Bell's Palsy as a Neurological Manifestation of Covid-19 Infection: A Rare Case Report

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Abstract

Coronaviruses are a novel significant pandemic infectious disease that was identified mainly causing respiratory symptoms in Wuhan At the end of 2019 [1]. Bell's palsy is the most common cause of peripheral facial palsy due to a viral etiology. Pain in the mastoid area can be the first symptoms and cause facial hemiparesis [2,3] We describe a case of Covid-19-related subacute thyroiditis.

Keywords: Covid-19, Bell's palsy, Respiratory symptoms.

Introduction

Case presentation: A 55-year-old man was referred to an internal medicine clinic for 3 days due to left facial limp after developed with fever, cough, body pain and other symptoms. Physical examination revealed right peripheral seventh facial nerve paralysis and incomplete eye closure (Figure 1). Brain magnetic resonance imaging revealed no irregularity. However, high resolution computed tomography (HRCT) shows the ground-glass opacity in the peripheral and bilateral lower lob of both lung (Figure 2). Sampling of throat swabs and real-time reverse transcription-polymerase chain reaction (RT-PCR) marks for COVID-19. Common laboratory findings revealed elevated erythrocyte sedimentation rate (ESR) and C-reactive protein level. Facial paralysis reduced and complete recovery after conservative management and two times of negative RT-PCR test results was detected from him. HRCT of lung complete absorption after 1 month later (Figure 3).



Figure 1. Right facial nerve pulsy and incomplete eye closure.

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Figure 2. Ground-glass opacity in peripheral and bilateral lower lob of both lungs.



Figure 3. HRCT of lung complete absorption after 1 month.

Conclusion

Bell's palsy is the most common cause of peripheral facial palsy due to a viral etiology. HSV (Herpes simplex virus) infection is the most likely cause of Bell's palsy. Pain in the mastoid area can be the first symptoms and cause facial hemiparesis [2,3]. COVID-19 is an RNA virus that spreads rapidly, resulting in an epidemic in China. COVID-19 presenting a high powerful of one-to- one transmission and so causal to a large epidemic of coronavirus disease (COVID-19). The incubation period of COVID-19 is believed to be 14 days after contact. Range of symptomatic infection sort from mild to severe; most infections are mild symotoms. COVID-19 causes most of the upper and lower respiratory symptoms [4,5]. Almost one researcher emphasized that COVID-19 can be a neurological symptom such as vertigo, headache, Confusion, and etc [6]. However, Bell's palsy has not been reported as the first common neurologic symptoms.

Discussion

Bell's palsy is the most common neurologic sequelae that occurs in approximately two-thirds of the all causes of facial hemiparesia [2]. Pathogenesis and etiology of it was not clear recogonized. A herpes simplex-mediated viral inflammatory/immune response was the subject of disagreement. Nerve paralysis ordinarily occurs 7-14 day after infected [2-3]. Another etiology of spontanoues unilateral facial paralysis contain Epstein-Barr virus, cytomegalovirus, adenovirus and etc. [7,8].

Coronaviruses is a novel significant pandemic infectious disease that mainly caused respiratory symptoms in Wuhan at the end of 2019. [1]. This spread rapidly, resulting in an epidemic throughout China that offers a large one-to- one power transmission. The incubation period for COVID-19 is believed to be 14 days after contact. The range of symptomatic infection ranges from mild to severe; most infections are mild symotoms. COVID-19 causes most of the upper and lower respiratory symptoms, but cardiovascular, gastrointestinal, and neurological manifestations have been reported in patients was infected with COVID-19. Neurological Manifestations such as vertigo, headache, confusion was occur in it [4,5]. In this patient, except for SARS-CoV-2, herpes zoster and other viral antigens was not diagnosed. Hence, it is believed that the COVID-19 virus can be linked with Bell's palsy in our case reported.

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