Hemifacial sweating after carotid artery dissection

Sarikaya, H

DOI: https://doi.org/10.1016/S0140-6736(11)61102-1

Posted at the Zurich Open Repository and Archive, University of Zurich
ZORA URL: https://doi.org/10.5167/uzh-51010
Accepted Version

Originally published at:
DOI: https://doi.org/10.1016/S0140-6736(11)61102-1
Hemifacial sweating after carotid artery dissection

Hakan Sarikaya, MD

Department of Neurology, University Hospital Zurich, Switzerland

Manuscript type: Clinical Pictures

Word count: The manuscript contains 142 words

Disclosures: There is no conflict of interest. The patient consented to the publication of the case history including the photograph

Address correspondence to:
Hakan Sarikaya, MD
Department of Neurology
University Hospital Zurich
Frauenklinikstrasse 26
CH-8091 Zürich
Switzerland
Phone: 0041/44/255 56 86
Fax: 0041/44/255 88 64
E-Mail: hakan.sarikaya@usz.ch
A 40-year-old woman presented with left-sided Horner syndrome and headache. Magnetic resonance imaging revealed a wall hematoma of the left internal carotid artery (ICA), which was consistent with ICA-dissection (Panel A). When restarting with her running exercises a few weeks later she noticed unilateral facial flushing and sweating on the unaffected side during physical exertion, while the left half of her face rested pale and did not sweat (Panel B). These complaints resolved within a few minutes of rest.

Harlequine syndrome is the term for hemifacial sweating and flushing. It is very rarely reported in connection with ICA-dissection, as sudomotor and vasomotor fibers innervating the face are supposed to travel mostly with the external carotid artery. Knowledge of this cosmetically striking syndrome after ICA-dissection is helpful to prevent from further investigations and information on spontaneous amelioration by time may be sufficient instead.