Eighth nerve herpetic neuritis and contralateral rhombencephalitis and mesencephalitis on contrast-enhanced MR imaging.

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Eighth Nerve Herpetic Neuritis and Contralateral Rhombencephalitis and Mesencephalitis on Contrast-Enhanced MR Imaging

Tien et al. [1] recently reported on the MR findings in herpes trigeminal neuritis and rhombencephalitis. We report a similar case of herpetic auditory neuritis, rhombencephalitis, and mesencephalitis following the auditory tract.

The patient was a 46-year-old man who had had a liver transplant 2 years earlier. A vesicular cephalic rash and right-sided otalgia developed over 2 weeks. Approximately 7 days later, a progressive right-sided hearing loss began, and the otalgia and tinnitus subsided. The patient became deaf on the right side after 1 week. No other neurologic symptoms or signs were present. Herpes viral titers were elevated at the time of physical examination.

Subsequent MR showed contrast enhancement within the right internal auditory canal on T1-weighted images (Fig. 1A). T2-weighted images showed increased signal intensity in the vicinity of the contralateral inferior colliculus and the contralateral midmesencephalon (Fig. 1B). Our findings are similar to those described by Tien et al. In both cases, the paraaxial portions of the nerve appeared to enhance, whereas the central involvement was shown on the T2-weighted images only.

REFERENCE

1. Tien RD, Dillon WP. Herpes trigeminal neuritis and rhombencephalitis on Gd-DTPA-enhanced MR imaging. AJNR 1990;11:413-414

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