

## Head Shoulders, Knees and Toes: Neurological Presentations and Serious Mimics Pearls For Practice

### Foot Drop - Is it Always Sciatica?

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#### When should I refer to a Psychiatrist?

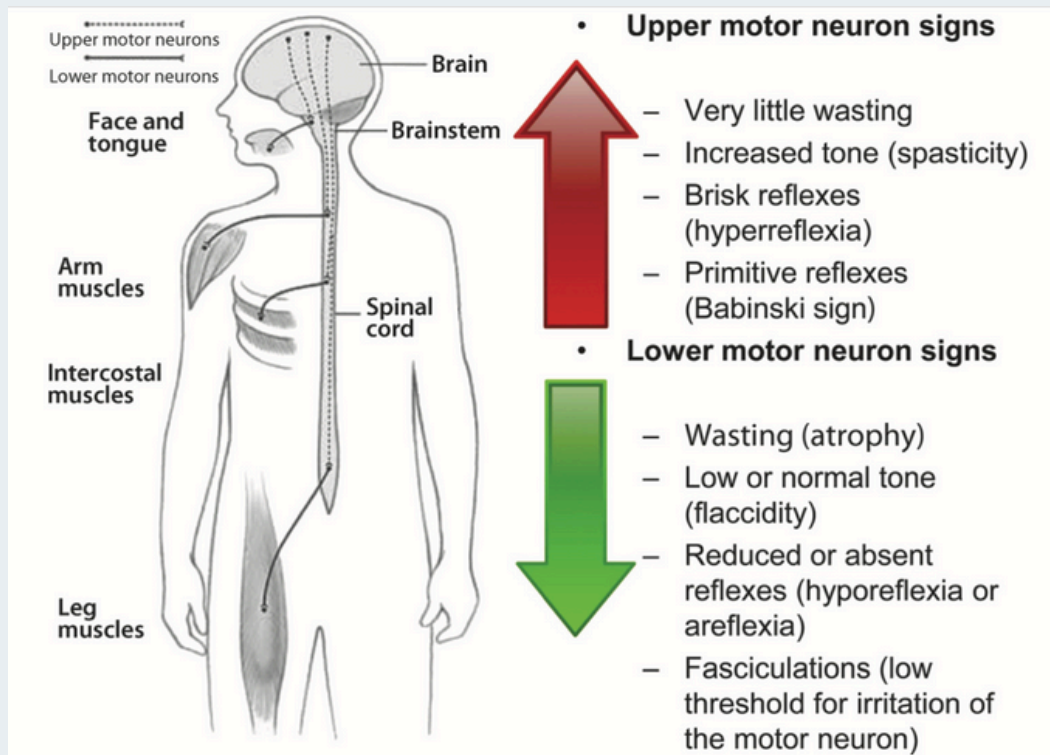
- Patient experiences pain from radiculopathy, musculoskeletal cause or neurological cause, anything along the neuraxis
- Patient has bowel or bladder symptoms in addition to leg symptoms - suggests spinal cord
- There is forward flexion with a twist (not just standing) - suggests radiculopathy
- Asymmetrical on leg exam
- Arm/face involvement
- Radiating pain

#### When should I refer to a Neurologist

- Weakness without sensory changes or pain
- Insidious onset - can't link onset to a specific event
- Findings of mixed upper and lower motor neuron signs
- Progression of weakness
- Progression to other regions (arm, speech, swallowing)

#### Considerations when exploring differential diagnoses

- Involvement of other systems (e.g. speech, swallowing, bowel, bladder)
- Extent of impact
- Time frame of change
- Impact on sensory/motor system (or both)



Upper motor neuron and lower motor neuron signs that are seen in addition to weakness.

Tiryaki & Horak. Continuum (Minneapolis). 2014; 20(5): 1185-1207. doi: 10.1212/01.CON.0000455886.14298.a4.

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Pearls For Practice

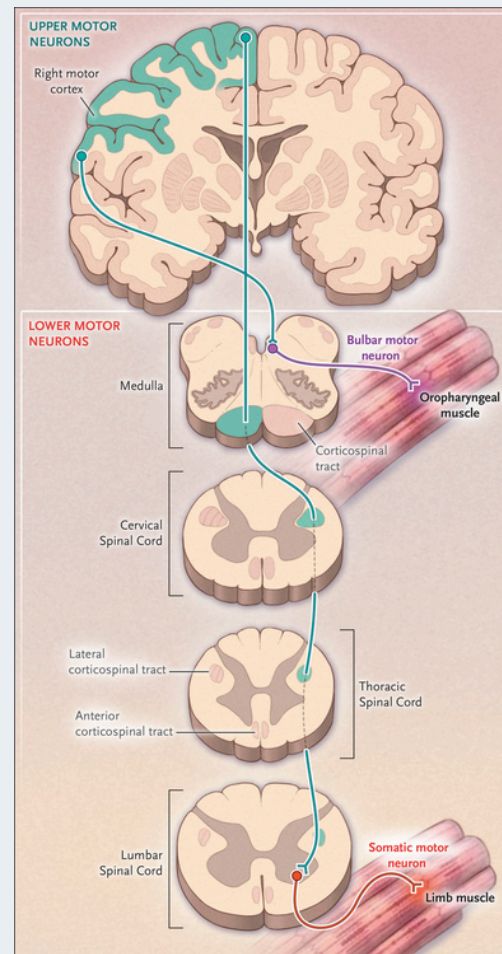
## Foot Drop - Is it Always Sciatica?

### Things to include in your referral to get your patient triaged appropriately

- In addition to consult question (eg “r/o L5 radiculopathy”)
- **Explicitly state if present:**
  - Weakness
  - Sensory symptoms or signs
  - Upper motor neuron signs
  - Muscle wasting
  - Bowel or bladder symptoms
  - Speech /swallowing difficulty
  - Progression of any of the above

### Concurrent courses of action

- Manage symptoms: treat neuropathic pain; consider physiotherapy referral
- Reassess patient for progression, especially if requested studies (MRI, EMG, etc) are months away
- Contact consulting physician to expedite referral if progression or red flags emerge
- If expedited referral not forthcoming, consider other pathways (e.g. RAAPID, Consult MD)



The motor system.

Brown, Phil & Al-Chalabi. N Engl J Med. 2017; 377(2):162-172. doi:10.1056/NEJMr1603471



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