Abstract

Bilateral diaphragmatic palsy is a rare and under recognized cause for respiratory failure. Patients can be presented as respiratory distress with evidence of orthopnea. Among several other neurological chronic causes inflammatory demyelinating polyradiculopathy (CIDP) is a well-recognized entity that is diagnosed through nerve conduction studies and treated with immunomodulatory therapy. Here we present a case of 56 year old known diabetic patient who presented with gradual onset shortness of breath with significant orthopnea. He was found to have bilateral diaphragmatic palsy due to chronic inflammatory demyelinating polyradiculopathy, where we treated him with IV immunoglobulin and had a marked response.