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Dystonia: an unusual Danish case.

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- A case of universal dystonia that disappeared with anti-inflammatory treatment of the upper airways: The patient, Tanya Vestergaard was born September 21, 1979 in a healthy family, she was a university student. She started having cramps in August 2006 and was diagnosed with dystonia October 30, 2006 with EMG. The diagnosis was generalized dystonia and generalized tremor. She suffered from repeated inflammations of the throat with high fever (above 40 degrees Celsius), she also had allergic reactions from chickpeas, nuts and tomatoes, no other allergies were found. Chronic iron shortage and low vitamin D and Zinc levels were found as well as irritable bowel syndrome, constipation and chronic underweight. No signs of: Helicobacter infections, mannan binding lectin insufficiency, lactose insufficiency or wheat intolerance was found. Treatment history: before coming to the ear-nose-throat clinic: Symptoms: symptom groups (1-6): (1) general:, dystonia, severe muscle atrophy, breathing impaired, (2) cognitive:, confusion, limited concentration span, headaches, (3) speech:, stuttering, tongue cramps, lower voice frequency, (4) throat:, dysphonia, coughing, (5) ears:, distorted and impaired hearing, ear aches and eyes: impaired eyesight, sensitive to light, (6) gastro-intestinal:, weight loss, constipation. Diagnosis earlier based on MRI-scan, DAT-scan, electro-myography, and treatment with Diazepam in case of seizures, Rivotril (a kind of diazepam), Madopar (to rule out dopa-responsive dystonia), Peragit (Parkinson medication used for generalized tremor), physical therapy, Botox. Treatment after coming to the ear-nose-throat clinic: Telfast, 180 mg (anti inflammatory antihistamin treatment) up to 3 tablets per day, Pulmicort (local steroid/anti inflammatory treatment with minimal absorption), when needed, inhaled on the vocal folds. Results of treatment in the ear –nose –throat clinic: Tanya feels generally 98% better continuing but much lighter symptoms of dystonia: slight general discomfort while strenuous physical activity, right hand tremor, spasm in the left corner of the mouth, fingers double up, muscles of the side of the torso contracting. Conclusion: Tanya's condition today, no muscle atrophy or breathing problems, no cognitive problems, no headaches, no speech difficulties, no throat problems, no ear problems, no eyesight problems, is gaining weight. The results of Tanya's case show that anti inflammatory medication with antihistamin and inhalation of steroid in the upper airways can ease the symptoms of general dystonia - to a great extent. This abstract has been made as a poster at the COST 2103 Summer School – Tampere 2008¹.

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