

## Functional Gait Disorder, Before and After Treatment

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This 87-year-old man was first evaluated for possible Parkinson's disease (PD) in 2018. His exam was consistent with PD except for his gait, which was normal. Two years later he was seen again for an acute decline in gait. He had a stooped posture, absent arm-swing, small stride and was thought to have idiopathic PD. His response to L-Dopa was equivocal. Over the next two years, his parkinsonian signs varied from non-existent to moderately severe, unrelated to his L-Dopa dose, so it was stopped.

**Video 1** was made at an urgent visit due to a severe worsening of gait. Walking had been normal 2 weeks before, according to his physical therapist. At this visit he was told that his problem was non-physiologic. He returned to his physical therapist, who was also told his diagnosis. She treated him for his gait disorder, *not* using any special techniques despite the non-physiological etiology. His long-term psychiatrist and psychologist, who treated him for chronic anxiety, could not identify a psychiatric etiology for his gait disorder. **Video 2** shows his return to baseline.

The diagnosis of a functional, or non-physiologic disorder, is based on a non-physiological history, such as an acute onset, or unexplained resolution of symptoms, as well as non-physiological findings on exam. Old age and "belle indifference" are no longer considered reliable factors in the diagnosis, and the identification of a psychological etiology to diagnose conversion disorders was abandoned in the Diagnostic and Statistical Manual (DSM) V.<sup>1</sup> The dramatic unexplained changes in his disability and exam made the diagnosis straightforward. Two to 5% of new patients seen in movement disorders clinics are diagnosed with functional disorders.



**Video 1.** The walking is initially wide-based, but there was no imbalance when he walked sideways. The ability to overcome his gait dysfunction with an unusual maneuver which should have worsened the imbalance, the lack of difference between walking with and without the crutches, and the last few steps into the office where the gait was normal, all point to a non-physiological problem.  
<https://vimeo.com/632094617>



**Video 2.** Normal gait is seen in this video.  
<https://vimeo.com/632087652>

### Reference

1. American Psychiatric Association. Diagnostic and Statistical Manual, Vth edition. American Psychiatric Association Press. 2013, Washington, D.C.

### Disclosure

Patient provided written, informed consent for videos to be published.

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