# Syphilis mimicking trigeminal schwannoma 

Sífilis imitando schwannoma trigeminal

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A 20-year-old woman presented with a two-month history of temporal headache and right trigeminal nerve palsy. An MRI showed enlargement and contrast enhancement of the right trigeminal nerve, suggestive of a schwannoma (Figure A). Cerebrospinal fluid analysis disclosed: 10 cells $/ \mathrm{mm}^{3}$, protein $76 \mathrm{mg} / \mathrm{dl}$, glucose $50 \mathrm{mg} / \mathrm{dl}$ and positive Venereal Disease Research Laboratory test (VDRL).

Serum VDRL was $1 / 256$ and the Treponema pallidum haemagglutination was positive. She was treated with IV crystalline penicillin G 2.400.000 U/day for 14 days with clinical and radiological improvement (Figure B).

Gummatous cranial nerve palsy is rarely reported ${ }^{1,2}$ as the sole manifestation of syphilis, but should be considered in the differential diagnosis of nerve tumors.


Figure. Axial T1-weighted brain MRI showing enlargement and contrast enhancement in the right trigeminal nerve (A) and resolution after treatment with crystalline penicillin $G(B)$.

References

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    Received 12 July 2016; Accepted 13 September 2016.

