

Table 1 **CLINICAL PATTERNS**

Clinical Patterns of Hepatic, Neurologic, and Psychiatric Disease in Patients with Wilson's Disease

Hepatic	<ul style="list-style-type: none"><li>• Asymptomatic hepatomegaly</li><li>• Isolated splenomegaly</li><li>• Persistently elevated AST, ALT</li><li>• Fatty Liver</li><li>• Acute hepatitis</li><li>• Resembling autoimmune hepatitis</li><li>• Cirrhosis (compensated or decompensated)</li><li>• Fulminant hepatic failure</li></ul>
Neurological	<ul style="list-style-type: none"><li>• Movement disorders (tremor, involuntary movements)</li><li>• Drooling, dysarthria</li><li>• Rigid dystonia</li><li>• Pseudobulbar palsy</li><li>• Seizures</li><li>• Migraine headaches</li><li>• Insomnia</li></ul>
Psychiatric	<ul style="list-style-type: none"><li>• Depression</li><li>• Neuroses</li><li>• Personality changes</li><li>• Psychosis</li></ul>
Other systems	<ul style="list-style-type: none"><li>• Renal abnormalities: aminoaciduria and nephrolithiasis</li><li>• Skeletal abnormalities: premature osteoporosis and arthritis</li><li>• Cardiomyopathy, dysrhythmias</li><li>• Pancreatitis</li><li>• Hypoparathyroidism</li><li>• Menstrual irregularities; infertility, repeated miscarriages</li></ul>

Table 2 **FAMILY SCREENING**

- Medical history
- Physical examination
- AST, ALT, ALP, total and conjugated bilirubin, albumin, INR, CBC Ceruloplasmin
- Slit lamp exam for K-F Rings
- 24 hour basal urinary Cu
- Genotyping/haplotype studies based on proband

*"The Wilson's Disease Association funds research and facilitates and promotes the identification, education, treatment, and support of patients and other individuals affected by Wilson's Disease."*

For more information  
please contact the:

**WILSON'S DISEASE ASSOCIATION**

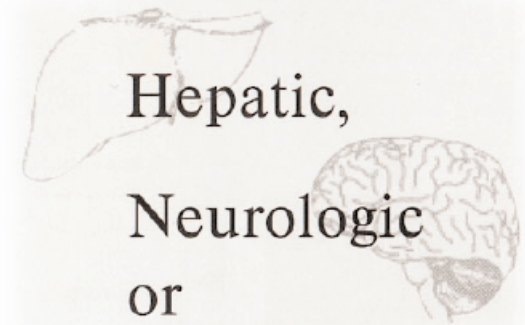


**I N T E R N A T I O N A L**

1802 Brookside Drive  
Wooster, Ohio 44691  
330-264-1450  
Call toll free:  
888-264-1450  
Email: [wda@sssnet.com](mailto:wda@sssnet.com)  
[www.wilsonsdisease.org](http://www.wilsonsdisease.org)

## A Diagnostic Tool for Physicians

## Unexplained



## Hepatic, Neurologic or Psychiatric Symptoms?

Think.....

# WILSON'S DISEASE

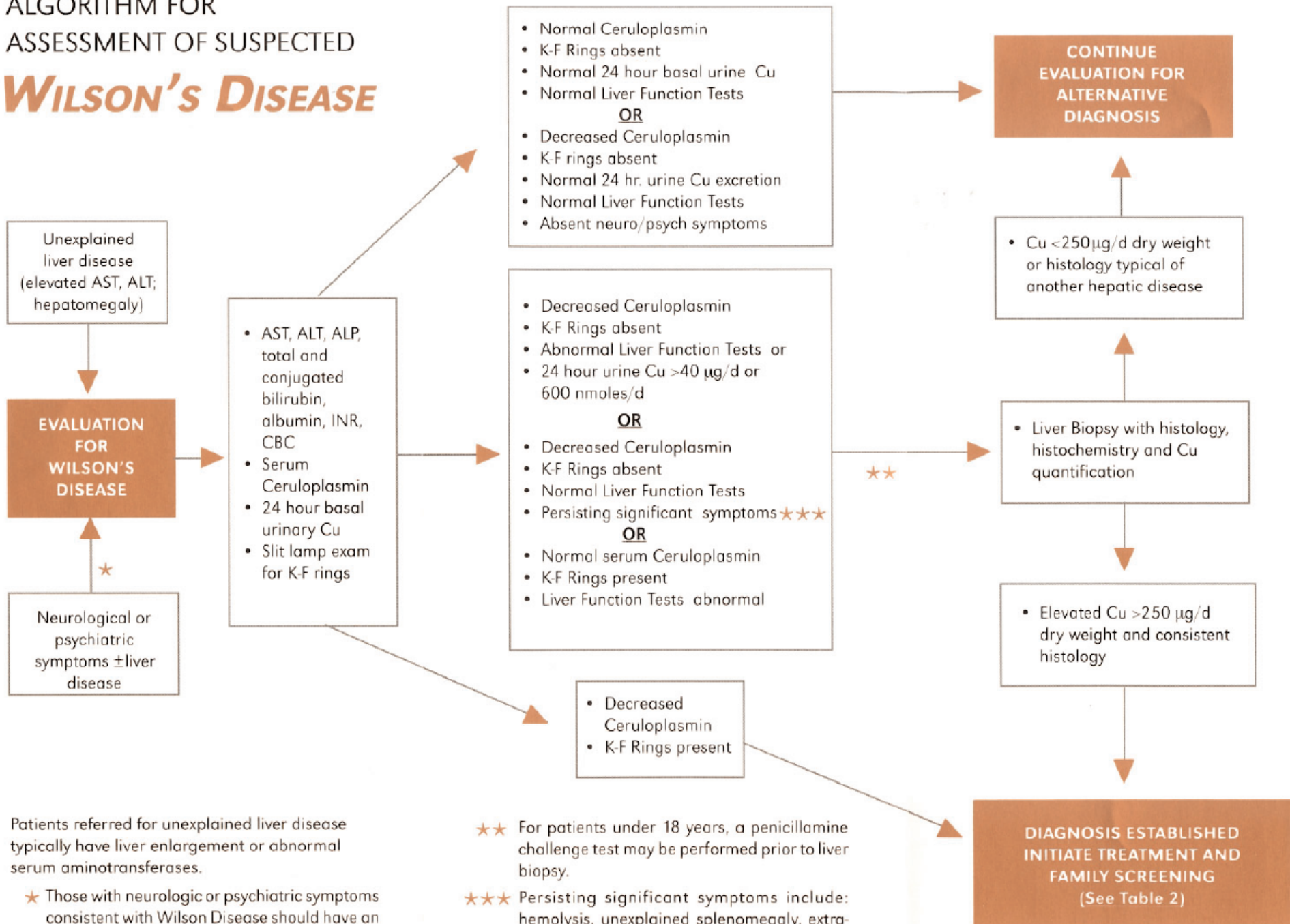
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# ALGORITHM FOR ASSESSMENT OF SUSPECTED *WILSON'S DISEASE*



Patients referred for unexplained liver disease typically have liver enlargement or abnormal serum aminotransferases.

★ Those with neurologic or psychiatric symptoms consistent with Wilson Disease should have an MR scan of the head performed prior to the hepatologic evaluation.

★★ For patients under 18 years, a penicillamine challenge test may be performed prior to liver biopsy.

★★★ Persisting significant symptoms include: hemolysis, unexplained splenomegaly, extra-hepatic manifestations of WD, and neurologic or psychiatric disorders. (See Table 1)