

DIAGNOSTIC FLOWCHARTS FOR DYSTONIA:

(1) IN ADULTS

(2) IN CHILDREN & ADOLESCENTS

EUROPEAN REFERENCE NETWORKS
FOR RARE, LOW PREVALENCE AND COMPLEX DISEASES

Share. Care. Cure.



Disclaimer:

“The European Commission support for the production of this publication does not constitute endorsement of the contents which reflects the views only of the authors, and the Commission cannot be held responsible for any use which may be made of the information contained therein.”

More information on the European Union is available on the Internet (<http://europa.eu>).

Luxembourg: Publications Office of the European Union, 2019

© European Union, 2019

Reproduction is authorised provided the source is acknowledged.



INTRODUCTION TO THE EUROPEAN REFERENCE NETWORK FOR RARE NEUROLOGICAL DISEASES (ERN-RND)

ERN-RND is a European Reference Network established and approved by the European Union. ERN-RND is a healthcare infrastructure which focuses on rare neurological diseases (RND). The three main pillars of ERN-RND are (i) network of experts and expertise centres, (ii) generation, pooling and dissemination of RND knowledge, and (iii) implementation of e-health to allow the expertise to travel instead of patients and families.

ERN-RND unites 64 of Europe's leading expert centres as well as 4 affiliated partners in 24 member states and includes highly active patient organizations. Centres are located in Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, Poland, Slovenia, Spain and Sweden.

The following disease groups are covered by ERN-RND:

- Ataxias and Hereditary Spastic Paraplegias
- Atypical Parkinsonism and genetic Parkinson's disease
- Dystonia, Paroxysmal Disorders and Neurodegeneration with Brain Iron Accumulation
- Frontotemporal Dementia
- Huntington's Disease and other Chorea
- Leukoencephalopathies

Specific information about the network, the expert centres and the diseases covered can be found on the network website www.ern-rnd.eu.

Recommendation for clinical use:

The European Reference Network for Rare Neurological Diseases developed the Diagnostic Flowcharts for Dystonia to help guide the diagnosis of Dystonia patients. The Reference Network recommends the use of these Diagnostic Flowcharts..

DISCLAIMER

Clinical practice guidelines, practice advisories, systematic reviews and other guidance published, endorsed or affirmed by ERN-RND are assessments of current scientific and clinical information provided as an educational service.

The information (1) should not be considered inclusive of all proper treatments, methods of care, or as a statement of the standard of care; (2) is not continually updated and may not reflect the most recent evidence (new information may emerge between the time information is developed and when it is published or read); (3) addresses only the question(s) specifically identified; (4) does not mandate any particular course of medical care; and (5) is not intended to substitute for the independent professional judgement of the treating provider, as the information does not account for individual variation among patients. In all cases, the selected course of action should be considered by the treating provider in the context of treating the individual patient. Use of the information is voluntary. ERN-RND provided this information on an "as is" basis, and makes no warranty, expressed or implied, regarding the information. ERN-RND specifically disclaims any warranties of merchantability or fitness for a particular use or purpose.

ERN-RND assumes no responsibility for any injury or damage to persons or property arising out of or related to any use of this information or for any errors or omissions.

METHODS

The development of the Diagnostic Flowcharts for Dystonia has been performed by the Disease group for Dystonia, paroxysmal disorders and NBIA of ERN-RND.

Consent on revised document was given by the entire Disease Group on: 27 October 2025

Disease group for Dystonia, paroxysmal disorders and NBIA:

Disease group coordinators:

Javier Perez Sanchez¹⁵; Sylvia Boesch²⁶

Disease group members:

Healthcare professionals:

