# Pediatrics Neuromuscular Disorders



### Topics to Cover today

- Duchenne Muscular Dystrophy (DMD)
- Myasthenia Gravis (MG)
- Floppy Infant
- Spinal Muscular Atrophy (SMA)
- Guillain-Barre Syndrome (GBS)
- Bell's Palsy



## Duchenne Muscular Dystrophy (DMD)





#### DMD-Induction

• It is inherited X-linked recessive condition. 1/3rd are new mutations.

These patients do not produce dystrophin.

 Dystrophin is a protein localized to muscle cell membrane.



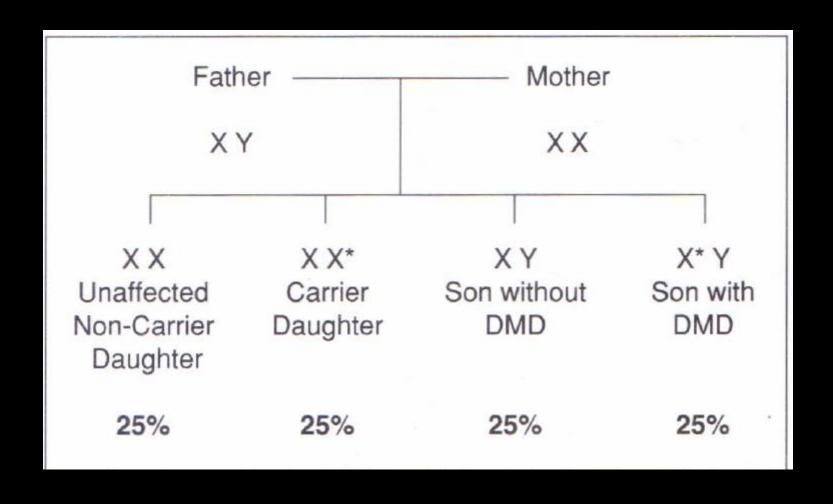
#### Cont....

• Incidence is 1:3500 male births.

• Female carriers are usually asymptomatic.



### Duchenne Muscular Dystrophy Mode of Inheritance





#### DMD-Clinical Features

• Onset is in early years. There is delay in motor milestones. Typically, boys lose ability to walk between 8 and 12 years.

 There is difficulty in climbing stairs, and lordosis with waddling gait.



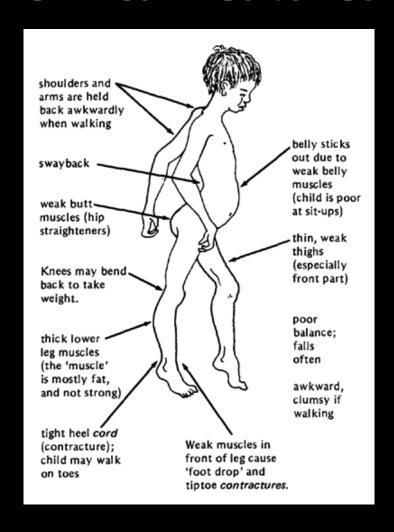
#### Cont...

• There is pseudo-hypertrophy of calves and progressive muscular weakness.

Respiratory failure occurs.



## Duchenne Muscular Dystrophy Clinical Features





## Duchenne Muscular Dystrophy Pseudo-Hypertrophy







## Duchenne Muscular Dystrophy

#### Diagnosis:

High plasma creatine kinase (> 5000iu/L).

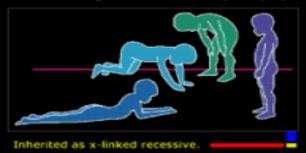
Muscle biopsy shows absent dystrophin.

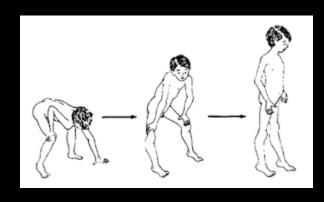
Positive Gower's sign



## Duchenne Muscular Dystrophy Gower's sign

#### Gower's sign in muscular dystrophy









#### **Treatment:**

 There is no curative treatment for Duchenne muscular dystrophy.

Physiotherapy and appropriate seating is needed.

Steroids have some transient role.

