Transverse myelitis with Brown-Sèquard syndrome after H1N1 immunization

Mielite transversa manifesta por síndrome de Brown-Sèquard após vacinação contra H1N1

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A 52-year-old female had acute urinary hesitancy, constipation, crural spastic asymmetric paraparesis and sensory level at T6 (hypopalesthesia left and thermo-algesic hypoesthesia on the right mainly on sacral dermatomes) one week after H1N1-trivalent immunization.

Magnetic resonance imaging showed thoracic intramedullary lesion (Figure) and absence of brain findings. Cerebrospinal fluid was normal including electrophoresis, viral polymerase chain reactions and cultures. HIV-serology, VDRL, and anti-nuclear antibodies were nonreactive.

Brown-Sèquard syndrome commonly results from traumatic or tumor injury and is rarely found in other etiologies[1,2]. Myelitis constitute possible adverse event temporally related to immunization and his notification contribute to post-marketing studies on the safety of immunobiological extensively used in population[3].

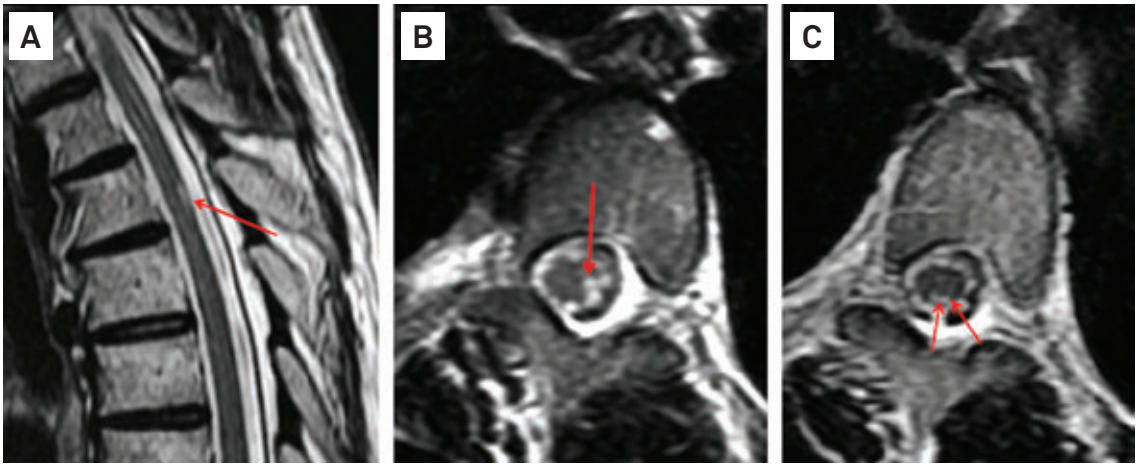

Figure. MRI image sagittal showing T2 hyperintese lesion on the dorsal aspect of the spinal cord at the level of the fourth thoracic vertebra (A); axial MRI showing multiple tiny and T2 hyperintense lesions compromising the left lateral and dorsal aspect of the spinal cord at same level (B and C).

References

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