

Motor neuron disease in an 80-year-old male patient

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Introduction: A case of an 80-year-old male patient hospitalized in Intensive Care Unit due to type II respiratory failure is presented. A brief report is made of the disease.

Purpose: The purpose of this report is to present a case with a rare motor neuron disease, to summarize the disease and to refer to its clinical manifestations, complications and treatment.

Materials & Methods: An 80-year-old male patient was treated in an emergency department at a comatose state, labor breathing, ancillary muscle use, and a five day fibrile situation. From his personal report there is a motor neuron disease, for which he was administered riluzole. The diagnosis was made by electromyography four years ago. The patient was intubated due to type II respiratory failure, hypoxemia, hypercapnia, and underwent empirical antimicrobial treatment, followed by an antibiogram, as a pneumonia emerged at the hospital. (Isolation of *Pseudomonas Aeruginosa* in bronchial secretions and microhaemia from *Acinetobacter baumannii*). Gradually, fever stopped, gas exchange and hemodynamic stability improved, and he was given a parenteral nutrition via a nasogastric tube. During his hospitalization, a tracheostomy was performed. Despite his clinical improvement, the patient needed mechanical respiratory support. He left ICU with non-

invasive ventilation (BIPAP).

Results & Conclusions: Motor neuron disease is a condition of unknown etiology. It is a rare disease (Impact: 1/100000 per year). 5% of cases are genetically based (inherited in an autosomal dominant way). The average time from the day of diagnosis till death is 2.5 years. The most common symptom is the discomfort and the weakness of one or more extremities. Other clinical symptoms include symmetrical weakness, extreme weight loss, loss of reflexes, spastic paraplegia, and tongue fasciculation. The diagnosis is made electromyographically, showing a denervation image of the four extremities. The riluzole glutamate antagonist delays the respiratory support and tracheostomy for several months, which eventually become mandatory. The main goal is to maintain a good nutrition and provide supportive care.