

Case 8: HEAD TILT AND UNSTEADY GAIT (Slide CC8-1)

Chief Complaint: An 18 month old girl was brought to her pediatrician due to several weeks of leftward head tilt and unsteady gait.

History of Present Illness/Past Medical History: The patient was the product of a normal spontaneous vaginal delivery at full term and was previously in good health, reaching normal developmental milestones. Two months prior to admission her mother first noted a tendency for the patient to tilt her head to the left. This gradually became more pronounced and two weeks prior to admission the patient, who had been walking well previously, began to have a more wide based staggering gait, and difficulty reaching for toys with her right hand. The patient has not had vomiting, headaches, lethargy, vision changes or seizures. She is not currently taking any medications and has had no recent febrile illness.

Family History: There is no family history of neurologic or metabolic disorders.

Physical Examination: Well nourished child in no apparent distress.

T=98.4 P=98 R=16 BP=90/60

Head circumference, height and weight all within normal limits for age.

Neck - supple, but **head tilts to left at rest.**

Lungs - clear; Cardiac - RR; Abdomen - Soft, no masses felt.

Neuro:

Mental Status - Alert, playful, uses two word combinations.

Cranial Nerves - Optic discs sharp, without papilledema. Follows visual stimuli, all directions, no nystagmus. Blinks to threat, all quadrants.

Pupils equal round and reactive to light.

Face, symmetric. Hearing equal. Palate elevation & tongue midline.

Motor - Normal bulk/tone; strength normal (5/5) all extremities.

Reflexes - normal, symmetrical.

Coordination - reaches for toy normally with left hand. Has **ataxia and dysmetria when reaching with right hand.**

Gait - **wide based, unsteady.** Perhaps appropriate for age, but changed according to mother.

Sensation - responds to touch, all extremities.

Questions:

1. For each of the symptoms and signs appearing in **boldface** above, use your knowledge of neuroanatomy to localize the structures which could be involved.

2. Describe the location of a single lesion that could produce these findings.
What is the differential diagnosis for this lesion?