Dropped Head Syndrome Following Mantle Radiation Therapy

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Radiation-induced myopathy is a rare late-onset complication in patients with Hodgkin lymphoma treated by mantle-field irradiation, and is difficult to predict or avoid because of the long time interval (usually several months or even years) after irradiation (1). Once the myopathy emerges, the quality of life of the patient deteriorates markedly. We herein describe a patient with advanced non-small cell lung cancer who had been treated with mantle-field irradiation 26 years earlier. He presented with the typical characteristics of dropped-head syndrome due to severe weakness in the neck extensor muscles (Picture A, B). Computed tomography showed bilateral cervical muscle atrophy (Picture C-E, arrowheads: sternocleidomastoid muscles; arrows: neck extensor muscles including levator scapulae muscles, trapezius muscles, splenius muscles and paraspinal muscles). He had suffered from disturbances of neck extension without

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dysphagia for several years. His symptoms gradually improved after undergoing muscle rehabilitation. Most patients with Hodgkin’s lymphoma are cured with proper treatment. Clinicians should thus be aware of late-onset radiation-induced myopathy. Early and appropriate intervention with muscle rehabilitation may relieve the patient symptoms.

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Reference