

[ PICTURES IN CLINICAL MEDICINE ]

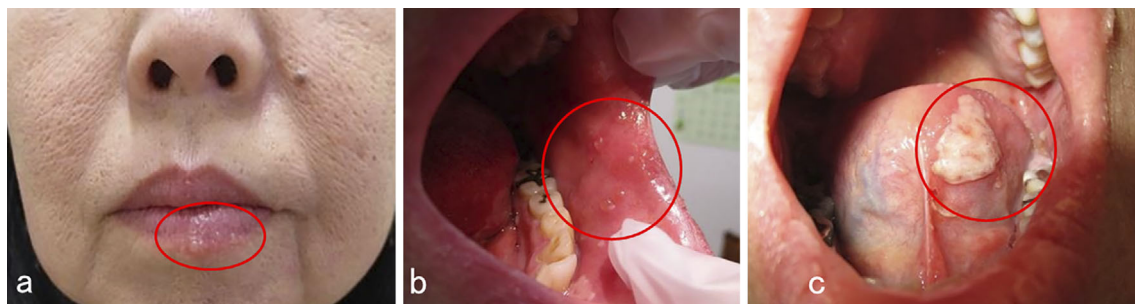
## Mandibular Herpes Zoster

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**Key words:** herpes zoster, mandibular nerve

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**Picture 1.**



**Picture 2.**

A 65-year-old Japanese woman with no history of immunosuppressive disease presented at our hospital with tongue and lip pain that had persisted for three days. Vesicles on the lower left lip (Picture 1a) and left buccal mucosa (Picture 1b), and a white plaque on the left side of the ventral tongue (Picture 1c) were found, all of which were reported to be painful. We suspected herpes zoster based on the characteristic distribution of the vesicles and white plaque, which were on the area of the mandibular nerve (third branch of the trigeminal nerve). Trigeminal herpes zoster accounts for 18.5% to 22.0% of all herpes zoster cases (1). Mandibular herpes zoster is, however, very rare. We prescribed famciclovir, acetaminophen and pregabalin.

The vesicles and protruding tongue lesion completely disappeared after one week (Picture 2). After one month's remission, the postherpetic neuralgia continued, and acetaminophen and pregabalin were discontinued. At first, the patient's anti-Varicella zoster virus immunoglobulin M, and -G levels were 3.54 and 124, respectively. After three weeks, her anti-Varicella zoster virus immunoglobulin M, and -G levels were 1.85 and >128, respectively. We therefore diagnosed mandibular herpes zoster.

**The authors state that they have no Conflict of Interest (COI).**

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**Reference**

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