



### **CHARCOT NEUROARTHROPATHY SECONDARY TO NEUROSYPHILIS.**

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#### **BACKGROUND**

The Charcot Neuroarthropathy is a progressive disease that causes the bones and joints destruction with subsequent foot and ankle deformations, implying in an increased amputation risk. It can arrive due to the sensory secondary neuropathy to neurosyphilis.

#### **CASE REPORT**

Man, 65 years old, hypersthene, for ten years he has reported persistent edema in the ankles, with progressive worsening and significant joint deviation, denies morning stiffness greater than one hour, and constitutional symptoms, denies diabetes. At physical examination: ankle edema associated with significant joint deviation and loss of pain sensitivity in both lower limbs. Additional exams: VHS(40 mm/h), fasting glycemia(93 mg/dl), uric acid(5 mg/dl), VDRL reagent(positive 1/8). He presented positive rheumatoid factor, 24 mg/L PCR, FTA-ABS-IgM negative, FTA-ABS-IgG reagent and anti-CCP negative. Radiograph of the feet and ankles showing loss of bone formation and collapse of the plantar arch, fractures and subluxation of the bone structures, along the left joint, suggesting Charcot arthropathy.

#### **CONCLUSION**

The occurrence of neurosyphilis and tabs dorsalis are conditions related to CAP, which causes progressive and aggressive destruction of bones and joints, with deformities in the feet and ankles. What evidence the importance of early diagnosis, with prevention of the progression of CAP.