



Herpes zoster infection presenting as neurogenic bladder dysfunction

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Herpes zoster infection is a disease characterized by maculopapular rash and dermatomal or neuropathic pain limited to one side of body.^[1] Rarely, bladder dysfunction with acute urinary retention is seen due to the involvement of sacral dermatomes.^[2] Herein, we present a case of an uncommon symptom of herpes zoster infection presenting as bladder dysfunction with globe vesicale due to affected sacral dermatomes. Herpes zoster infection should be kept in mind as one of the causes of neurogenic bladder dysfunction.

Dear editor, a 65-year-old female patient with stroke was admitted to our clinic for post-stroke rehabilitation. During follow-up, complex regional pain syndrome developed on her hemiplegic side, and she received corticosteroid treatment (methylprednisolone 24 mg/day was initiated and reduced by 4 mg every 5 days). During the treatment process, dermatomal pain, maculopapular rash, and difficulty in urination (globe vesicale) developed (Figure 1). The patient was diagnosed with herpes zoster infection (zona) and her symptoms alleviated following valacyclovir treatment (3,000 mg/day). Herpes zoster infection is a disease

characterized by maculopapular rash and dermatomal or neuropathic pain limited to one side of body.^[1] Rarely, bladder dysfunction with acute urinary retention is seen due to involvement of sacral dermatomes.^[2] Our case had an uncommon symptom of herpes zoster infection presenting as bladder dysfunction with globe vesicale due to affected sacral dermatomes. Herpes zoster infection should be kept in mind as one of the causes of neurogenic bladder dysfunction.

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