Mette Møller¹; Erik Johnsen¹; Erik Hvid Danielsen¹; Laura van de Pol²; Anna De Rosa³; Myriam Carecchio⁴; Roberto Ceravolo⁵; Elisa Unti⁵; Giovanni Palermo⁵; Andrea Mignarri⁶; Antonio Federico⁶; Marie Vidailhet⁷; Aurelie Meneret⁷; Marta Blázquez Estrada⁸; Pierre Kolber⁹; Giorgos Pitsas¹⁰; Christos Koros¹¹; Evangelos Anagnostou¹¹; Leonidas Stefanis¹¹; Heli Helander¹³; Jiri Klempir¹⁴; Sára Davisonová¹⁴; Francisco Grandas¹⁵; Dirk Dressler¹⁶; Alejandra Darling¹⁷; Juan Dario Ortigoza Escobar¹⁷; Eugenia Amato¹⁷; Maria Jose Marti¹⁷; Yaroslau Compta¹⁷; Marta Skowronska¹⁸; Michal Sobstyl¹⁸; Antonio Elia¹⁹; Giovanna Zorzi¹⁹; Roberto Cilia¹⁹; Roberto Eleopra¹⁹; Alberto Albanese²⁰; Giulia Giannini²¹; Luca Solina²¹; Duccio Maria Cordelli²¹; Caterina Garone²¹; Veronica Di Pisa²¹; Anna Fetta²¹; Richard Walsh²²; Kathleen Gorman²²; Aoife Mahony²²; Ana Rodríguez²³; Soledad Serrano²³; Franziska Höpfner²⁴; Thomas Klopstock²⁴; Jeroen Vermeulen²⁵; Philipp Mahlknecht²⁶; Daniel Boesch²⁶; Wolfgang Nachbauer²⁶; Krista Ladzovska²⁷; Ramona Valante²⁷; Elina Pucite²⁷; Enrico Bertini²⁸; Francesco Nicita²⁸; Giacomo Garone²⁸; Bart Post²⁹; Michèle Willemsen²⁹; Anke Snijders²⁹; Manuel Dafotakis³⁰; Rocío García-Ramos³¹; Maria Judit Molnar³²; Marek Baláž³³; Martina Bočková³³; Ognyana Burgazlieva³⁴; Andras Salamon³⁵; Aive Liigant³⁶; Paweł Tacik³⁷; Fran Borovecki³⁸; Ivana Jurjević³⁸; Małgorzata Dec-Cwiek³⁹; Katarzyna Sawczynska³⁹; Alexander Münchau⁴⁰; Katja Lohmann⁴⁰; Norbert Brüggemann⁴⁰; Sebastian Löns⁴⁰; Tobias Bäumer⁴⁰; Ebba Lohmann⁴¹; Kathrin Grundmann⁴¹; Thomas Gasser⁴¹; Hendrik Rosewich⁴¹; Bernhard Landwehrmeier⁴²; Thomas Musacchio⁴³; Martin Reich⁴³; Marina de Koning-Tijssen⁴⁴; Tom de Koning⁴⁴; Damjan Osredkar⁴⁵; Maja Kojovic⁴⁵; Kinga Hadzsiev⁴⁶; Norbert Kovacs⁴⁶; Belén Pérez Dueñas⁴⁷; Maria Victoria Gonzalez Martinez⁴⁷; Silvia Jesús Maestre⁴⁸; Astrid Daniela Adarmes⁴⁸; Pablo Mir⁴⁸; Elena Ojeda Lepe⁴⁸; Marta Correa⁴⁸

Patient representatives:

Monika Benson¹²

¹Aarhus University Hospital, Denmark; ²Amsterdam UMC - Amsterdam University Medical Center, Netherlands; ³AOU - Federico II University Hospital, Naples, Italy; ⁴AOU - University Hospital Padua, Italy; ⁵AOU - University Hospital Pisa, Italy; ⁶AOU - University Hospital Siena, Italy; ⁷APHP - Reference Centre for Rare Diseases 'Neurogenetics', Pitié-Salpêtrière Hospital, Paris, France; ⁸Asturias Central University Hospital,



Oviedo, Spain; ⁹CHL - Luxembourg Hospital Center, Luxembourg; ¹⁰Cyprus Institute of Neurology and Genetics, Egkomi, Cyprus; ¹¹Eginitio Hospital, National and Kapodistrian University of Athens, Greece; ¹²ePAG representative; ¹³Finland Consortium: University Hospitals in Oulu, Tampere and Helsinki, Finland; ¹⁴General University Hospital Prague, Czech Republic; ¹⁵Gregorio Marañón General University Hospital, Madrid, Spain; ¹⁶Hannover Medical School, Germany; ¹⁷Hospital Clinic Barcelona and Sant Joan de Déu Hospital, Barcelona, Spain; ¹⁸Institute of Psychiatry and Neurology, Warsaw, Poland; ¹⁹IRCCS - Foundation of the Carlo Besta Neurological Institute, Milan, Italy; ²⁰IRCCS - Humanitas Clinical Institute of Rozzano, Milan, Italy; ²¹IRCCS - Institute of Neurological Sciences of Bologna, Italy; ²²Irish Consortium: Tallaght University Hospital and Children's Health Ireland; ²³La Paz University Hospital, Madrid, Spain; ²⁴Ludwig Maximilian University Hospital, Munich, Germany; ²⁵Maastricht University Medical Center, Netherlands; ²⁶Medical University Innsbruck, Austria; ²⁷Pauls Stradiņš Clinical University Hospital, Riga, Latvia; ²⁸Pediatric Hospital Bambino Gesù, Rome, Italy; ²⁹Radboud University Medical Centre, Nijmegen, Netherlands; ³⁰RWTH - University Hospital Aachen, Germany; ³¹San Carlos Clinical Hospital, Madrid, Spain; ³²Semmelweis University, Budapest, Hungary; ³³St. Anne's University Hospital Brno, Czech Republic; ³⁴St. Naum University Neurological Hospital, Sofia, Bulgaria; ³⁵Szent-Györgyi Albert Medical Center, Szeged, Hungary; ³⁶Tartu University Hospital, Estonia; ³⁷University Hospital Bonn, Germany; ³⁸University Hospital Center Zagreb, Croatia; ³⁹University Hospital in Krakow, Poland; ⁴⁰University Hospital Schleswig-Holstein, Lübeck, Germany; ⁴¹University Hospital Tübingen, Germany; ⁴²University Hospital Ulm, Germany; ⁴³University Hospital Würzburg, Germany; ⁴⁴University Medical Center Groningen, Netherlands; ⁴⁵University Medical Centre Ljubljana, Slovenia; ⁴⁶University of Pécs, Hungary; ⁴⁷Vall d'Hebron University Hospital, Barcelona, Spain; ⁴⁸Virgen del Rocio University Hospital, Sevilla, Spain

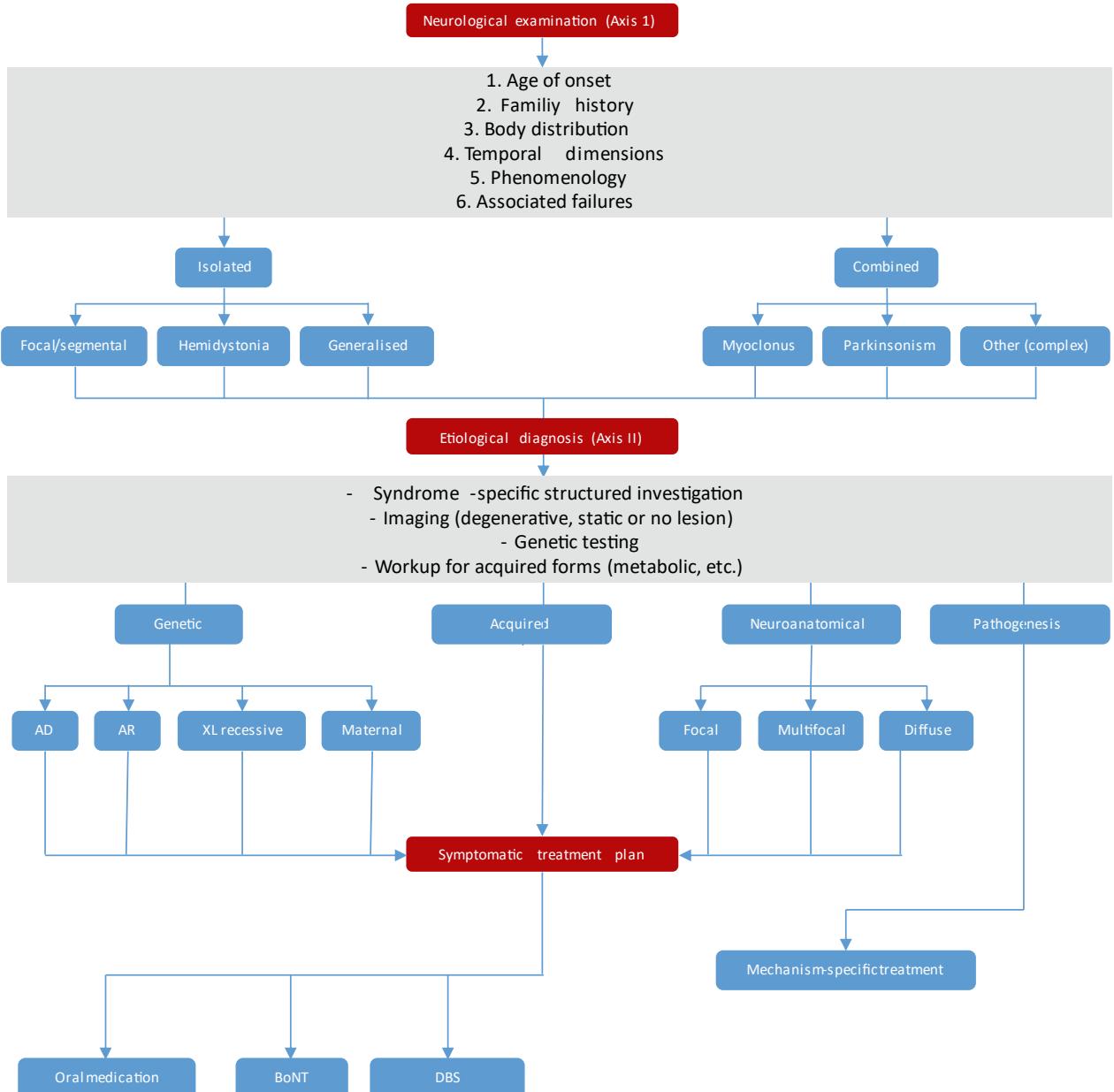
Endorsement process:

- Development of flowcharts – June – November 2017
- Discussion/Revision in ERN-RND disease group – November 2017 – June 2018
- Consent on diagnostic flowcharts during ERN-RND annual meeting 2018 – 08/06/2018
- Consent on document by whole disease group – 26/09/2018
- Revision of Diagnostic Flowchart for Dystonia in adults – October 2024 – October 2025
- Consent on revision by whole disease group – 27/10/2025-

Diagnostic flowchart for Dystonia in adults

Adapted and compiled in accordance to

- Albanese A, Bhatia K, Fung VSC, Hallett M, Jankovic J, Jinnah HA, Klein C, Lang AE, Mink JW, Pandey S, Teller JK, Tijsse MAJ, Vidailhet M, Jinnah HA. Phenomenology and classification of dystonia. *Mov Disord*. 2025 in press. doi: 10.1002/mds.30220. Epub 2025 May 6. PMID: 40326714.
- Albanese, A., Di Giovanni, M. and Lalli, S. (2019), Dystonia: diagnosis and management. *Eur J Neurol*, 26: 5-17. <https://doi.org/10.1111/ene.13762>
- Grütz K, Klein C. Dystonia updates: definition, nomenclature, clinical classification, and etiology. *J Neural Transm (Vienna)*. 2021 Apr;128(4):395-404. doi: 10.1007/s00702-021-02314-2. Epub 2021 Feb 19.
- Stephen CD. The Dystonias. *Continuum (Minneapolis Minn)*. 2022 Oct 1;28(5):1435-1475. doi: 10.1212/CON.0000000000001159. PMID: 36222773; PMCID: PMC10226676.



Abbreviations:

- AD: Autosomal dominant
- AR: Autosomal recessive
- BoNT: Botulinum Neurotoxin Treatment
- DBS: Deep Brain Stimulation
- XL: X-(Chromosome-)linked

Principal Monogenic Dystonia (Axis II)

Gene	Old Name	Transmission	Neurological Examinaiton (Axis I)
DYT-ANO3	DYT-24	AD	Isolated dystonia affecting neck, laryngeal muscles and upper limbs with tremor.
DYT-EIF2AK2 (LEUDEN)		AD	Isolated dystonia with generalised involvement, often accompanied by leukoencephalopathy, developmental delay, and episodic neurologic regression syndrome (LEUDEN).
DYT-GNAL	DYT-25	AD	Isolated dystonia with adult onset of focal dystonia usually involving the neck.
DYT-KMT2B	DYT-28	AD	Isolated dystonia with focal involvement of lower limb and secondary progression. First decade. Occasionally developmental delay.
DYT-THAP1	DYT-6	AD	Isolated dystonia with involvement of craniofacial muscles with secondary diffusion. Adolescent-onset dystonia.
DYT-TOR1A	DYT-1	AD	Isolated dystonia with torsion of the neck, the trunk or limbs. Early-onset (first decade).
DYT-VPS16	DYT-30	AD	Isolated dystonia oromandibular, cervical, bulbar or upper limb dystonia.
DYT-PRKRA	DYT-16	AR	Isolated dystonia early onset dystonia with parkinsonism , with dysphagia and spasmodic dystonia, torticollis and upper limb dystonia.
DYT-DNAJC12		AR	Combined dystonia with hyperphenylalaninemia, developmental delay, parkinsonism levodopa-responsive.
DYT/PARK-TAF1	DYT-3	XL	Combined dystonia – parkinsonism involving the eye blinking, neck, upper or lower limbs.
DYT/PARK-TH		AR	Combined dystonia – parkinsonism with generalised involvement levodopa-responsive. 3 different phenotypes with or without encephalopathy.
DYT/PARK-ATP1A3	DYT-12	AD	Combined dystonia – parkinsonism asymmetric and with rapid onset. Often bulbar dysfunction. Chorea in later life.
MYC/DYT-KCTD17	DYT-26	AD	Combined dystonia – myoclonus with predominant involvement of cranial and laryngeal muscle.
MYC/DYT-SGCE	DYT-11	AD	Combined dystonia – myoclonus with torticollis and writer's cramp with tremor.

MDS Complete List of Monogenic Dystonias

Isolated dystonias

DYT-ANO3
DYT-EIF2AK2
DYT-GNAL
DYT-HPCA
DYT-KMT2B

Combined dystonias

DYT-PRKRA
DYT-THAP1
DYT-TOR1A
DYT-VPS16
DYT-COX20
DYT-DNAJC12
DYT-SLC39A14
DYT/PARK-ATP1A3
DYT/PARK-GCH1
DYT/PARK-TAF1
DYT/PARK-TH
DYT/CHOR-GNAO1
MYC/DYT-KCTD17
MYC/DYT-SGCE

Complex dystonia (where dystonia dominates the clinical picture but this occurs in the context of a complex phenotype including symptoms other than movement disorders)

DYT-ACTB	DYT-SLC19A3	PCCA/PCCB
DYT-ATP7B	DYT-SUCLA2	DYT/PARK-CP-(NBIA)
DYT-BCAB31	DYT-TIMM8A	DYT/PARK-GLB1
DYT-DCAF17-(NBIA)	DYT-TUBB4A	DYT/PARK-PLA2G6-(NBIA)
DYT-DDC	DYT-VAC14	DYT/PARK-PTS
DYT-FITM2	DYT/CHOR-ACAT1	DYT/PARK-QDPR
DYT-IRF2BPL	DYT/CHOR-ADAR1	DYT/PARK-SCL6A3
DYT-MECR	DYT/CHOR-FOXG1	DYT/PARK-SCL30A10
DYT-mt-ND6	DYT/CHOR-GCDH	DYT/PARK-SPR
DYT-OPA1	DYT/CHOR-HPRTDYT/CHOR-	ATX/DYT-SQSTM1
DYT-PANK2 -(NBIA)	MUT	
DYT-SERAC1	DYT/CHOR	

