

# Beevor's sign in a case of inclusion body myositis

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## Keywords

Signs; Inclusion Body Myositis; Myopathy

Inclusion Body myositis (IBM) is a form of Idiopathic Inflammatory myopathy, most commonly seen in people at age of 50 and older.<sup>1</sup>

It is characterized by progressive proximal leg and distal arm weakness leading to difficult standing up and decreased arm force. Finger flexor atrophy, dysphagia, and foot drop are other rare presentations of IBM.<sup>1,2</sup>

Beevor's sign is an upward movement of umbilicus in patient, following neck flexion in supine position. It can be a manifestation of fascioscapular muscular dystrophy (FSHD), spinal cord lesion between T10 and T12 segment, amyotrophic lateral sclerosis (ALS), and other rare diseases.<sup>3</sup>

There are very few reports of Beevor's sign in cases of IBM.<sup>4,5</sup> In this article, we present a 55-year-old man with a history of slowly progressive weakness in proximal and distal upper limbs, especially in finger flexors predominantly on the right side, starting 3 years

before followed by difficulty climbing the stairs and standing up the chair.

Electromyography showed chronic myopathic pattern, and creatine phosphokinase (CPK) was 355 µg/l. The patient was diagnosed with IBM after muscle biopsy.

Here, there is a video clip of Beevor's sign during clinical examination, showing an upward movement of umbilicus following neck flexion ([Video 1](#)).

This observation indicates the necessity of considering IBM as a differential diagnosis in case of Beevor's sign with muscle weakness.

## Conflict of Interests

The authors declare no conflict of interest in this study.

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## References

1. Needham M, Corbett A, Day T, Christiansen F, Fabian V, Mastaglia FL. Prevalence of sporadic inclusion body myositis and factors contributing to delayed diagnosis. *J Clin Neurosci* 2008; 15(12): 1350-3.
2. Dimachkie MM, Barohn RJ. Inclusion body myositis. *Neurol Clin* 2014; 32(3): 629-46, vii.
3. Althagafi A, Nadi M. Beevor Sign. In: StatPearls [Internet]. Treasure Island, FL: StatPearls Publishing; 2020.
4. Milisenda JC, Rico C, V, Garcia AI, Tomas X, Grau JM. <<Extended>> Beevor's sign as a new clinical sign in sporadic inclusion body myositis. *Med Clin (Barc)* 2017; 148(8): e43.
5. Sugie K, Kumazawa A, Ueno S. sporadic inclusion body myositis presenting with Beevor's sign. *Intern Med* 2015; 54(21): 2793-4.