

BoNT in the longus colli and longus capitis
muscles for dystonic head flexion:

Antero-lateral approach

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Conflicts/Disclosures

- No conflicts
- Nothing to disclose

Reference



Article

Management of Anterocapitis and Anterocollis: A Novel Ultrasound Guided Approach Combined with Electromyography for Botulinum Toxin Injection of Longus Colli and Longus Capitis

Michael Farrell ¹, Barbara I. Karp ², Panagiotis Kassavetis ², William Berrigan ³,
Simge Yonter ⁴, Debra Ehrlich ² and Katharine E. Alter ^{5,*}



(a)



(b)



(c)

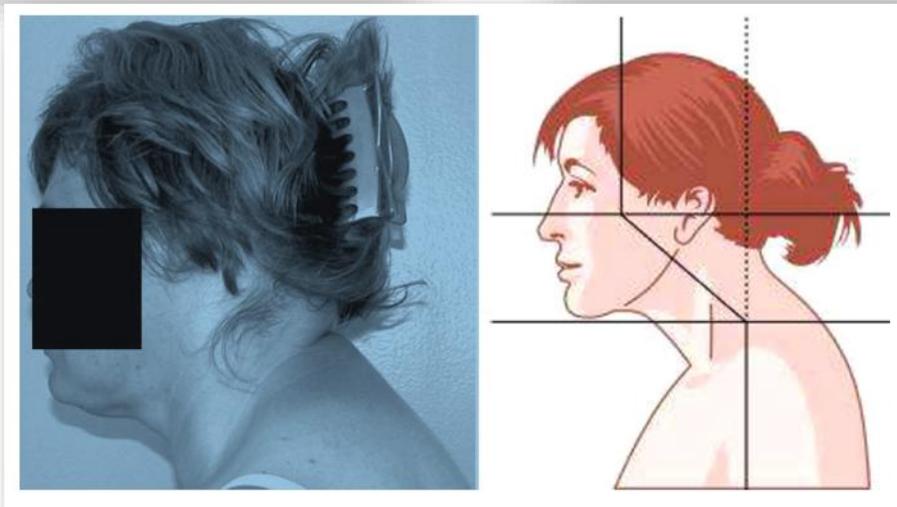
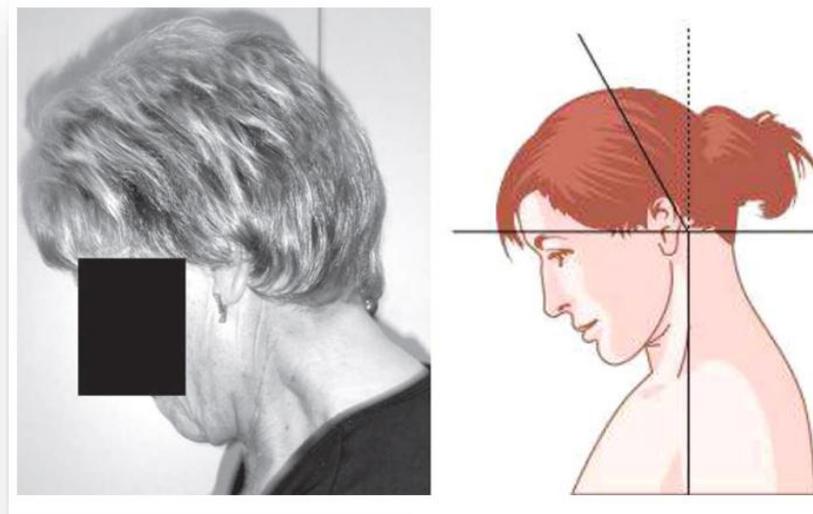
Figure 1. Clinical patterns of cervical dystonia. **(a)** anterocollis; **(b)** anterocapitis; **(c)** combined pattern of anterocollis and retrocapitis.

Anterocollis and anterocaput

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Selection of Muscles for Botulinum Toxin Injections in Cervical Dystonia

Wolfgang H. Jost, M.D.,^{1*} Laurent Tatu, M.D.²

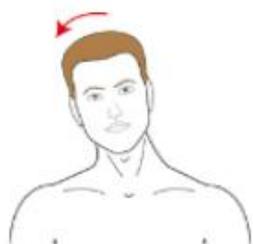
Laterocollis:
ipsilateral
M. levator scapulae (M)
M. semispinalis cervicis (M)
M. scalenus medius (S)
M. longissimus cervicis (S)

Torticollis:
ipsilateral
M. semispinalis cervicis (M)
M. levator scapulae (M)
M. splenius cervicis (S)
M. longissimus cervicis (S)

