



## PREVENTION OF LEG AND FOOT PARALYSIS

Every person with AA must be “on guard” for leg and foot paralysis. These unfortunate complications of AA can usually be prevented. A main reason for this bulletin is to inform persons with AA that there are symptoms that tip one off to impending paralysis.

**Cause of Paralysis:** This complication occurs when inflammation in cauda equina nerve roots causes destruction of a nerve root segment.

### Prevention of Paralysis – Two Measures:

1. An ongoing program of suppression of inflammation.
2. Exercise feet and legs daily (standing, flexing, walking).

**Signs and Signals of Impending Paralysis:** The signs listed below occur within days to weeks just before paralysis sets in:

1. Sudden weakness in foot, legs, ankles
2. Numbness, tingling, burning in foot or leg
3. Trembling, jerking in one leg

### Actions If Warning Sign Present:

1. A 6-day Medrol® Dose Pak to see if symptoms resolve
2. Increase of medications normally used for AA inflammation (i.e., ketorolac, methylprednisolone, ivermectin, dexamethasone)
3. Increase physical use of legs, feet (i.e., stretching, flexing, walking)

**Search for Cause of Inflammation:** A person with AA needs to know the specific cause of their ongoing inflammation: (1) autoimmune disease, (2) viral colonization/reactivation, (3) genetic connective tissue disease. The cause must be controlled and suppressed.

**Summary:** Paralysis of feet and legs in AA is caused when inflammation in cauda equina nerve roots produces destruction of a segment of one or more nerve roots. All persons with AA need to be aware of this complication and know the actions to take if these specific symptoms noted above develop.