SIMPLIFIED ABSTRACT SAMPLE WORK

A case report of CLIPPERS syndrome with gait and cognitive impairment

copyrights @ 2025 pubrica. No part of this document may be published without permission of the author

ARTICLE

//doi.org/10.1186/s12883-025-04487-9

A case report of clippers syndrome with gait and cognitive impairment

Shrestha, A.M., Bashyal, S., Kharbuja, N.

Background

CLIPPERS (Chronic Lymphocytic Inflammation with Pontine Perivascular Enhancement Responsive to Steroids) is a rare disorder of the CNS, involving the brainstem and cerebellum, characterized by subacute neurological symptoms and a distinctive pepper-like MRI enhancement.

specific background

CLIPPERS is a disorder that is not well known and verified to respond to corticosteroids, but both the long-term prognosis and the best treatment approach to achieve that prognosis are still unclear.

knowledge gap

There is a limited understanding in terms of the pathophysiology of the disease, propensity for relapse, and role of immunosuppressive therapies.

Here We Show

We present a unique case of CLIPPERS in a 44-year-old male with gait imbalance and cognitive deficits, distinguishable from MS based on MRI and CSF analysis, treated with high-dose corticosteroids.

Methodological

The diagnosis was established based on clinical presentation, CSF analysis, and MRI changes. The patient was treated with intravenous methylprednisolone with significant improvement. Once stable, the patient was placed on methotrexate for maintenance.

Results & Interpretation

After several weeks of corticosteroid therapy, the patient demonstrated significant improvement with markedly decreasing lesions on MRI after five months, confirming the effectiveness of steroids in managing CLIPPERS.

Implications

Clinicians should strive to achieve early diagnosis and start corticosteroids to obtain good outcomes. Furthermore, immunosuppressive therapies and long-term monitoring is important to prevent relapse.

copyrights @ 2025 pubrica. No part of this document may be published without permission of the author