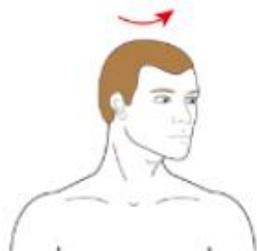
Anterocollis:
bilateral
M. scalenus medius (M)
M. levator scapulae (M)
M. longus colli (S)

Retrocollis:
bilateral
M. semispinalis cervicis (M)

Lateral shift:
Combination of laterocollis to one side and laterocaput to the opposite site
Correspondent muscles



Laterocollis



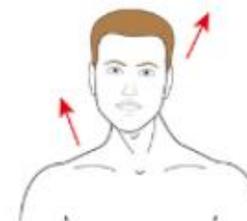
Torticollis



Antecollis



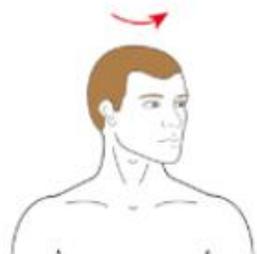
Retrocollis



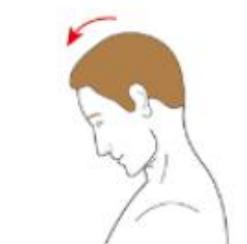
Lateral shift



Laterocaput



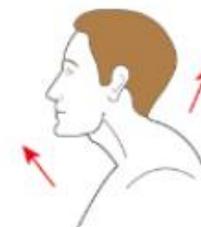
Torticaput



Antecaput



Retrocaput



Sagittal shift

Laterocaput:
ipsilateral
M. sternocleidomastoideus (M)
M. trapezius pars descendens (M)
M. splenius capitis (M)
M. semispinalis capitis (S)
M. longissimus capitis (S)
M. levator scapulae (S)

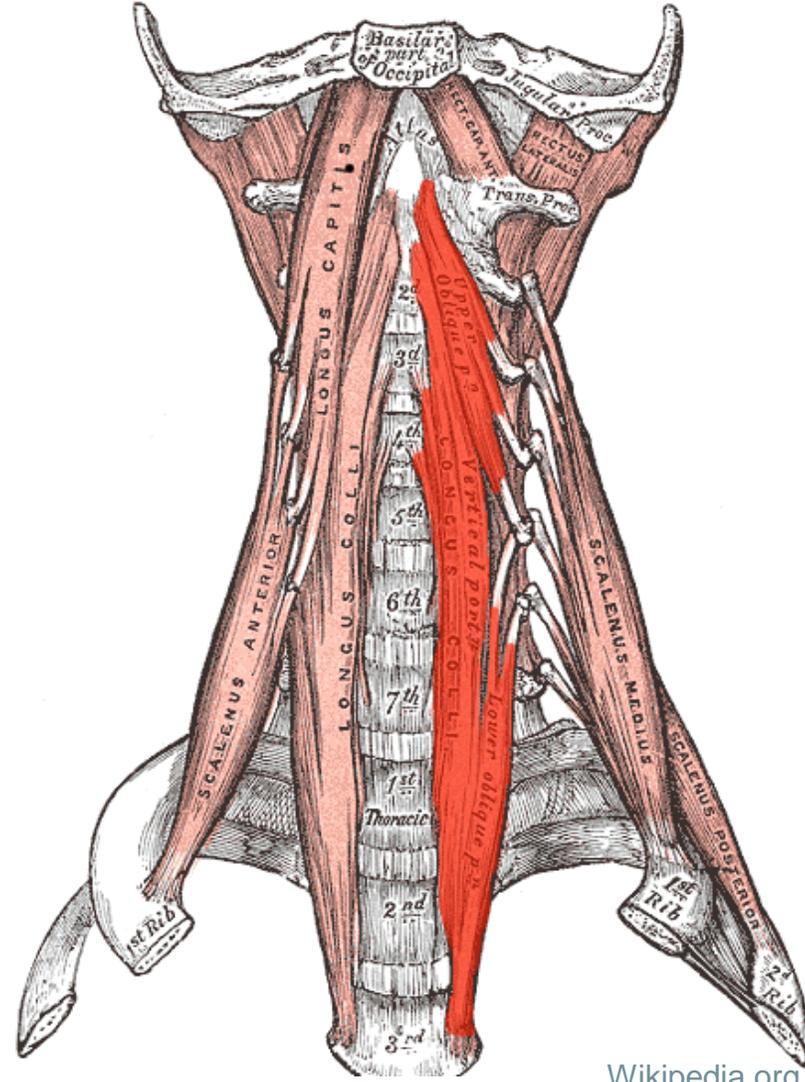
Torticaput:
contralateral
M. trapezius pars descendens (M)
M. sternocleidomastoideus (M)
M. semispinalis capitis pars med. (S)
ipsilateral
M. obliquus capitis inferior (M)
M. longissimus capitis (S)
M. splenius capitis (S)

