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Sarcoid Myopathy: A Case Report

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Case Diagnosis

60 year old male with a past medical history of sarcoidosis (on methotrexate and steroids), neuropathy, urinary and bowel incontinence presenting with abnormality in gait secondary to a diagnosis of chronic sarcoid myopathy.

Case Description

A 60-year-old male presenting to acute inpatient rehabilitation for abnormality in gait. He had a known diagnosis of sarcoidosis for five years with diminished proprioception in his lower extremities and associated urine and bowel incontinence. He was previously diagnosed with chronic inflammatory demyelinating neuropathy, diagnosed on electrodiagnostics. The electrodiagnostic findings were thought to be related to his known diagnosis of sarcoidosis. The sarcoidosis had caused debility and challenges with activities of daily living, requiring maximal assistance with ambulation.

Resources:
1. Nessrine A, Zahra AF, Taoufik H. Musculoskeletal involvement in sarcoidosis. J Bras Pneumol. 2014 Mar-Apr;40(2):175-82. doi: 10.1590/s1806-37132014000200012. PMID: 24831403; PMCID: PMC4083650

Discussion

Sarcoidosis is an inflammatory disorder of unknown etiology. The disease most often affects the respiratory, lymphatic, ocular, and integumentary systems but less frequently involves the musculoskeletal system. Muscle involvement often goes unrecognized and can appear as chronic myopathy. In peripheral nervous system neurosarcoidosis, the large nerve fibers are often affected appearing as a disturbance of proprioceptive sensation, which was demonstrated in our patient. In muscles, sarcoid granuloma may locate between nerve fibers, which could be seen on a muscle biopsy, as it is the standard diagnostic tool for sarcoid myopathy. Muscle sarcoidosis is mostly diagnosed asymptomatically, however, about 1% of patients present with side effects such as pain, weakness, or atrophy, which could explain our patient's progressive lower extremity weakness. The etiology behind our patient's chronic urinary and bowel incontinence is unclear.

Conclusion

In a patient with disturbance in proprioception, progressive weakness, and difficulties in ambulation, it is vital to maintain a broad differential which may include sarcoid myopathy.