directed against one or more of the individual's own proteins.

Antinuclear antibodies are auto antibodies that bind to the contents of cell nucleus. There are many subtypes of ANAs such as anti-Ro antibodies, anti-La antibodies, anti Sm antibodies, anti- nRNP antibodies, anti-Scl-70 antibodies, anti-histone antibodies, antibodies to nuclear pore complexes, anti-centromere antibodies and anti-sp100 antibodies.

Anti-Ro/SSA auto antibodies are anti nuclear auto antibodies that are associated with many autoimmune diseases, such as systemic lupus erythematosus (SLE), systemic sclerosis (SS), SS/SLE overlap syndrome, sub acute cutaneous lupus erythematosus, neonatal lupus, and primary biliary cirrhosis.

Vasculitis is a group of disorders that destroy blood vessels by inflammation. Both arteries and veins are affected. Lymphangitis is sometimes considered a type of vasculitis. Vasculitis is primarily caused by leukocyte migration and resultant damage.

Cerebral Vasculitis is vasculitis involving the brain and occasionally

the spinal cord. It affects all of the vessels: capillaries, arterioles, arteries, venules, or veins. If blood flow in the vessel with vasculitis is reduced or stopped, the parts of the body that receive blood from that vessel begins to die results in stroke and neurological deficit.

Chorea is an abnormal involuntary movement disorder, characterized by brief, semi directed, irregular movements that are not repetitive or rhythmic, but appear to flow from one muscle to the next. The term hemi chorea refers to chorea of one side of the body.

This patient had ANA positive state, anti Ro 52 antibody positive state, episodes of choreiform movements whenever she discontinues maintenance immunotherapy. This case is defined as "**Ro 52 vasculitis with recurrent chorea**". It needs regular maintenance immunotherapy. (1, 2, 3)

REFERENCES

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