

E-Pearl of the Week

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Varicella-zoster virus vasculopathy

The best characterized syndrome of varicella-zoster virus (VZV) vasculopathy is herpes zoster ophthalmicus followed by contralateral hemiparesis that develops weeks to months later. The most sensitive test for making this diagnosis at the time of the delayed vasculopathy is the detection of anti-VZV IgG antibody in the cerebrospinal fluid (CSF). Polymerase chain reaction testing for VZV DNA in the CSF is negative in most cases of VZV vasculopathy.

To learn more about VZV-associated vasculopathy, access an article by M.A. Nagel, et al. entitled “The varicella zoster virus vasculopathies” (*Neurology* 2008;70; 853-860): <http://www.neurology.org/cgi/content/full/70/11/853>

Listen to a podcast on VZV vasculopathy:
http://aan.com/rss/index.cfm/getfile/AAN_27.mp3

For more clinical pearls and other articles of interest to neurology trainees, visit www.neurology.org and click on the link to the Resident and Fellow Page.