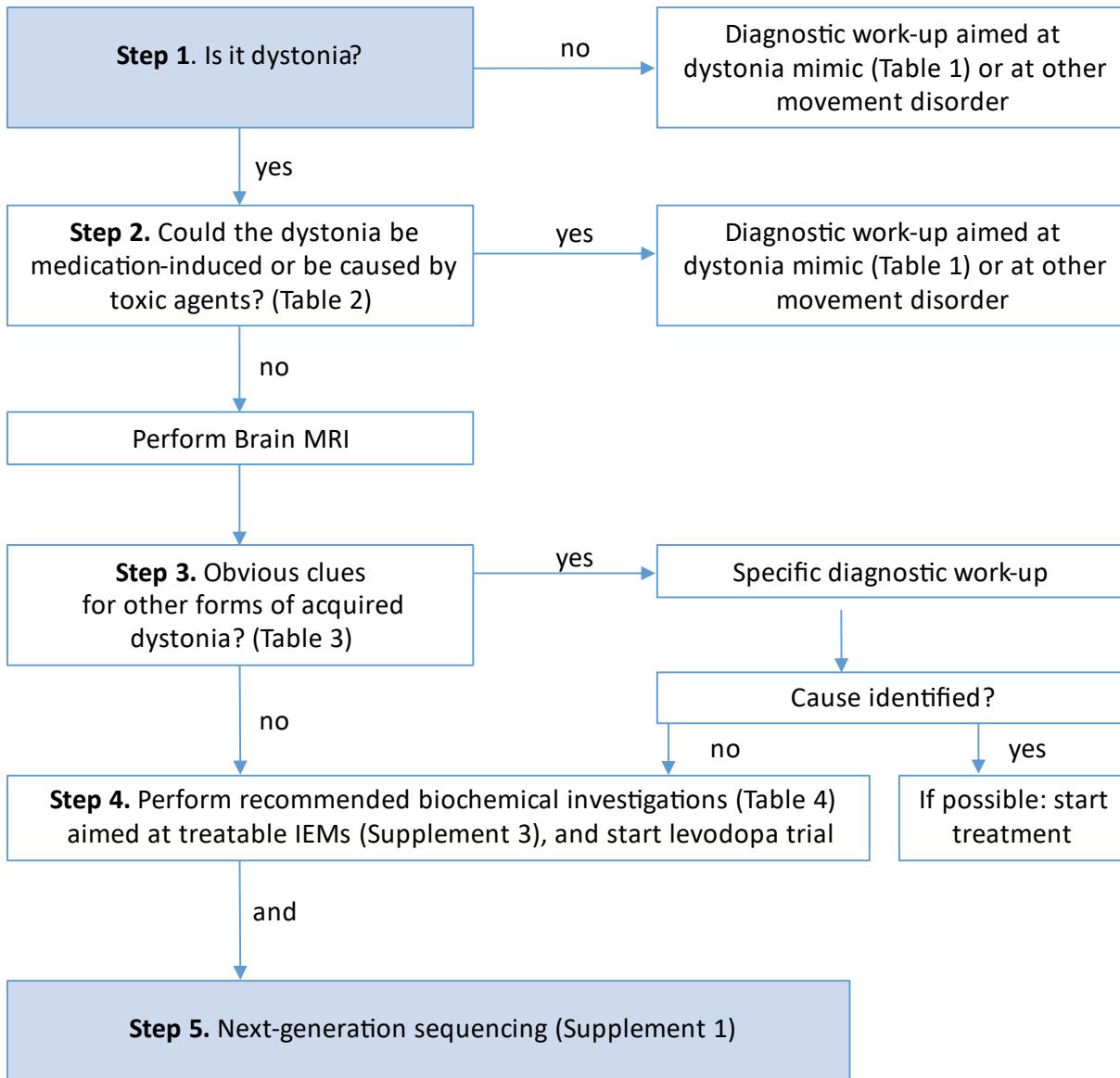
Disorders that usually present with other phenotypes but can have predominant dystonia

ATX-ATXN3
HSP-C19orf12-(NBIA)
HSP/ATX-FA2H-(NBIA)

HSP/ATX-KIF1C
CHOR-FTL-(NBIA)

Diagnostic flowchart for Dystonia in children and adolescents

According to van Egmond ME, Kuiper A, Eggink H, et al. J Neurol Dystonia in children and adolescents: a systematic review and a new diagnostic algorithm Neurosurg Psychiatry 2015;86:774-781.
Full article can be found here: <http://dx.doi.org/10.1136/jnnp-2014-309106>





<https://ec.europa.eu/health/ern>



**European
Reference
Network**
for rare or low prevalence
complex diseases

❖ **Network**
Neurological Diseases
(ERN-RND)
● **Coordinator**
Universitätsklinikum
Tübingen — Deutschland

www.ern-rnd.eu

Co-funded by the European Union

