A 26-year-old female patient came to physiotherapy OPD with multiple deformities in upper and lower limb. Patient is full term normal delivery, cried after birth weight was 2.5 kg. Patient has history of high-grade fever at the age of 7 to 8 month, after that she was normal. She started walking at the age of one and half year, but parents identify that walking is abnormal. Minimal weakness of upper and lower extremity was there but activities of daily living was normal. At the age of 5 year patient’s parents consulted many doctors but proper diagnosis not done. In present condition patient diagnosed with typhoid before 8 months. After that progressive weakness developed in upper and lower extremity. Now patient is not able to stand and walk on her own. Patient wear caliper for foot drop but enable to stand independently. Patient has both side wrist drops and deformity in proximal interphalangeal joint. Both shoulder and elbow have grade 3 power (active movements possible). Foot drop present in both lower limb. Both knees and hips have grade 3 power (active movements possible). Physiotherapy rehabilitation started for weakness of upper and lower extremities. Deformity correction of both upper extremities with stretching and stimulator applied for calf muscles both side for foot drop. Weight bearing gait training with walker started.

**Clinical image description**

A 26-year-old female patient came to physiotherapy OPD with multiple deformities in upper and lower limb. Patient is full term normal delivery, cried after birth weight was 2.5 kg. Patient has history of high-grade fever at the age of 7 to 8 month, after that she was normal. She started walking at the age of one and half year, but parents identify that walking is abnormal. Minimal weakness of upper and lower extremity was there but activities of daily living was normal. At the age of 5 year patient’s parents consulted many doctors but proper diagnosis not done. In present condition patient diagnosed with typhoid before 8 months. After that progressive weakness developed in upper and lower extremity. Now patient is not able to stand and walk on her own. Patient wear caliper for foot drop but enable to stand independently. Patient has both side wrist drops and deformity in proximal interphalangeal joint. Both shoulder and elbow have grade 3 power (active movements possible). Foot drop present in both lower limb. Both knees and hips have grade 3 power (active movements possible). Physiotherapy rehabilitation started for weakness of upper and lower extremities. Deformity correction of both upper extremities with stretching and stimulator applied for calf muscles both side for foot drop. Weight bearing gait training with walker started.

**Figure 1:** (a) Flexion deformity in proximal interphalangeal joints of both upper extremities. (b) Foot drop on both lower extremities. (c) Passive insufficiency developed due to deformity. (d) Patient standing with calliper with support.