Functional gut disorder can be a presenting feature of medullary lesion (Wood JR et al, Gastroenterology 89: 1411–1414, 1985). We had such a patient with intestinal pseudo-obstruction due to a medullary multiple sclerosis plaque. A 19-year-old girl had a subacute onset of dysarthria, mild weakness of the left upper extremity and right-side body, decreased sensation below the neck, and abdominal distension for 10 days. She had no micturition disturbance at all. Abdominal X-ray disclosed fecal impaction and gas with niveau (Fig. 1A, arrowheads). MRI scans of the brain showed a plaque in the left medullary basis extending to the tegmentum on saggital (Fig. 1B) and axial (Fig. 1C) T2-weighted images, which involved intramedullary vagal nerve root from the dorsal vagal nucleus. Steroid pulse therapy resolved all these symptoms within 5 weeks.

Key words: medulla, gut, constipation, multiple sclerosis, vagal nucleus

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