

Lemierre's syndrome

- Proinflammatory and prothrombotic conditions in JAK2V617F-positive MPN: a case of Lemierre's syndrome in essential thrombocythemia
- A rare case report: Pott's Puffy tumor and Lemierre's syndrome with intracranial complications in an adult male
- Postoperative Lemierre's syndrome: a previously unreported complication of transoral surgery. Illustrative case
- Lemierre syndrome associated mycotic cavernous sinus thrombosis and carotid aneurysm after COVID-19
- Lemierre's syndrome caused by *Fusobacterium necrophorum* complicated with multiple brain abscesses-A case report, literature review, and suggested management
- Lemierre syndrome leading to an ischaemic stroke and malignant cerebral oedema
- Internal Jugular Vein Thrombosis: Etiology, Symptomatology, Diagnosis and Current Treatment
- Lemierre Syndrome Associated with Ipsilateral Recurrent Laryngeal Nerve Palsy: A Case Report and Review

Lemierre syndrome is a rare condition arising from an invasive oropharyngeal infection, which leads to septic [thrombophlebitis](#) of the [internal jugular vein](#) and multi-organ [septic embolization](#) most commonly by *Fusobacterium necrophorum*.

This disease entity should be included in the differential diagnoses of CNS [bacterial infections](#) ¹⁾.

A high index of suspicion and early recognition is important for successful management and to prevent systemic complications like multiorgan failure with extremely high morbidity, prolonged hospitalization and, not uncommonly, death.

Intracranial complications are rare but serious, including [subdural empyema](#), [cavernous sinus thrombosis](#), and [internal carotid artery aneurysms](#).

Its an unusual manifestation of spinal infection ²⁾.

Case reports

A 64-year-old woman was transported to the emergency room with a headache and fever. She presented with a right ocular protrusion, hyperemia, and tenderness in the neck. Contrast-enhanced MRI of the head showed a high DWI signal in the bilateral sphenoid sinuses and contrast defects along the bilateral internal jugular and superior ophthalmic veins. Blood and CSF cultures revealed the *Streptococcus milleri* group. Surgery was performed for Lemierre's syndrome secondary to sphenoid sinusitis. The patient was treated with antibiotics and anticoagulant therapy, but a duodenal ulcer and brain abscess thereafter developed. However, multidisciplinary endoscopic and surgical treatment saved her life ³⁾

A patient with Lemierre syndrome with multiple intracranial complications despite aggressive antimicrobial therapy, required transsphenoidal endoscopic drainage of the sphenoid sinus to help eradicate the infectious source and can be an adjunct to antimicrobial therapy in achieving infection

control.

Lemierre syndrome with cervical spondylodiscitis and epidural abscess associated with direct injection of heroin into the jugular vein ⁴⁾.

A 16-year-old boy with cavernous sinus thrombosis and right internal carotid artery narrowing without neurological sequelae, right subdural empyema, and cerebritis in the right temporal and occipital lobes. Neuroimaging also demonstrated right jugular vein thrombosis. Cultures of samples from the blood proved positive for the presence of *Fusobacterium necrophorum*. The patient underwent unilateral tonsillectomy, drainage of the peritonsillar abscess, and a myringotomy on the right side. Postoperatively the patient was treated conservatively with antibiotic therapy resulting in an excellent outcome ⁵⁾.

¹⁾

Teng HW, Chen CY, Chen HC, Chung WT, Lee WS. *Fusobacterium* septicemia complicated by cerebral subdural and epidural empyemas: a rare case of Lemierre syndrome. *J Emerg Med*. 2012 Oct;43(4):671-3. doi: 10.1016/j.jemermed.2010.04.033. Epub 2010 Jun 20. PubMed PMID: 20566261.

²⁾

Park D, Rezajooi K, Sabin I. Lemierre's syndrome: an unusual manifestation of spinal infection. *J Bone Joint Surg Br*. 2006 Feb;88(2):261-2. PubMed PMID: 16434535.

³⁾

Miyazaki M, Hattori H. A Case of Lemierre's Syndrome Caused by *Streptococcus Milleri* Group. *Intern Med*. 2023 Sep 22. doi: 10.2169/internalmedicine.2311-23. Epub ahead of print. PMID: 37743513.

⁴⁾

Lin HY, Liao KH, Jean SS, Ou TY, Chen FL, Lee WS. Lemierre syndrome with cervical spondylodiscitis and epidural abscess associated with direct injection of heroin into the jugular vein. *J Microbiol Immunol Infect*. 2013 Dec 30. pii: S1684-1182(13)00231-4. doi: 10.1016/j.jmii.2013.11.008. [Epub ahead of print] PubMed PMID: 24388576.

⁵⁾

Westhout F, Hasso A, Jalili M, Afghani B, Armstrong W, Nwagwu C, Ackerman LL. Lemierre syndrome complicated by cavernous sinus thrombosis, the development of subdural empyemas, and internal carotid artery narrowing without cerebral infarction. Case report. *J Neurosurg*. 2007 Jan;106(1 Suppl):53-6. PubMed PMID: 17233314.

From:

<https://neurosurgerywiki.com/wiki/> - **Neurosurgery Wiki**



Permanent link:

https://neurosurgerywiki.com/wiki/doku.php?id=lemierre_s_syndrome

Last update: **2024/06/07 02:55**