INVOLUNTARY MOVEMENTS IN STROKE

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The aim of this study was to investigate clinical, neuroimagistic features and outcomes of movement disorders in stroke patients. We performed a three-years retrospective study. Twenty-one (0.57%) of a total of 3624 patients admitted for stroke presented movement disorders at the onset (14 patients) or in a later stage (7 patients). Vascular risk factors were: hypertension 19/21 (90.48%), coronary artery disease 14/21 (66.67%), dyslipidemia 7/21 (33.33%), atrial fibrillation 7/21 (33.33%), diabetes mellitus 2/21 (9.52%). The types of movement disorders were as follows: dystonia in 8 cases (23.81%), hemiballism in 6 (28.57%), correa in 4 cases (19.04%), and tremor in 3 cases (14.29%). Types of stroke: 19 (90.47%) were ischemic and 2 (9.51%) were hemorrhagic. We analyzed each type of movement disorder in accordance with lesion's topography. We concluded that movement disorders accompanying stroke involve mainly basal ganglia and thalamus dysfunctions.