

Varicella zoster meningitis: A rare case of disseminated reactivation

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CASE HISTORY

34-year-old G4P3003 at 22w1d with 2 weeks of fatigue and pruritic, painful skin lesions.

PHYSICAL EXAM

T: 97.6 F - BP: 105/63 (MAP 75) - HR: 58-
RR: 18- SpO2: 100%

Patient reported headache, photophobia, and neck rigidity. Small vesicular and crusted lesion on erythematous base noted on right buttock with radiation to her medial thigh.



Figure 1.) Vesicular lesions found on the patient

EVALUATION

A

BMP				CBC	
136	109	8	8.6	11.3	
3.4	20	0.60; 0.60	84	8.8	173
				33	

B

		CSF STUDIES	
Tube 1	08/22/24	Tube Number CSF	
Colorless Cl...	08/22/24	Gross Appearance CSF	
178	08/22/24	Nucleated Cells CSF	
0	08/22/24	RBC Count CSF	
100	08/22/24	Total Cells CSF	
48	08/22/24	Neutrophil CSF	
33	08/22/24	Lymphocyte CSF	
12	08/22/24	Monocyte/Macrophage CSF	
3	08/22/24	Eosinophil CSF	
4	08/22/24	Atypical cell CSF	
See Diff Below	08/22/24	Manual Diff CSF	
Atypical L...	08/22/24	Comment CSF	
44	08/22/24	Glucose CSF	
71	08/22/24	Protein CSF	

C

		ID PANELS	
Not Detected	08/22/24	Escherichia coli K1 MEP (Result)	
Not Detected	08/22/24	Haemophilus influenzae MEP (Res...	
Not Detected	08/22/24	Listeria monocytogenes MEP (Res...	
Not Detected	08/22/24	Neisseria meningitidis MEP (Result)	
Not Detected	08/22/24	Streptococcus agalactiae MEP (Re...	
Not Detected	08/22/24	Streptococcus pneumoniae MEP (...)	
Not Detected	08/22/24	Cytomegalovirus MEP (Result)	
Not Detected	08/22/24	Enterovirus MEP (Result)	
Not Detected	08/22/24	Herpes simplex virus 1 MEP (Result)	
Not Detected	08/22/24	Herpes simplex virus 2 MEP (Result)	
Not Detected	08/22/24	Human herpesvirus 6 MEP (Result)	
Not Detected	08/22/24	Human parechovirus MEP (Result)	
Detected	08/22/24	Varicella zoster virus MEP (Result)	
Not Detected	08/22/24	Cryptococcus neoformans/gattii M...	
CSF	08/22/24	MEP (Specimen Type)	

Figure 2 -- A) Admission labs from the patient B) Results of CSF studies obtained by obstetric anesthesia team. C) Viral PCR showing positive Varicella

MANAGEMENT

- Following VZV (+) CSF studies, IV acyclovir started for 14 days. Patient discharged with PICC for continued antiviral administration.
- Ultimately patient had quick resolution of symptoms following acyclovir and delivered a healthy boy at 39w1d using nitrous oxide for labor analgesia.



Figure 3: Vesicular lesions following treatment with acyclovir

KEY POINTS

Broad Differential: Considering less common etiologies like VZV in pregnant patients. Reactivation and Exposure: Prior VZV infection doesn't eliminate the risk of reactivation. Anesthetic implications following CNS involvement from viral meningitis