Anterocaput:
bilateral
M. longus capitis (M)
M. levator scapulae (M)
M. sternocleidomastoideus (S)

Retrocaput:
bilateral
M. obliquus capitis inferior (M)
M. semispinalis capitis (M)
M. trapezius pars descendens (M)
M. splenius capitis (S)

Anterior shift:
Combination of anterocollis and retrocaput
Correspondent muscles

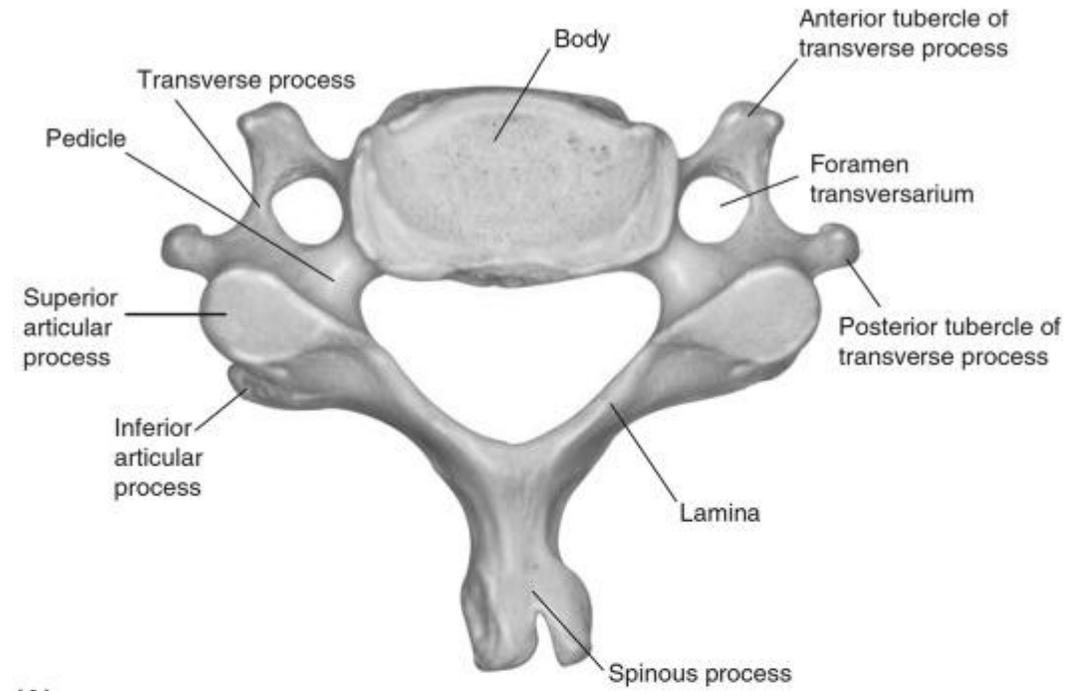
