

[PICTURES IN CLINICAL MEDICINE]

Paget's Disease of Bone Presenting with Peripheral Neuropathy

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Picture 1.



Picture 2.

An 81-year-old hypertensive man presented with a high serum alkaline phosphatase (ALP) levels of 1,042 IU/L (normal 110-340) without subjective symptoms. His left knee and ankle jerks were abolished, without motor weakness. A decreased light touch and pinprick sensation in his left L4-S2 dermatome was noticed, and his vibration sense was impaired in the left leg. His index of bone turnover was markedly elevated with a urinary NTx of 255 nmolBCE/mmolCr (13.0-66.2). Radiography showed an increased density, cortical sclerosis and tubercular coarsening in the ileum and sacrum (Picture 1). Bone scintigraphy showed a markedly increased uptake in the involved bones (Picture 2, arrow), indicated Paget's disease of bone. Oral risedronate at 17.5 mg daily (1) was started. Forty days after starting treatment, his serum ALP and urinary NTx levels decreased to

478 IU/L and 20.2 nmolBCE/mmolCr, respectively. He showed improvement of the sensory disturbances and tendon jerks. Some non-compressive mechanism at the left sacral canal might have provoked peripheral neuropathy (2).

The authors state that they have no Conflict of Interest (COI).

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