

South West Interest in Muscles (SWIM) Conference

**“Anterior Horn Cell disorders
– including MND and SMA”**

WELCOME

Bienvenido



Dr Clare Wood-Allum

Adios



Dr Stefen Brady

- Short research questionnaire
- Feedback forms

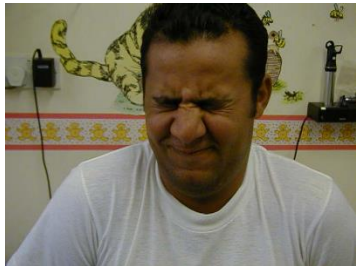
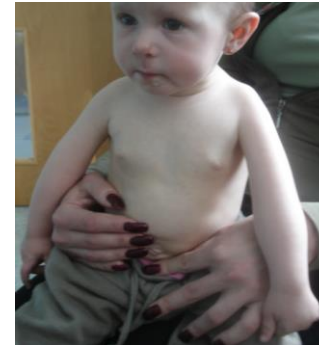
Date of next meeting:

THURSDAY 31st October

Title: Duchenne Muscular Dystrophy – all you wanted to know but were afraid to ask.



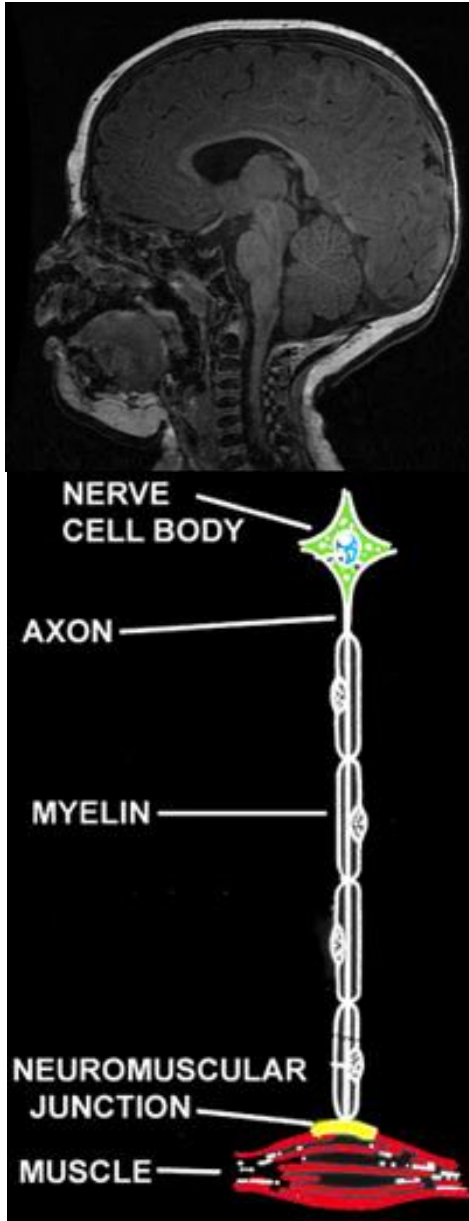
NMD



How do you make sense of this ?

- History taking
- Concept of neuroaxis
- Helps in localising the lesion
- Recognizing patterns of disease

Neuroaxis



Cortex

Cerebellum

Midbrain

Brain stem

Spinal cord

Ant Horn Cell

Nerves

NMJ

Muscle

UMN vs LMN

Upper motor neurone pattern

- increased tone (spastic)
- brisk reflexes (with clonus)
- Pyramidal pattern of weakness
- Extensor plantar responses

Lower motor neurone pattern

- Decreased tone
- Wasting
- Fasciculation
- Decreased/absent reflexes
- Flexor plantars

Or Mixed

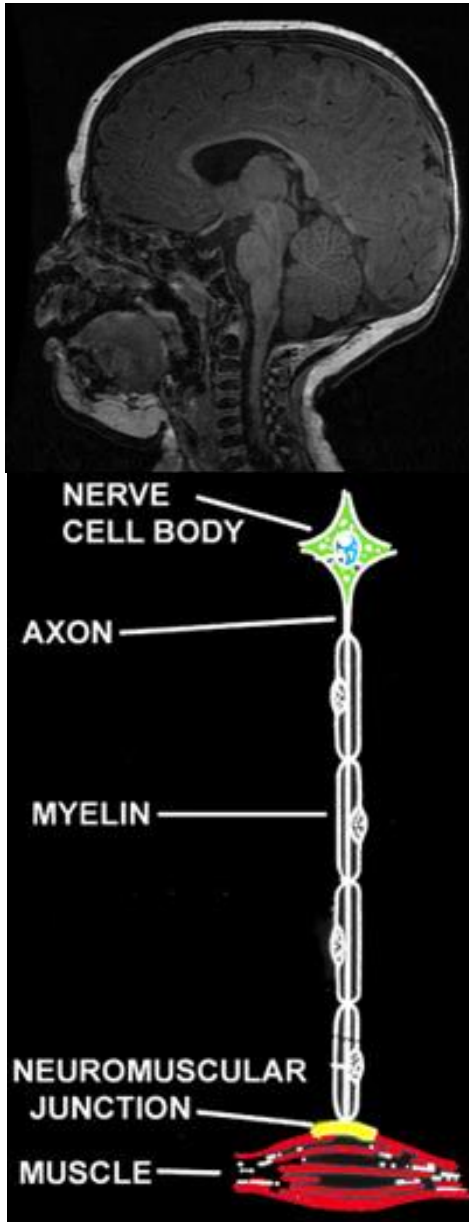
Myopathic pattern

- Decreased tone (but can be contractures)
- Wasting (and sometimes hypertrophy)
- Weakness, often more proximal
- Reflexes usually decreased

Neuromuscular junction

- Fatiguable weakness – often bulbar
- Weakness varies
- Normal reflexes

Neuroaxis



Cortex
Cerebellum
Midbrain
Brain stem

Epilepsy
Tumors
Ataxias
Metabolic
Mitochondrial
Dementia
MND
HSP



Spinal cord
Ant Horn Cell

SMA, MND,
HSP, polio



Nerves

Neuropathy,
Neuronopathy,
SMARD1



NMJ

Myasthenia gravis



Muscle

Muscular
Dystrophies



The revolution will not be televised..



The revolution will be LIVE