Anatomy



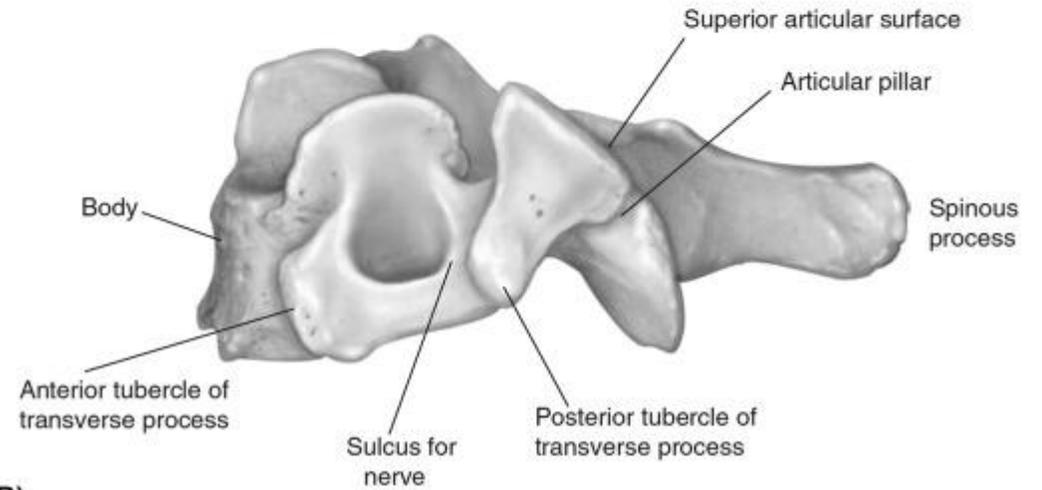
Anatomy



Anatomy

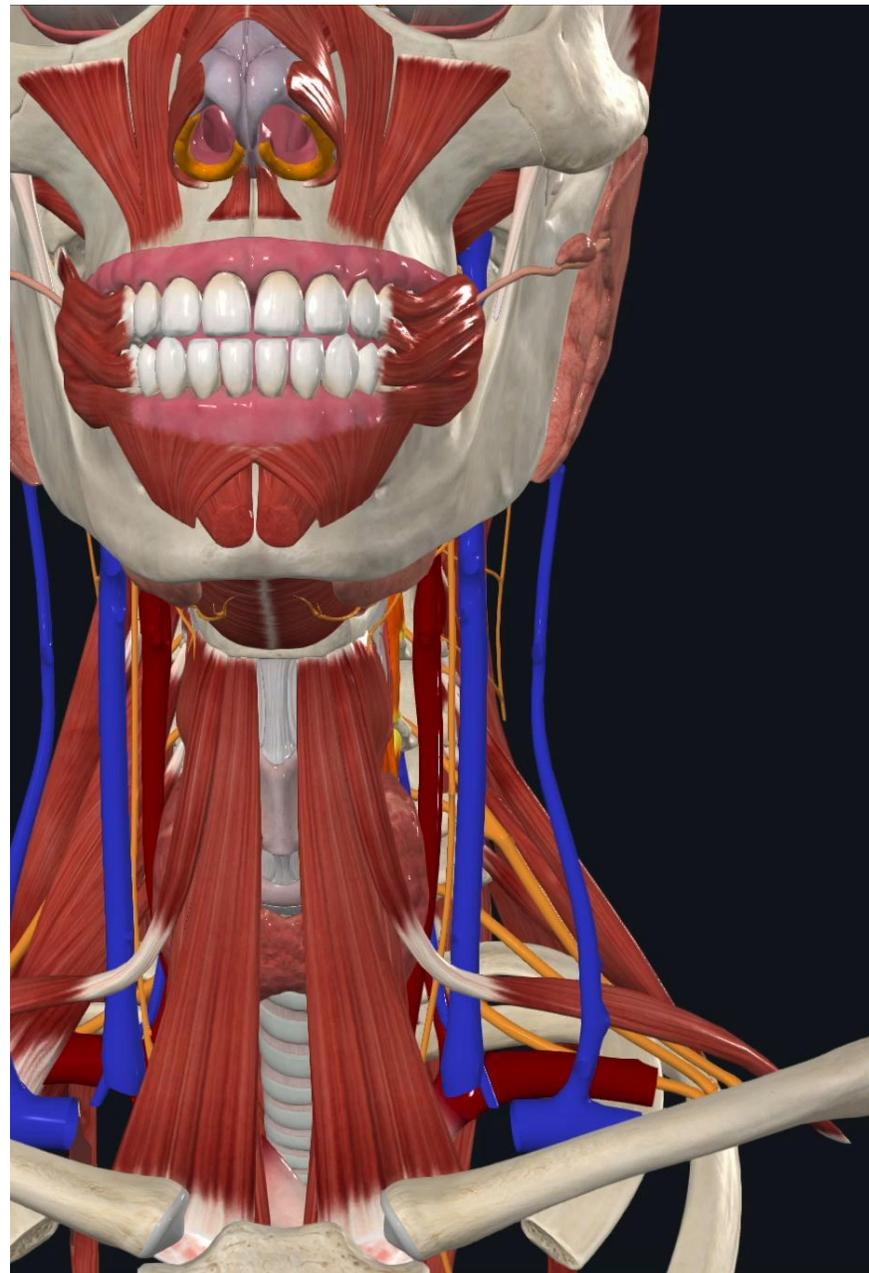


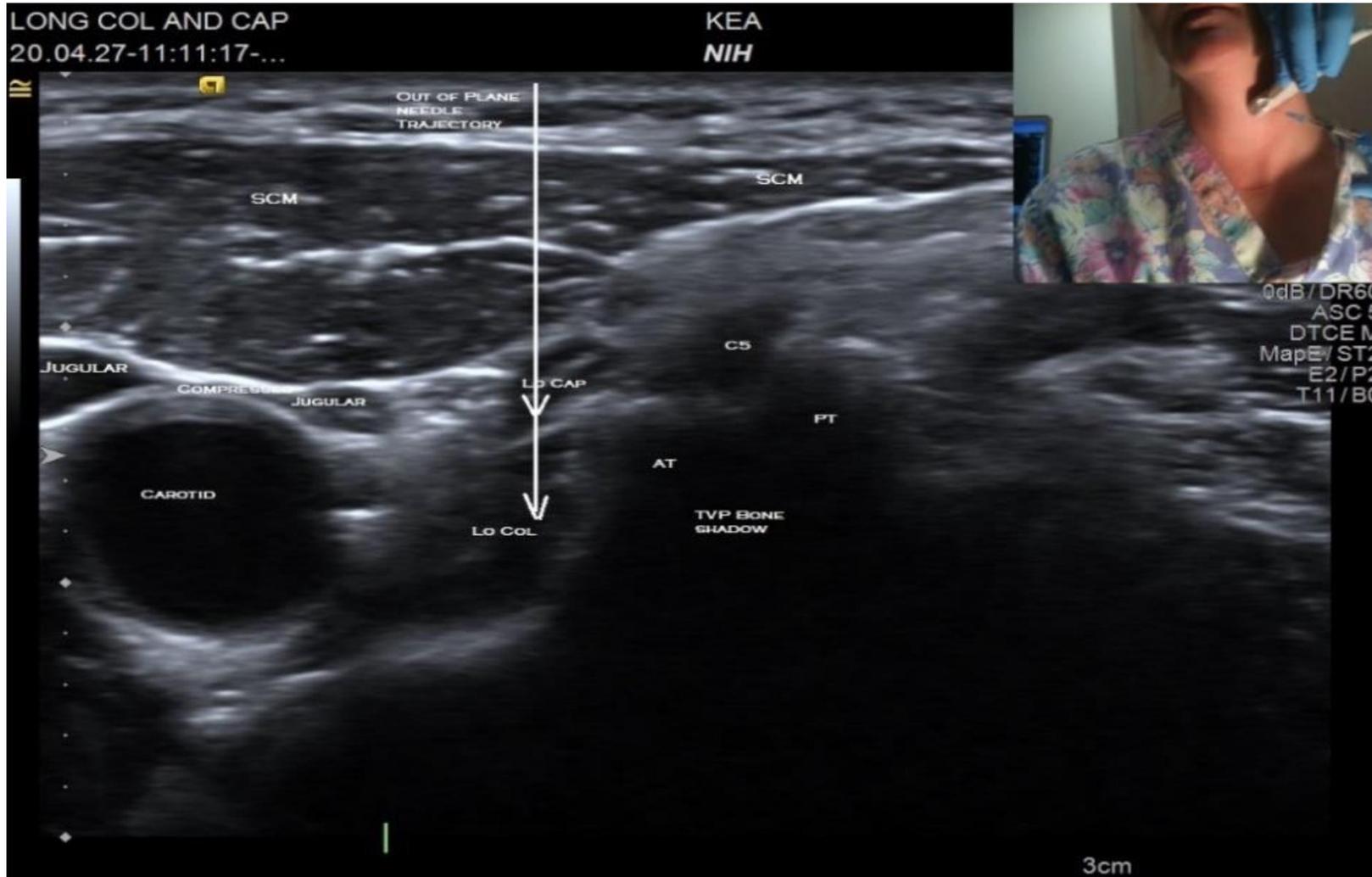
(A)



