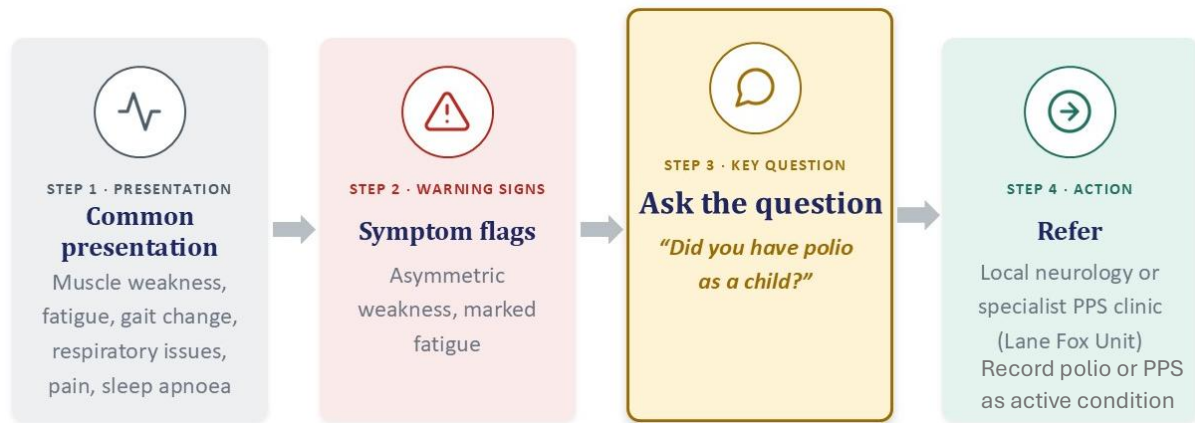




Your steps from presentation to referral

Could your patient have post-polio syndrome?

Ask about previous polio when symptoms fit

Post-polio syndrome (PPS) can develop decades after polio and may be mistaken for ageing, arthritis, fibromyalgia, chronic fatigue, multiple sclerosis or motor neurone disease. Consider it in patients born in the UK or overseas, including those who may not recall a formal diagnosis.

Look for: new or progressive asymmetric muscle weakness; disproportionate fatigue; altered gait; scoliosis, leg-length discrepancy or early osteoarthritis; swallowing, voice or breathing problems; sleep apnoea; and temperature intolerance.

Ask directly: “Did you ever have polio as a child?” Also ask about childhood hospitalisation for a viral illness, unexplained paralysis, use of callipers or braces, or a family memory of “infantile paralysis”.

Act: Record polio/PPS as an *active condition*. PPS is a clinical diagnosis with no single confirmatory test. If the history and symptoms fit, refer to local neurology or rehabilitation medicine services, or a specialist post-polio clinic such as the Lane Fox Unit at St Thomas’ Hospital, London.

Further information

- **British Polio Fellowship:** www.britishpolio.org.uk
- **Optimal clinical pathway:** [guidance for health professionals](#)