Wide-Open Eyes to the “Snake-Eye Sign”

De “Olho-Vivo” no “Snake-Eye Sign”

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ABSTRACT
Patient with progressive four-limb weakness, unsteadiness and falls. Examination revealed paretic-spastic gait, spastic tetraparesis, brisk tendon reflexes, reduced pain sensation at the right side and bilateral Hoffman and Babinski signs. Cervical magnetic resonance (MRI) revealed the “snake-eye sign” and spinal cord compression by protruded discs during cervical extension.

Key words: Magnetic Resonance Image; Tetraparesis.

RESUMO
Paciente com quadro progressivo de fraqueza nos membros superiores e inferiores, instabilidade e quedas. Ao exame clínico apresentou caminhada espástica e parética, tetraparesia espástica, reflexos bruscos do tendão, sensação de dor reduzida no lado direito e sinais bilaterais de Hoffman e Babinski. A ressonância magnética (RM) revelou “snake-eye sign” e compressão da medula por protrusão dos discos durante a extensão cervical.

Palavras-chave: Ressonância Magnética, Tetraparesia

Clinical Images

A 69 y-o female presented with a 5-year history of progressive four-limb weakness, unsteadiness and frequent falls. Physical examination revealed a paretic-spastic gait, a spastic tetraparesis most marked at the right side, brisk tendon reflexes, reduced pain sensation at the right side and bilateral Hoffman and Babinski signs. T2-weighted cervical MRI revealed bilateral anterior horn hyperintensities – the “snake-eye sign” (Figure 1) – and spinal cord compression by protruded discs during cervical extension (Figure 2). The “snake-eye sign” may be seen in anterior spinal artery occlusion, amyotrophic lateral sclerosis, cervical spondylotic myelopathy and atrophy1,2,3.

![Figure 1. Axial T2-weighted cervical MRI revealing symmetric anterior horn hyperintensities (“snake-eye sign”).](image-url)
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References


Figure 2. Spine T2-weighted MRI in sagittal cervical extension and neutral reference positions showing hyperintensities in spinal cord levels at C4-C5, also revealing protruded discs at C3-C4, C4-C5 and C6-C7, and in the two first levels the discs ventrally touch the spinal cord.

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