Frey syndrome following Ramsay Hunt syndrome in otherwise healthy girl.

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Case Report

12-years old girl complains about a periodic recurrent rash on her face (figure 1).

Her mother describes a red coloration appearing on the left side of her face without any specific known provocation. It is not painful but is embarrassing. She is a healthy girl, immunized to her age, including the chickenpox vaccine.

In August 2011 (when she was 6 years old), she had an acute event of blister rash on the left side of her face, including lesions in the ear canal and buccal mucous membrane. The diagnosis of herpes zoster with involvement of geniculate ganglion (Ramsay Hunt syndrome) was made and the girl was treated with acyclovir with complete skin recovery. A hearing examination done a few weeks later demonstrated mild to moderate neurosensory hearing loss on the left side. She then underwent MRI of the brain that was found normal.

Her hearing loss is not progressing. The girl and her parents remarked that since the herpes zoster episode, she is having short episodes of redness on her face at the exact same distribution of the original zoster blisters 6 years ago (figure 1).

The redness appears unprovoked without pain or any other sensation and without sweating. It subsides after a few minutes. After several trials it seems that the appearance of the reaction is related to sour foods, such as sour flavored candies, yogurt and green apples.

Management

In our case, considering benign nature of the girl's complains, only observational approach was adopted. It seems that after receiving an explanation and reassurance the phenomenon is less disturbing to the girl but the flushing episodes still appear.

Discussion

Frey syndrome, **gustatory sweating and flushing of the involved skin**, is usually depicted in context of iatrogenic sequela after parotid gland region surgery or trauma in this region. The condition is named after **Lucja Frey**, polish-jewish neurologist who described the auriculotemporal nerve anatomy and the syndrome pathophysiology in 1923 [1].

Although the condition and its management are well described in context of parotidectomy in adults, only few cases in children and particularly following herpes zoster infection were published in literature [2]. Sometimes the condition is misdiagnosed as allergic reaction to food, thus the acknowledgement with the syndrome is important for prevention of unnecessary tests.

Conclusions

- The physician should inquire about the history of herpes zoster in the evaluation of unexplained flushing
- The acknowledgement with the phenomenon can prevent unnecessary allergy workup
- Most children with Frey's syndrome exhibit flushing without sweating

References:

1. Frey L. Le syndrome du nerf auriculo-temporal. Revue Neurologique 1923; (2): 92–104.
2. Bourgeois P, Morren MA. Frey's Syndrome After Herpes Zoster Virus Infection in a 2-Year-Old Girl. Pediatr Dermatol 2015; 32(4): e184-5.

Figure 1