

Bilateral Ptosis without Proximal Muscle Weakness

A 30 years old right-handed housewife without any systemic comorbidities presented at PMR OPD with insidious onset gradually progressive bilateral painless ptosis (right>left) (Fig. 1) for the last 2 years which is accentuated by upward gaze along with lack of facial expression. There is no history of diplopia, redness of eye, shallow voice, proximal or facial muscle weakness, difficulty in deglutition or breathing, menstrual irregularity, joint pain, oral ulcer, photosensitivity, rash, polyphasia, polydipsia, polyuria, chronic fever, trauma or surgery.

On clinical examination, no neurological and musculoskeletal abnormalities were found apart from bilateral ptosis. Ice pack test done which was positive. Neostigmine test was also positive. Repetitive nerve stimulation of all four limbs was negative (Fig. 2). Her chest radiograph was normal.

She was diagnosed as a case of ocular myasthenia and was advised pyridostigmine with gradual incremental doses and physiotherapy. On follow-up, significant improvement was seen after 6 weeks.



Fig. 1: A case of ocular myasthenia



Fig. 2: Significant improvement was seen after 6 weeks