

Huntington Disease: Insights into a Complex Neurodegenerative Disorder

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Introduction

Huntington Disease (HD) is a progressive neurodegenerative disorder characterized by the gradual deterioration of cognitive, motor, and psychiatric functions. Affecting approximately 1 in 10,000 people globally, HD is known for its distinct symptoms and genetic origins. Understanding Huntington disease involves exploring its causes, symptoms, diagnosis, and treatment options. Huntington disease is caused by a genetic mutation in the HTT gene, which encodes the protein huntingtin. This mutation involves an abnormal expansion of CAG repeats within the gene, leading to the production of a toxic form of huntingtin protein. This abnormal protein accumulates in brain cells, particularly in regions responsible for movement and cognition, leading to cell death and the progressive symptoms of the disease. The inheritance pattern of Huntington disease is autosomal dominant, meaning that a person only needs one copy of the mutated gene to develop the disorder. If a parent carries the mutated gene, each child has a 50% chance of inheriting it. Symptoms of HD typically begin in mid-adulthood, though juvenile forms of the disease can also occur.

Description

Huntington disease is characterized by a triad of symptoms: motor dysfunction, cognitive decline, and psychiatric disturbances. These symptoms progressively worsen over time, leading to significant impairment and disability. Involuntary, irregular movements of the limbs, face, and trunk are characteristic of HD. These movements can be jerky and uncontrollable, affecting daily activities. Muscle contractions causing abnormal postures or movements may also occur. Difficulty with coordination and balance can lead to problems with walking and fine motor skills. Individuals may experience difficulties with memory, concentration, and executive function, affecting their ability to plan, organize, and execute tasks. As the disease

advances, cognitive decline can lead to significant impairments in reasoning and problem-solving. Mood disturbances are common, including feelings of depression, irritability, and anxiety. Personality changes, impulsivity, and aggression may also be observed. Diagnosing Huntington disease involves a combination of clinical evaluation and genetic testing. A detailed medical history and neurological examination help identify characteristic symptoms and assess their progression. Confirmatory genetic testing for the HTT gene mutation is used to diagnose HD, particularly in individuals with a family history of the disease or those presenting with typical symptoms. Brain imaging techniques, such as MRI or CT scans, can reveal atrophy in specific brain regions associated with HD, aiding in diagnosis and monitoring disease progression. Currently, there is no cure for Huntington disease, but treatments focus on managing symptoms and improving quality of life. Medications such as haloperidol or olanzapine can help manage chorea and psychiatric symptoms. These may be prescribed to address mood disorders and anxiety. Specifically used to reduce chorea symptoms. Aims to improve motor function, balance, and coordination, and help manage physical symptoms. Assists with daily activities and adaptations to maintain independence. Helps manage difficulties with speech and swallowing. Counseling and support for mood disorders and behavioral issues.

Conclusion

In conclusion, Huntington disease is a complex neurodegenerative disorder with profound effects on motor, cognitive, and psychiatric functions. While current treatments manage symptoms and improve quality of life, ongoing research and innovation are essential for advancing our understanding and finding effective treatments. Through continued scientific efforts and supportive care, there is hope for better management and a brighter future for individuals affected by Huntington disease.

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