

[LETTERS TO THE EDITOR]

Chorea and Stroke. Comment: “Persistent Hemichorea as a Preceding Symptom of Cerebral Infarction”

Key words: chorea, stroke, cerebral infarction

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To the Editor We read with interest the article by Ueta et al. concerning an 84-year-old woman with right middle cerebral artery (MCA) stenosis who presented with persistent left hemichorea 19 days before cerebral infarction (1). This was an excellent report illustrating in great detail the importance of recognizing movement disorders, especially hemichorea, as the initial manifestation of cerebrovascular disease. However, we have several comments and concerns.

Among etiologies, vascular chorea is the third-most frequent cause, occurring in 9% of cases; however, sudden and lateralized pictures should be considered of vascular origin until proven otherwise (2).

We encountered a 37-year-old woman with a history of involuntary movements in the left upper limb of 3 days' evolution, accompanied by motor dysphasia 24 h before admission (3). Cranial tomography showed a cortical-subcortical hypodense area compromising the area of the base nuclei in the cerebral hemisphere deriving from the territory of the MCA.

Physician should recognize that when stroke is the cause of a movement disorder, the temporal relationship can be acute (after minutes or days) or delayed (after months or

years), with the patient clinically stable (3).

We agree with the authors that MCA stenosis without cerebral infarction presenting with persistent hemichorea may portend infarction. Therefore, it must be considered a differential diagnosis of hemichorea, even in the absence of cerebral infarction.

The article by Ueta et al. offers a good opportunity for resident physicians and specialists to review the early neurological manifestations of cerebral infarction and specifically movement disorders, their recognition and management.

We thank the authors for the opportunity and would like to encourage multicentric studies on this interesting topic.

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

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References

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