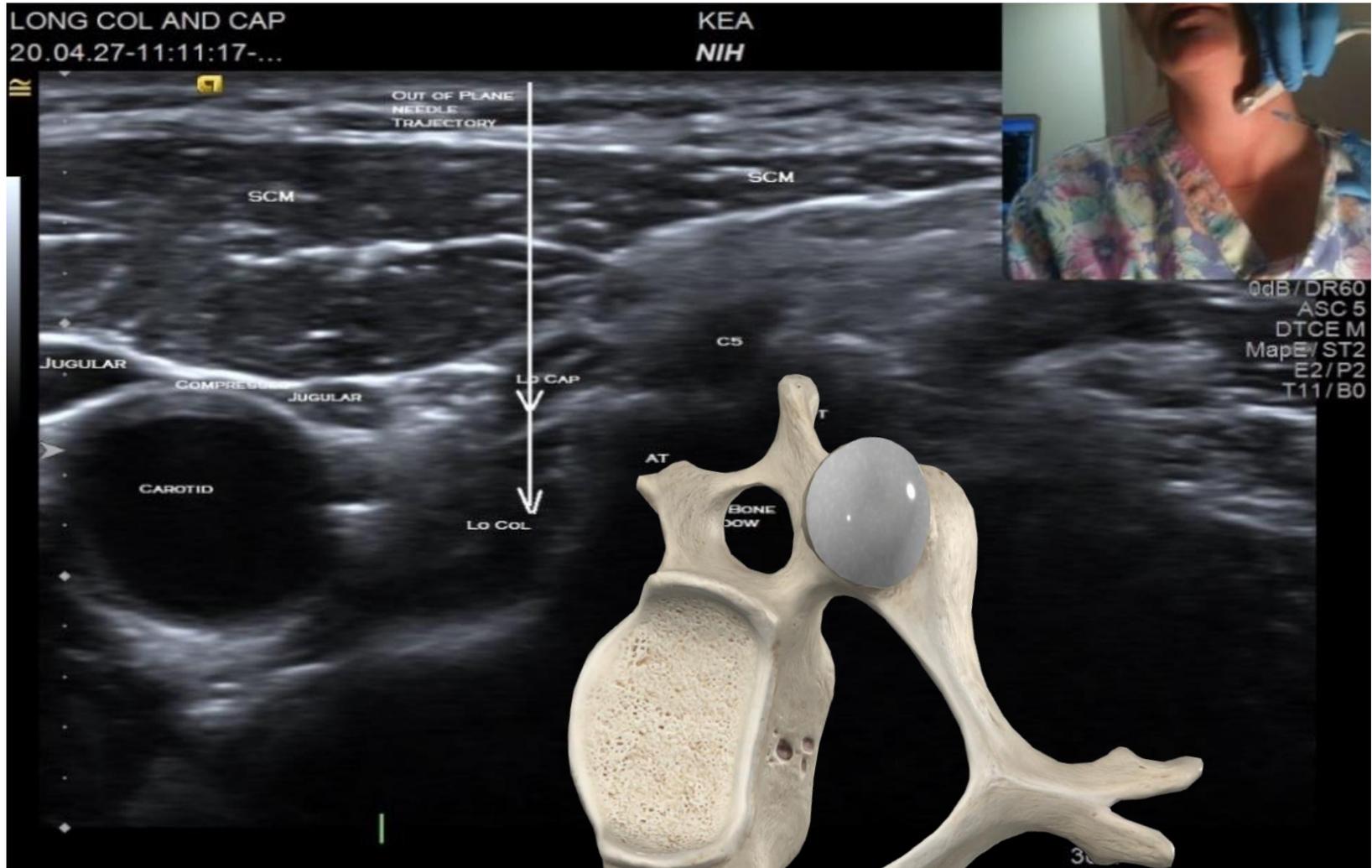
(B)

