

# Teaching Video NeuroImages: Candy sign

## The clue to the diagnosis of neurosyphilis



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A 45-year-old man presented with rapid progressive cognitive decline and behavioral symptoms. Neurologic examination revealed global cognitive impairment and episodic, nonrhythmic, brief contractions of the left orofacial muscles (video at [Neurology.org](http://Neurology.org)). Serologic tests for syphilis were positive without HIV coinfection. CSF analysis revealed cell count 15/ $\mu$ L (mononuclear), hyperproteinorrachia (100 mg/dL), normal glycochorrachia, intrathecal immunoglobulin G synthesis (index 3.09), oligoclonal bands (type 2), and venereal disease research laboratory titer of 1/4. MRI revealed bilateral nonspecific white matter changes. Although rare and seldom documented, this dyskinesia, coined candy sign, is considered pathognomonic of neurosyphilis.<sup>1</sup> Improvement with penicillin was observed, but response to treatment seems to be variable.<sup>2</sup>

### AUTHOR CONTRIBUTIONS

João Pedro Marto, Cláudia Borbinha, Tânia Lampreia: drafting the manuscript. Luísa Alves, Miguel Viana-Baptista: critical revision. All authors approved the final version.

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### DISCLOSURE

The authors report no disclosures relevant to the manuscript. Go to [Neurology.org](http://Neurology.org) for full disclosures.

### REFERENCES

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2. Shah BB, Lang AE. Acquired neurosyphilis presenting as movement disorders. *Mov Disord* 2013;27:690–695.

Supplemental data  
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## Teaching Video *NeuroImages*: Candy sign: The clue to the diagnosis of neurosyphilis

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