# Imposter insect bites: a case of neurosyphilis in disguise

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## INTRODUCTION

- Syphilis: multisystem infection caused by Treponema pallidum
- Challenging diagnosis due to ubiquity and pleomorphism
- Neurological involvement: rare, but can occur at any stage

### ADDITIONAL INVESTIGATIONS

- Positive RPR and TPHA
- Lumbar puncture
  - Normal cell count, ↑ albumin and intrathecal IgG
- Normal brain MRI

#### CASE PRESENTATION

- 53-year-old man, returning from Malaysia
- Nodular skin lesions, left-sided hearing loss and impaired vision of the right eye
- Previous medical visits
  - General practitioner: persistent insect bites?
  - Otorhinolaryngologist: acoustic trauma
  - Ophthalmologist: right-sided papilledema
- Clinical examination
  - Multiple erythematous, infiltrated nodules on the face, trunk and extremities
- High-risk sexual contact

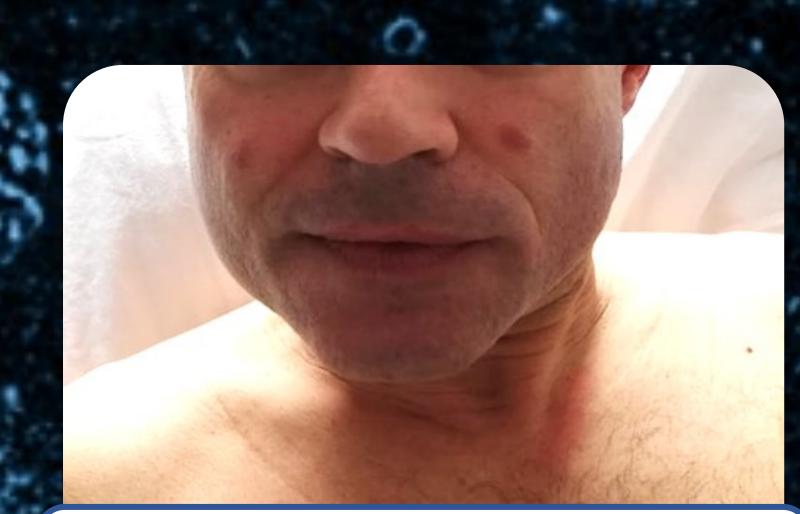
# NODULAR SECONDARY SYFILIS

with ocular and auricular early neurosyphilis

## TREATMENT AND OUTCOME

- Benzathine penicillin G 3.000.000E IV 6x/day for 14 days
- No Jarisch-Herxheimer reaction
- Significant improvement of skin lesions and cranial nerve damage 6 weeks after treatment





After treatment Week 6

# NEUROSYPHILIS: WHAT TO KNOW

- Treponema pallidum
  - Lymphatic and hematological spread after infection to different organ systems
- No subdivision in primary, second, latent or tertiary stage
- Five types
  - Early: asymptomatic, meningeal, meningovascular
  - Late: general paresis, tabes dorsalis
- Perform lumbar puncture for CSF analysis
- Treatment
  - IV penicillin G for 14 days every 4-6 hours
- Offer pre-exposure prophylaxis (PrEP) to high-risk patients
  - Increased risk of HIV co-infection



**Trivia:** the background of this poster is derived from images of T. pallidum spirochetes seen by dark-field microscopy in 1910 by

Gastou and Girauld (Images created using Biorender®)

References

1.Workowski et al. Sexually Transmitted Infections Treatment Guidelines, 2021. MMWR Recomm Rep.2021 Jul 23;70(4):1-187.

2.Gonzalez H, Koralnik IJ, Marra CM. Neurosyphilis. Semin Neurol. 2019 Aug;39(4):448-455.