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, 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.

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