

Gait Examination; A Valuable Tool for Neurological Evaluation in Conversive Gait Disorder

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Acta Neurol Taiwan 2015;24:116

Dear editor,

Ayaz et al. well presented a case with unilateral foot drop who perfectly managed by the diagnosis of conversion disorder. They elucidated the issues regarding the diagnostic evaluation of a patient with conversive symptoms. According to their description, their patient categorized as a conversive gait disorder which was not specifically discussed⁽¹⁾.

Conversive gait disorders correspond to approximately 3-7% of the movements' disorders in specialized centres⁽²⁾. And, it is well-known that gait examination could be the best single test of neurological function among these patients. Once a physician evoked by the signs of conversive gait, he could find out probable diagnosis and ruled out organic etiologies by observing the patients movements during spontaneous walk throughout a sufficient distance, in different velocities, backward walking and heel walking. Because, bizarre reflection during walking will emerge in only one of these situations indicating that the abnormality is not compatible to any organic neurologic condition⁽³⁾. Altogether, conversive (psychogenic) motor symptoms are diagnosed based in congruity with any known neurologic ailment⁽⁴⁾. On the other hand, there is another tool that have been introduced for better assessment such a disorder and having more accurate diagnostic evaluation. The modified gait abnormality rating scale (GARS-M) may be useful for quantifying gait abnormalities in these individuals. In a recent study the reliability, responsiveness and concurrent

validity of GARS-M scores in individuals with conversion disorder was examined and revealed acceptable validity⁽⁵⁾. In future studies among patients with conversive symptoms the full neurological gait examination should be performed, besides it is suggested that GARS-M scale evaluation could be utilized for better interpretation of the results and obtaining more valid data.

Conflict of interest: None declared.

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Received November 5, 2015. Revised December 11, 2015.

Accepted December 13, 2015.

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