A 21-year-old woman was irradiated after resection of a pituitary adenoma. A few weeks later, she developed right ophthalmic-distribution zoster and right abducens palsy. Zoster rash resolved, but persistent dysesthesias led to constant rubbing and scratching, ultimately leading to ulceration. Skin biopsy was negative for malignancy and chronic infection. Despite antibiotic, antiviral, triamcinolone, and hyperbaric oxygen treatment, the ulceration expanded (figure). The lesion is zoster-associated trigeminal trophic syndrome (TTS). TTS also occurs after trigeminal rhizotomy, alcohol injection, resection of acoustic neuroma, and pontine infarction.\(^1\) Because persistent radicular pain occurs without zoster,\(^2\) some cases of TTS may reflect zoster sine herpete.

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**Author contributions:** Dr. Nagel: drafted the manuscript for content, analyzed and interpreted the data. Dr. Gilden: drafted the manuscript for content, analyzed and interpreted the data.

**Disclosure:** Dr. Nagel receives research support from the NIH. Dr. Gilden has received a speaker honorarium from Merck Serono; serves as Senior Associate Editor for the *Journal of Neurovirology* and on the editorial boards of *In Vivo*, *Journal of Virology*, *Scientific American Medicine*, *Virus Genes*, and *Neurology*;\(^6\) and receives research support from the NIH.

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Neurology 2011;77:1499
DOI 10.1212/WNL.0b013e318232ac46

This information is current as of October 10, 2011