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## An infant with a unilateral facial paralysis caused by infectious mononucleosis - Lama Alghuneim - Ministry of National Guard Health Affairs

## Lama Alghuneim

Ministry of National Guard Health Affairs, Saudi Arabia

**Introduction**: Infectious mononucleosis (IMN) is a disease caused by a viral infection of Epstein-Barr virus (EBV). The disease is known to have various neurological complications such as; seizures, meningoencephalitis, Gulian Barre syndrome and transverse myelitis. One of the rare reported complications is Facial nerve paralysis.

Methods: We report a case of 28 months old boy who presented with high-grade fever, bilateral asymmetrical neck swelling more on the right side, tonsillar enlargement with exudation and splenomegaly. There were laboratory findings that suggested IMN: leucocytosis (20.76x10^9/L), atypical lymphocytes (2.70x10^9/L), high AST (184 U/L) and ALT (144 U/L). He was treated supportively pending the results. On Day 3 of his hospital course, the patient developed right facial asymmetry manifested as droopiness of the right side of his mouth and inability to close his right eye. A temporal bone CT revealed the presence of complete fluid opacification of the mastoid air cells and middle ear cavities bilaterally, most likely suggesting acute otitis media.

Results: The lab results showed evidence of Infectious mononucleosis in the form of the following: Epstein-Barr virus (EBV) PCR was positive and the EBV IgM was suggestive of an acute infection (>16). There was also, a House Brackmann grade 5 facial paralysis. The Facial nerve paralysis symptoms improved after he received a five day course of oral prednisolone (2mg/ kg/day) that was later tapered off over the next 10 days. After a four week follow up, the patient had significant improvement. There was only a minimal residual of his facial droopiness but he almost regained the ability to close his eye. In the literature, facial paralysis related to IMN is quite rare, with only few reported cases.

Therefore, the use of corticosteroids in these cases remains a controversy. However, in our case we found a good outcome after using it. Conclusion: Facial nerve paralysis is a rare complication of EBV infection, which is rarely seen in infancy but tends to resolve spontaneously in 3-6 month.