Pain and weakness of the left side

Denise, aged 48, presents with a four month history of left shoulder pain and progressive weakness in her left hand. You notice her left eye appears smaller than the right and her left pupil also appears smaller. On questioning, she has also noticed a lack of perspiration on the left side of her face in the past few months.

Denise has no significant medical history. She is generally well. She smokes approximately 25 cigarettes a day and on average drinks approximately 20 g of alcohol daily.



Question 1

What syndrome do these symptoms and signs represent?

Question 2

What is the cause of this syndrome?

Question 3

In this case, what is the most likely diagnosis?

Question 4

What is the differential diagnosis?

Answer to last month's Brain teaser

A seven year old girl presents with this lesion which began as a patch of tiny blisters a week ago. She is otherwise well.



Answer 1

The diagnosis is impetigo, more commonly known as school sores.

Answer 2

Impetigo is a superficial bacterial skin infection most commonly caused by staphylococcus aureus but may also less commonly be caused by Group A streptococci. Impetigo presents most often in children but may be seen at any age. The risk of infection increases with

lowered resistance from illness, poor hygiene and poor nutrition. It is also more common in warm, humid weather and in crowded living conditions.

Answer 3

For mild, localised infections such as in this case, treatment involves bathing the area three times daily with saline, soap and water, aluminium acetate or potassium permanganate solution to remove crusts. Mupirocin 2% ointment or cream (Bactroban) should then be applied three times daily for seven days.

For more severe, widespread or longstanding infections oral antibiotics are needed to cover both Staphylococcus aureus and Streptococcus pyogenes. Cephalexin is recommended as the drug of choice.

NB: If the infection is due to Group A streptococci, glomerulonephritis may follow within eight weeks.

Answer 4

Impetigo is highly contagious. Attention must be paid to vigilant hand washing, separate linen and avoidance of touching

lesions (which in young children may require covering the lesions). Children should be kept away from school or other childcare settings until the skin has completely healed.

AEP

Send your answers to arrive by 5 September. A voucher for medical books or medical equipment to the value of \$100 will be awarded for the first correct entry drawn. The winner will be notified by mail and the answer published in the September 2002 issue.

Address entries to:
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The winner of the July Brain teaser is Dr Syed Hasan, Kondinin, WA