Commentary

In this issue of the Journal of Neuroscience in Rural Practice, Chaker et al. describe the case of an elderly patient presenting with diplopia, resulting from sixth nerve palsy, following acute infection of herpes zoster ophthalmicus (HZO). The authors describe the transient, self-limiting nature of cranial nerve (CN) VI palsy with favorable prognosis.

HZO occurs more commonly in patients over 50 years of age due to age-related decline in immunity. Cranial nerve palsy following HZO has been reported with ocular-motor (cranial nerve (CN III), trochlear (CN IV) and abducens (CN VI) nerves most commonly affected. Other causes of CN palsies include intracranial space-occupying lesions, micro-vascular infarctions, trauma or inflammation. The most common cause of CN VI palsy in the elderly is micro-vascular ischemia associated with diseases such as diabetes mellitus and hypertension. Due to diverse causality, a comprehensive history should be obtained and a thorough ocular and cranial nerve
Chaker, et al.: Herpes zoster ophthalmicus

although researchers are...

vaccine has been noted to be not as effective in patients...

a child following vaccination against varicella, measles,...

Increased risk of Bell’s palsy or Ramsey-Hunt syndrome...

Of note, CN palsies in HZO can sometimes present...

Oral valacyclovir (1000 mg) or famciclovir (500 mg)...

References


