

A Rare Case of Atypical Guillian-Barre Syndrome Following Antecedent Dengue Infection

Authors : Amlan Datta

Abstract : Dengue is an arboviral, vector borne infection, quite prevalent in tropical countries such as India. Approximately, 1 to 25% of cases may give rise to neurological complication, such as, seizure, delirium, Guillian-Barre syndrome (GBS), multiple cranial nerve palsies, intracranial thrombosis, stroke-like presentations, to name a few. Dengue fever, as an antecedent to GBS is uncommon, especially in adults. Here, we report a case about a middle aged lady who presented with an acute onset areflexic ascending type of polyradiculoneuropathy along with bilateral lower motor neuron type of facial nerve palsy, as well as abducens and motor component of trigeminal (V3) weakness. Her respiratory and neck muscles were spared. She had an established episode of dengue fever (NS1 and dengue IgM positive) 7 days prior to the weakness. Nerve conduction study revealed a demyelinating polyradiculopathy of both lower limbs and cerebrospinal fluid examination showed albuminocytological dissociation. She was treated with 5 days of intravenous immunoglobulin (IVIg), following which her limb weakness improved considerably. This case highlights GBS as a potential complication following dengue fever.

Keywords : areflexic, demyelinating, dengue, polyradiculoneuropathy

Conference Title : ICVID 2017 : International Conference on Virology and Infectious Diseases

Conference Location : London, United Kingdom

Conference Dates : February 16-17, 2017