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Guillain-Barré Syndrome Following a Malignant Varicella in Immunocompetent Adult

Case Report

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Abstract

Varicella zoster virus (VZV) infection may trigger Guillain-Barre syndrome (GBS), but this is rare and almost always in the context of reactivation disease from latent VZV, 'shingles'. We report here a case of severe GBS following primary VZV infection in an immunocompetent adult.

Keywords: Guillain-Barré syndrome; VZV; Chickenpox; Immunocompétent Adult.

Introduction

Guillain-Barré syndrome (GBS) is an acute, immune-mediated polyradiculoneuropathy, usually triggered by an infectious episode, mostly of viral origin [1]. Varicella zoster virus (VZV) is a rare cause of GBS, mainly in the case of latent infection reactivation [1, 2]; we report here a case of severe GBS following primary VZV infection in an immunocompetent adult.

Case Report

A 62-year-old man of Moroccan origin, without pathological history, was hospitalized at the Intensive Care Unit for a GBS With respiratory distress, appeared 7 days after the onset of a generalized erythematous-vesicular eruption, pruriginous evolving in a febril context. The dermatological examination found multiple erosions covered with haemorrhagic crises, diffuse on the body (Figures 1 and 2). Clinically evoking the diagnosis of chickenpox as the history revealed that his wife had a varicella confirmed by a dermatologist two weeks before his symptomatology. A study of nerve conduction had confirmed polyneuropathic inflammatory demyelinator Acute. A biological and radiological evaluation (thoracic, brain scan) were without abnormality.

Diagnosis of malignant varicella with deficiency Neurological disease was retained. Aciclovir 10 mg/kg/8 hours was administered with immunoglobulins and symptomatic treatment based on an emollient cream.

Four days after, the patient lost consciousness after ischemia of the brainstem confirmed radiologically and then died.

Discussion

Chickenpox may cause neurological complications such as meningitis, meningoencephalitis and cerebellitis. Guillain-Barre syndrome (GBS) is a rare but severe neurological complication of chickenpox that can cause sequela [3]. The mechanism of Schwann cellular attack after VZV infection is poor but this case suggests that primary VZV infection may Stimulus sufficient to drive antibody generation and precipitate severe clinical symptomatology [4, 5]. Malignant varicella in adults Immunocompetent is an emergency involving the functional prognosis and vital with a risk of mortality, mainly related to pneumonia Varicella in 30%, greater after 50 years and complications Neurological disorders [4]. The treatment is based, in addition to the measures of resuscitation and local care on Aciclovir at 10 mg/kg/ 08h for one Minimum of seven days [1, 2, 4]. The delay in management anticipates mortality and functional sequelae [3]. What was the case with this patient Consulted belatedly. The varicella vaccine (Varivax/Varilix®), allowing to prevent serious cases, should be advocated in the case of adults Immunocompetents that were never previously achieved, early in the first three days after varicose contact.

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Figure 1 and 2. Lesions of Chickenpox: Multiple Erosions Covered with Crusts.



Conclusion

The clinic always remains sovereign by an anamnesis and a dermatological examination in the diagnosis of malignant varicella. The early introduction of antiviral therapy with Aciclovir in Intravenous appears to be an important prognostic factor.

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