Varicella-zoster virus meningo-rhombencephalitis presenting as Ramsey Hunt

A 45-year-old woman on etanercept for rheumatoid arthritis presented with an acute right Bell palsy and auricular herpetic rash (Ramsey Hunt syndrome). Despite IV acyclovir, she developed headache, vertigo, severe vomiting, and evidence of a right peripheral audiovestibular loss (figure 1, A and B, video 1 on the Neurology® Web site at www.neurology.org). Ongoing symptoms indicated CSF examination, which showed a pleocytosis and positive varicella-zoster PCR, and an MRI that displayed abnormal brainstem signal (figure 2, A and B). Although there was unequivocal peripheral audiovestibular loss, the persistence of vertigo beyond 3 days is a red flag suggesting central involvement, here presumably resulting from the known effect of etanercept on impairing leukocyte migration into the brain.
Diego Kaski, MBBS, MRCP, Nicholas Davies, MBBS, MRCP, PhD, Barry M. Seemungal, MBBS, MRCP, PhD, London, UK

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Correspondence & reprint requests to Dr. Seemungal: b.seemungal@imperial.ac.uk


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