

[PICTURES IN CLINICAL MEDICINE]

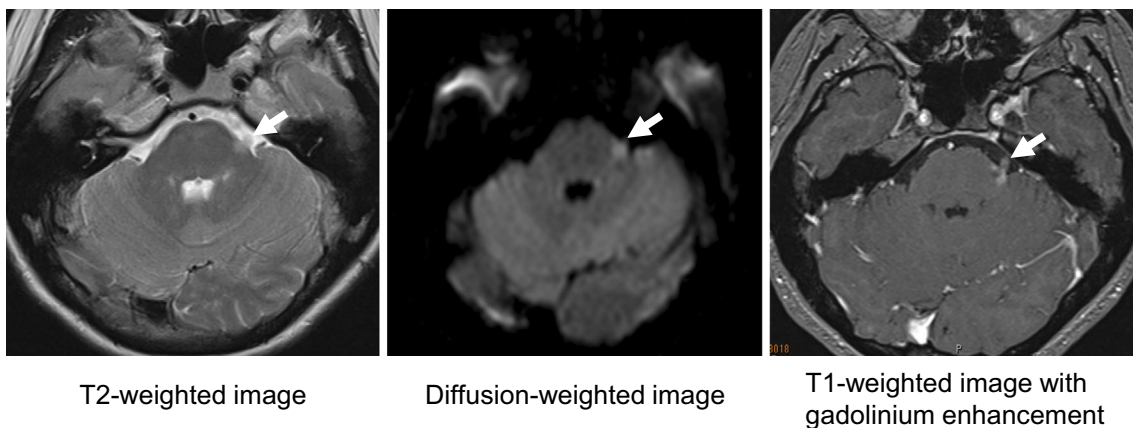
Trigeminal Root Entry Zone Lesions in Non-multiple Sclerosis

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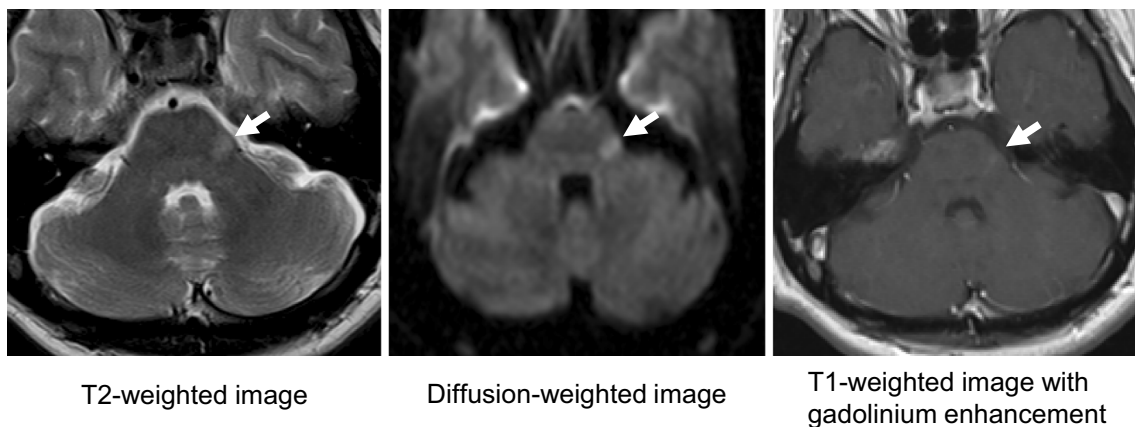
Key words: trigeminal root entry zone lesion, trigeminal neuralgia, trigeminal sensory neuropathy, multiple sclerosis

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Picture 1.



Picture 2.

An 18-year-old woman and a 31-year-old woman without any remarkable clinical histories developed sensory disturbances on the left half of the face. Magnetic resonance imaging revealed trigeminal root entry zone (TREZ) lesions with gadolinium enhancement (Picture 1, 2). There were no other brain or spinal cord lesions. Serum autoantibodies, in-

cluding anti-SS-A, anti-SS-B, and anti-aquaporin 4, were negative. A cerebrospinal fluid (CSF) study revealed no abnormalities except for elevated myelin basic protein levels. Oligoclonal IgG bands were negative. The patients did not meet the international diagnostic criteria for multiple sclerosis (MS) (1). Trigeminal sensory neuropathy and trigeminal neuralgia due to TREZ lesions have only been occasionally reported in patients with pontine infarction, MS, or neuro-myelitis optica. Although no marked changes in the serum or CSF antibodies against herpes simplex virus (HSV) were detected, the gadolinium enhancement of the trigeminal nerve (Picture 1) suggests the transaxonal centripetal spread (2) of latent HSV from the trigeminal ganglion.

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

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References

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