



International Virtual 2023 Medical Research Symposium

*'Spearheading Responsible
Research & Innovation towards
Achieving Sustainability'*

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PC065

A Boy with Inability to Walk; Don't Forget about Scurvy

ABDUL HADI SAID, NOOR EMILIA EMIRA MANSOR

*Department of Family Medicine, Kuliyah of Medicine, International Islamic University
Malaysia, Kuantan, Pahang*

Introduction: Scurvy or vitamin C deficiency is infrequent in this modern era; thus, it is often not within the list of differential diagnoses. Scurvy can mimic various rheumatological, orthopedic, neurological, and hematological illnesses. **Case presentation:** We report an eight-year-old boy with autism spectrum disorder with picky eating habits presented with lower limb weakness, joint pain, prolonged fever, and constitutional symptoms. Skin examination showed multiple hyperpigmented scars and gingival hyperpigmentation. Thorough history taking supported by the radiographic finding and a low level of ascorbic acid confirmed the diagnosis of scurvy. With Vitamin C supplementation, the patient showed dramatic improvement and gradually recovered. **Discussion:** The broad clinical picture is generally overlooked as other systemic illnesses cause extensive investigation that delays the diagnosis. The inability to walk is a musculoskeletal symptom in children with scurvy. Generalized systemic symptoms are fever, weakness, malaise, and loss of appetite. Hemorrhagic skin lesions and gingival hyperpigmentation are most specific findings in scurvy. Radiographic findings suggestive of scurvy are located in the metaphysis of all long bones. Dietary history is essential in autism spectrum disorder to diagnose nutritional deficiency due to their selective diet preference. **Conclusion:** The suspicion of scurvy is still low in Malaysia; thus, it is always overlooked or misdiagnosed. The diagnosis of scurvy requires thorough history taking, recognition of clinical findings supported by radiographic evidence, and improvement with ascorbic acid supplementation; confirmatory test is by testing serum ascorbic acid level. Scurvy is preventable if taking adequate vitamin C requirement.

Keywords: Inability to walk; scurvy