



# PSYCHOGENIC LOWER LIMB PARAPARESIS IN ADOLESCENT GIRLS: CLINICAL PRESENTATIONS IN PEDIATRIC NEUROLOGY PRACTICE

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## ABSTRACT

*This retrospective study investigates the clinical features, diagnostic challenges, and therapeutic outcomes of psychogenic lower limb paraparesis in adolescent girls. Functional neurological disorders (FND), manifesting without structural abnormalities, were observed in 13–17-year-old females presenting with sudden-onset lower limb weakness. Most cases were associated with acute psychosocial stressors. Neurological examination revealed subjective weakness, preserved deep tendon reflexes, and symptom patterns inconsistent with anatomical pathways. No organic pathology was detected. Interventions combining psychotherapy and functional rehabilitation resulted in rapid clinical improvement. Early recognition of this functional disorder can prevent unnecessary investigations and inappropriate treatments.*

## Introduction

Functional neurological disorders (FND) in adolescents pose significant diagnostic challenges, as symptoms emerge without detectable structural abnormalities. Adolescence is characterized by heightened emotional and social stress, increasing vulnerability to psychogenic manifestations. Sudden-onset psychogenic paraparesis in adolescent females often mimics organic neurological disorders, presenting with gait disturbances and subjective lower limb weakness. This study aims to delineate the clinical patterns, positive diagnostic signs, and treatment outcomes of psychogenic paraparesis in this population.

## Methods

A retrospective observational design was employed. Inclusion criteria: females aged 13–17 years presenting with sudden-onset lower limb weakness. Clinical histories emphasized recent psychosocial stressors. Neurological assessments included motor function, reflexes, and gait evaluation. All patients underwent neuroimaging (MRI) and electrodiagnostic studies (EEG, EMG), all of which were within normal limits. Organic central nervous system pathology was excluded based on clinical evaluation.

## Results

Most patients reported acute psychosocial stress preceding symptom onset.

Neurological findings included subjective lower limb weakness and gait abnormalities.

Deep tendon reflexes were preserved, and pathological reflexes were absent.

Symptoms were variable under distraction, supporting the functional nature of the disorder. Psychological support and functional rehabilitation led to rapid improvement in all cases.

Table 1.  
Clinical Features of Patients

| Clinical Feature                     | Observation         |
|--------------------------------------|---------------------|
| Acute psychosocial stress            | - Predominant       |
| Subjective lower limb weakness       | - 100%              |
| Deep tendon reflexes                 | - Preserved         |
| Pathological reflexes                | - Absent            |
| Instrumental studies (MRI, EEG, EMG) | - Normal            |
| Therapeutic outcome                  | - Rapid improvement |

### Discussion

The findings support that psychogenic lower limb paraparesis in adolescent girls is a reversible functional neurological disorder. Diagnostic indicators include inconsistency with neuroanatomical pathways and variability under distraction. The higher prevalence in adolescent females may be explained by developmental and psychosocial factors. Early recognition reduces unnecessary diagnostic procedures and facilitates timely intervention.

### Conclusion

Psychogenic lower limb paraparesis in adolescent girls represents a reversible functional neurological disorder. Diagnosis relies on positive clinical signs and exclusion of organic pathology. Psychological intervention and functional rehabilitation are effective, preventing misdiagnosis and inappropriate management.

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