

# Dyskinetic Cerebral Palsy: Normal MRI in Many, Diffusion Tensor Imaging (DTI) Next

*Study finds MRI abnormalities in less than half of dyskinetic CP patients, suggesting MRI may not be the best diagnostic tool for this condition*

SANTA BARBARA , CA, UNITED STATES, September 10, 2024 /EINPresswire.com/ -- "In the current study, eleven patients with dyskinetic CP (47.8%) showed abnormality in the putamen, thalamus, and periventricular white matter on brain MRI ... this study showed a similar proportion of patients with abnormal findings on brain MRI as reported in previous studies ... may suggest that brain MRI may not be the optimal diagnostic tool for dyskinetic CP," states Dr. Sung-Hee Park, M.D., Dept. of Radiology, Chonbuk National University Medical School, Korea.

[Dr. Greg Vigna, MD, JD](#), national malpractice attorney states, "MRI negative dyskinetic cerebral palsy is not uncommon. Dyskinetic cerebral palsy has dystonia and choreoathetosis. Dystonia causes twisting and abnormal postures due to muscle contraction. Choreoathetosis refers to a movement disorder that includes involuntary movements that may be both rapid (chorea) or slow (athetosis). Dyskinetic cerebral palsy is caused by perinatal hypoxic-ischemic brain injury."



Dr. Greg Vigna

What did Dr. Park report in "Neuroradiological and Neurophysiological Characteristics of Patients With Dyskinetic Cerebral Palsy" published in the Annals of Rehabilitation Medicine 2014; 38(2): 189-199?:

"In dyskinetic cerebral palsy (CP) group, areas with significant reduction in grey matter volume compared to control group were the hippocampus and parahippocampal gyrus on voxel-based morphometry (VBM). There were no significant differences in the basal ganglia and thalamus.

The number of fiber and fractional anisotropy (FA) value of corticospinal tract (CST) showed no significant difference between dyskinetic CP group and control group. The FA value of superior longitudinal fasciculus (SLF) was significantly lower in dyskinetic CP group compared to control



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group.

SLF connects the prefrontal lobe, premotor cortex and posterior parietal with anterior putamen and caudate nucleus, and is generally activated by performing a new activity under controlled attention ... but also language problems, as commonly seen in patients with dyskinetic CP."

Read Dr. Park's article:

<https://synapse.koreamed.org/articles/1149776>

The Vigna Law Group assists families affected by hypoxic events via the [Therapeutic Cooling/Birth Injury Help Desk](#). This website includes the web version of "The Mother's Guide to Birth Injury", available for families that are faced with significant challenges caused by the negligence of others. "The Mother's Guide to Birth Injury" was written by physicians, birth injury attorneys, and a Life Care Planner who is an expert in cerebral palsy, spina bifida, and birth injuries. This is a resource for families as they go down the path to recovery.

The Mother's Guide to Birth Injury: <https://vignallawgroup.com/mothers-guide-to-birth-injuries/>

Dr. Vigna is a California and Washington DC lawyer who focuses on neurological injuries caused by medical negligence and is a birth injury attorney. Ben Martin Law Group is a national pharmaceutical injury and birth injury law firm in Dallas, Texas. The attorneys are product liability and medical malpractice attorneys, and they represent neurological injuries across the country.

[Click here](#) to learn more about the Vigna Law Group.

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