Vertigo with an isolated lesion in brainstem vestibular nucleus and nerve

Figure MRI of brainstem

(A) T2-weighted MRI revealed high signal intensity over right vestibular nuclei and vestibular nerve (arrow). (B) T1-weighted MRI with contrast revealed no enhancement in corresponding area.

A 31-year-old woman had acute-onset right facial numbness 7 days before admission. Vertigo, unsteady gait, and right hearing impairment were apparent 2 days later; the MRI was normal. Symptoms persisted and CSF was normal. A second MRI revealed high T2 signal intensity over the right vestibular nucleus and nerve without enhancement (figure). Herpes simplex virus had been detected in brainstem vestibular nucleus,¹ but this finding, of an isolated lesion in brainstem vestibular nucleus and nerve, is unusual. Other infections or inflammatory processes should be considered in the differential diagnosis.

Chien-Tai Hong, MD, Yen-Jun Lai, MD, Justin lung Chan, MD, MSc, Taipei, Taiwan

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Address correspondence and reprint requests to Dr. Chien-Tai Hong, Far Eastern Memorial Hospital, Nan-Ya S. Road, Sec.2 PanChiao, Taipei, Taiwan; my88606@mail.femh.org.tw

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