Facial Paralysis Due to Arachnoid Cyst

A 29 years male, known epileptic since five years presented with tonic - clonic convulsions followed by loss of consciousness for 10 minutes. Neurological examination revealed right lower motor neuron type of facial palsy (which was since birth), and cerebellar signs on right side. Audiometry revealed bilateral sensorineural deafness. MRI of brain showed arachnoid cyst in right cerebellopontine angle compressing VII and VIII cranial nerves (Fig. 1).

Arachnoid cysts represent intra-arachnoid cerebrospinal fluid containing cysts that do not communicate with the ventricular system, usually without brain maldevelopment. they constitute approximately 1% of intracranial masses, with 11% occurring in the cerebellopontine angle; arising as developmental anomalies. Arachnoid cysts are often incidental finding on imaging. Usually patient with even large cysts are asymptomatic. The most commonly associated clinical features are headache, calvarial bulging and occasionally seizure with focal neurological signs. Infranuclear VII nerve palsy due to the compression of VII nerve by the cyst in the cerebellopontine angle is very rare. Surgical treatment by excision of the outer cyst membrane and cysto-peritoneal shunting is usually effective.

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Fig. 1 : Arachnoid cyst in the right cerebello-pontine angle compressing the VII and VIII cranial nerve