Anatomy

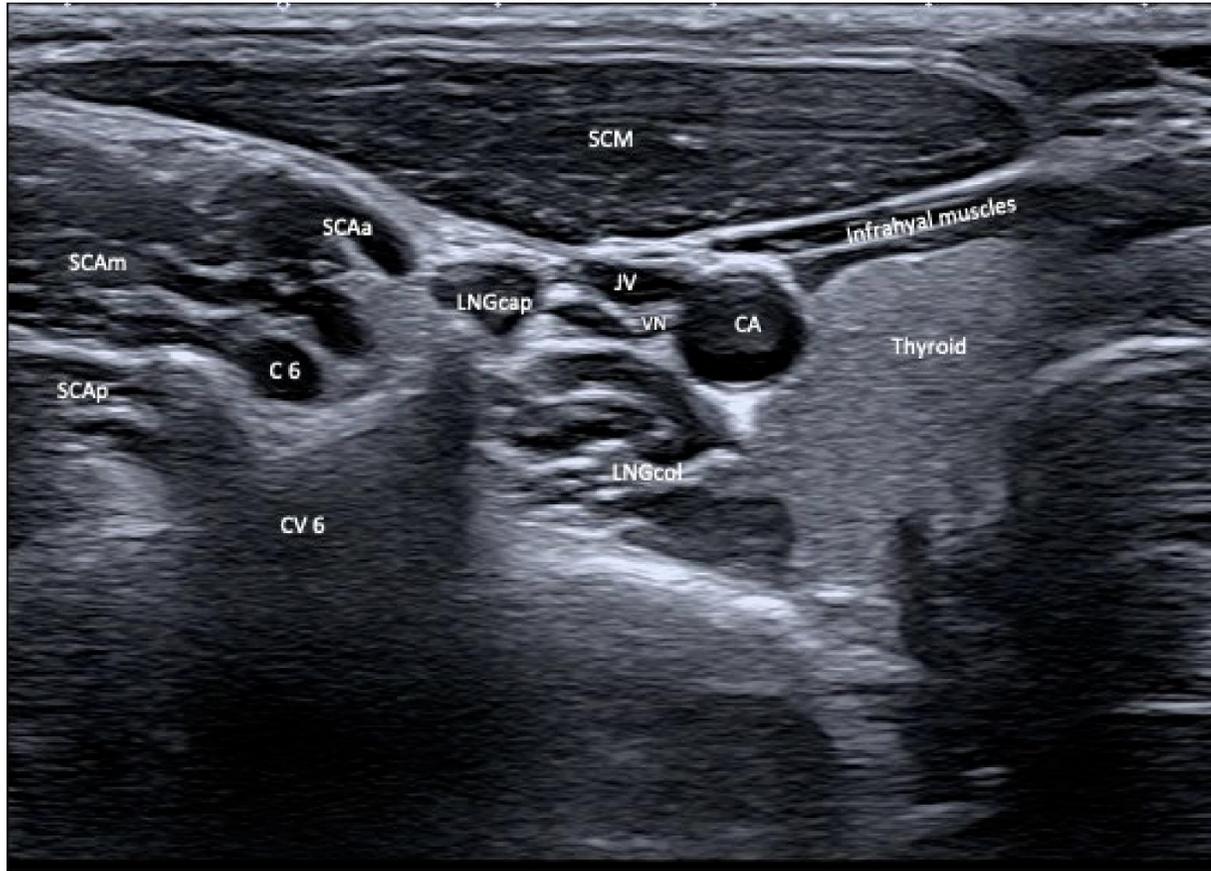




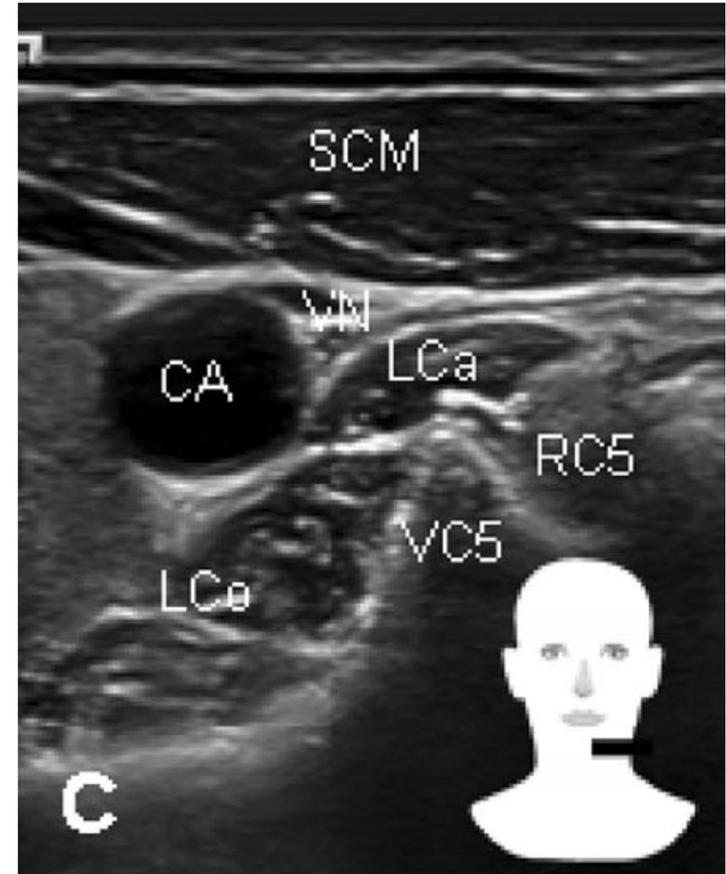
Farrell M, Karp BI, Kassavetis P, Berrigan W, Yonter S, Ehrlich D, Alter KE. Management of Anterocapitis and Anterocollis: A Novel Ultrasound Guided Approach Combined with Electromyography for Botulinum Toxin Injection of Longus Colli and Longus Capitis. *Toxins (Basel)*. 2020 Sep 30;12(10):626. PMID: 33008043;



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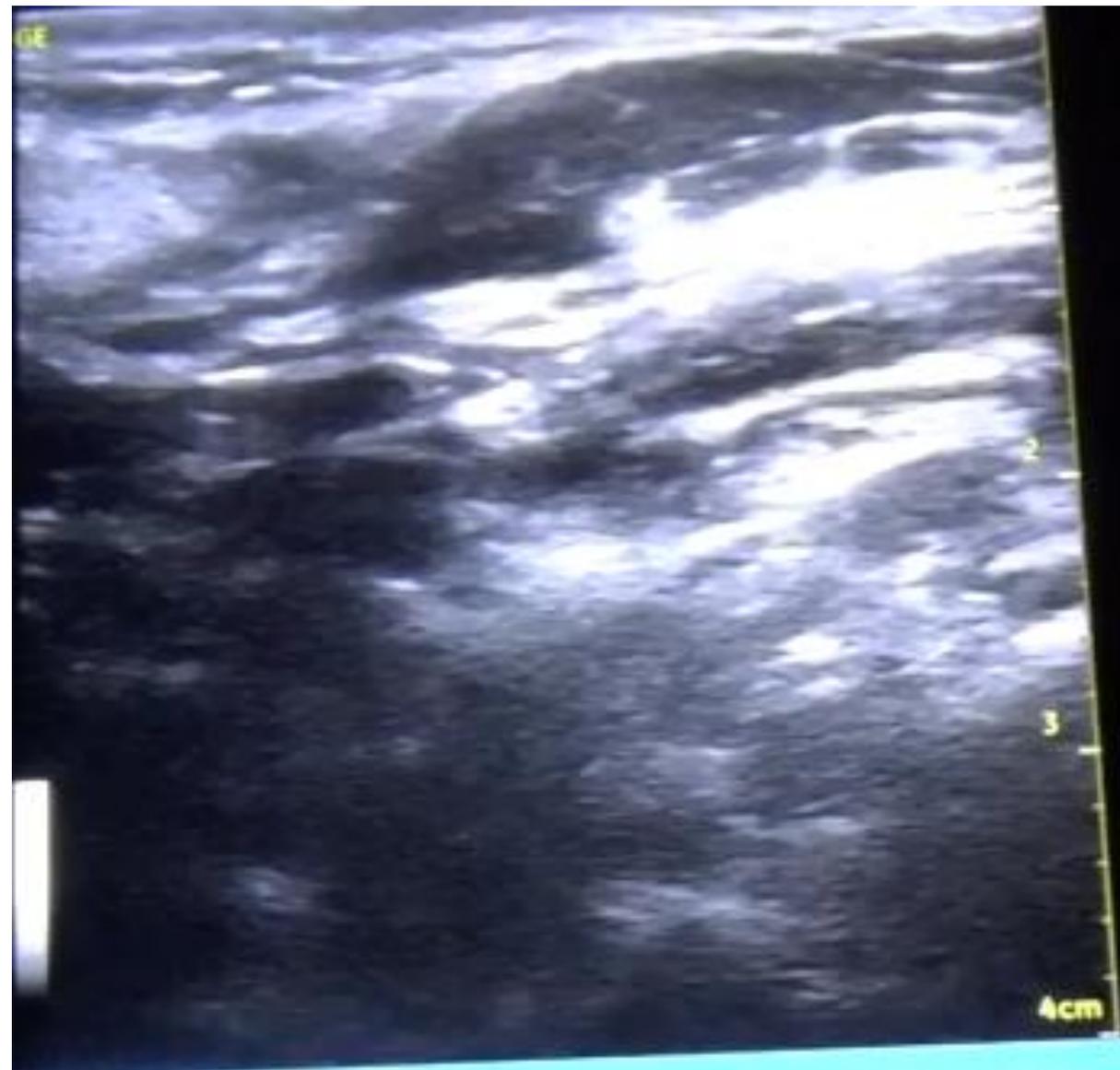
Fietzek et al. 2021



Schramm et al. 2015



Farrell M, Karp BI, Kassavetis P, Berrigan W, Yonter S, Ehrlich D, Alter KE. Management of Anterocapitis and Anterocollis: A Novel Ultrasound Guided Approach Combined with Electromyography for Botulinum Toxin Injection of Longus Colli and Longus Capitis. *Toxins (Basel)*. 2020 Sep 30;12(10):626. PMID: 33008043;



Summary

- Structures to identify
 - Carotid sheath
 - Spinal nerve root exiting between anterior and posterior tubercle
 - Anterior scalene
 - Phrenic nerve (anterior to anterior scalene)
- Trajectory in front of the anterior tubercle
- One puncture to target both colli and capitis
- Contralateral rotation

Thank you