Convergence Spasm in Wernicke Encephalopathy

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A 48-year-old man with alcoholism and previous gastric bypass surgery presented with a convulsive episode after heavy alcohol use. He had not adhered to his multivitamins since the procedure, and his caloric source was mainly from alcohol for the preceding few weeks. On examination, he was confused and had convergence spasm (Figure 1) (Online Supplemental Video), which resolved with parenteral doses of thiamine over the course of several days.

Convergence spasm, also known as spasm of the near reflex, features excessive convergence, accommodation, and

miosis frequently associated with psychogenic disorders, although may develop secondary to various organic conditions including Wernicke encephalopathy.^{1,2} Both cortical and subcortical structures have been implicated in its pathophysiology and may explain its presentation in various seemingly disparate disease processes.³ In the case of Wernicke encephalopathy, the aqueductal and pretectal regions may be involved.⁴

Authors' Note

Consent was obtained from the patient for publication.

Declaration of Conflicting Interests

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Supplemental Material

Supplementary material for this article is available online.

Figure 1. A, Convergence spasm of the left eye was elicited by attempted right horizontal gaze. B, Convergence spasm of the right eye was elicited by attempted left horizontal gaze.

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