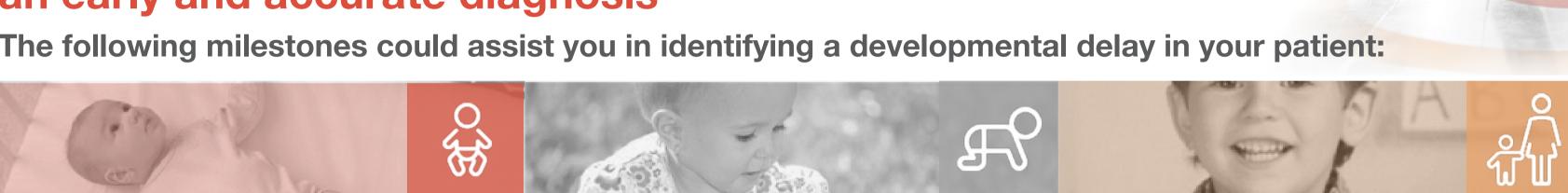


DMD is a progressive disease presenting early in childhood that needs an early and accurate diagnosis 1,5,6



0-6 months

- No head control at 2 months^{1,2}
- Not making sounds at
- 4 months² Not reaching or grasping by 6 months^{1,2}
- Not rolling over by 6 months^{1,2}

6-18 months

- Not sitting independently at 9 months^{2,3}
- Not crawling by 9–15 months^{1,4}
- Not speaking first words by 12 months²
- Difficulty rising to stand by 18 months^{1,2}
- Not walking well by 16-18 months^{2,3,7}

2-3 years

- Gowers' sign from
- 2 years old⁸ Not walking smoothly at 2 years old (tip-toe
- walking)8 Not jumping at 2 years old¹
- Difficulty runningor climbing at 3 years old^{1,2}
- Not speaking in sentences at 3 years old²

Other signs and symptoms

Elevated serum CK or transaminases^{9,10}, cognitive delay⁷, calf hypertrophy^{7,11}, abnormal gait⁷, frequent falls^{7,11}

CK, creatinine kinase; DMD, Duchenne muscular dystrophy.



in patients with developmental delay^{12,13}

Achieving a timely and accurate diagnosis of DMD is a crucial aspect of care¹²

Positive family history with suspicion of abnormal muscle function¹²

Developmental delay, such as difficulty rising to stand, or not walking well by 18 months^{12,14–16}

Unexplained increases in transaminases¹²

PERFORM A CK TEST

Elevated CK* (>250 U/L)

Normal CK*

Promptly refer to a neuromuscular specialist or geneticist^{12,15,17}

Normal or mildly elevated CK levels do not rule out neuromuscular disease

CK, creatine kinase; DMD, Duchenne muscular dystrophy; L, litre; U, unit. *The normal CK range is generally up to 250 U/L. Absolute values may differ between laboratories.4

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for full information please refer to the Israeli PI as approved by MOH





