ISOLATED UNILATERAL HYPOGLOSSAL NERVE PALSY CAUSED BY AN ATLANTOAXIAL JOINT SYNOVIAL CYST

PARALISIA ISOLADA UNILATERAL DO NERVO HIPOGLOSSO CAUSADA POR UM CISTO SINOVIAL DA ARTICULAÇÃO ATLANTO-AXIAL

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A 52-year-old man presented with a 3-month history of occipital headache, nonprogressive dysarthria and difficulty in chewing. Physical examination revealed an isolated right hypoglossal nerve (HN) palsy with associated unilateral tongue wasting (figure 1). Brain MRI disclosed a lobulated cystic mass originating in the right atlantoaxial joint, which extended superiorly and insinuated through the ipsilateral hypoglossal canal, with peripheral enhancement (figure 2).

The association of atlantoaxial synovial cyst and isolated unilateral compressive HN paralysis is rarely seen1-4. We believe it should be included in the differential diagnosis of isolated unilateral HN palsy.

Figure 1: Wasting of the right side of the tongue and its deviation to the right on protrusion indicating a right hypoglossal nerve palsy.

Figure 2: (A), (B) and (C) post-gadolinium T1 fat saturation in the coronal, axial and sagittal planes; (D) axial 3D-CISS MRI. Right hemitongue fatty degeneration due to atlantoaxial arthrosynovial cyst compression and hypoglossal nerve palsy.

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CONFLICT OF INTEREST

The author declares that there is no conflict of interest.

REFERENCES:


