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### **Demographics**

Case1

Case 2

M.S., 15y, m.

**Congenital scoliosis** 

Hemivertebra T3 left

Wedge vertebra C7 and synostosis C4-7

Posterior hemivertebra resection T3 including the proximal part of the rib

Instrumentation T1 to T5

Ligation of the nerve root T3

E.S., 6y, m.

**Congenital scoliosis** 

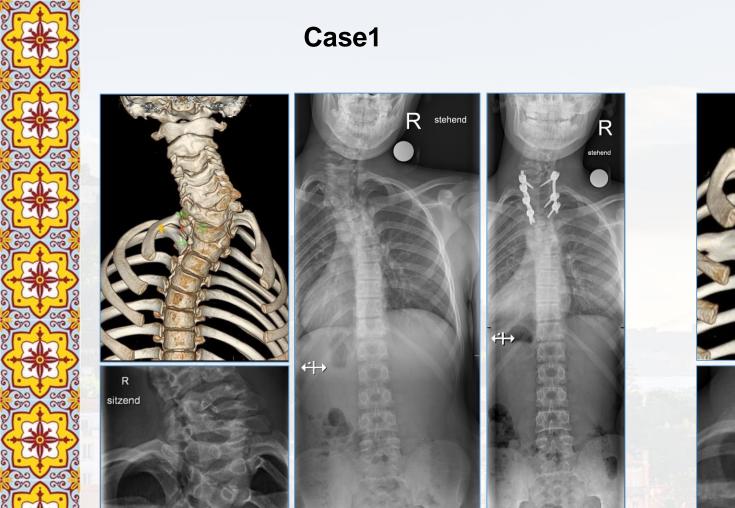
Hemivertebra T3 right

Rib synostosis T1/2 left and T4/5 right

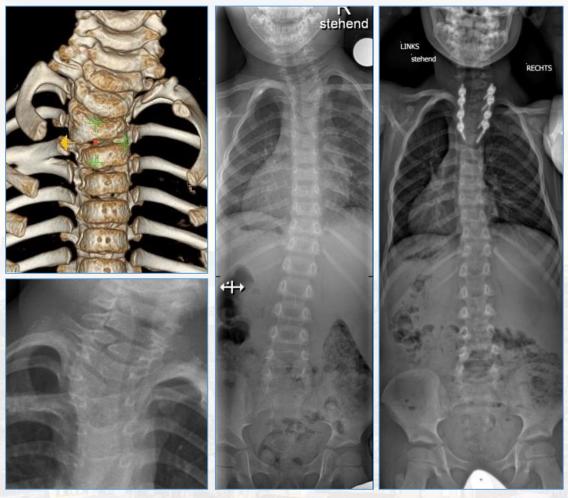
Posterior hemivertebra resection T3 including the proximal part of the rib

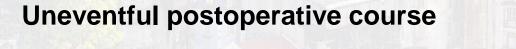
Instrumentation T1 to T5

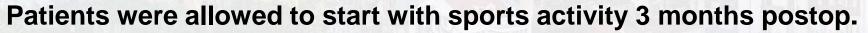
No nerve root ligation

















#### Both patients complained unilateral facial flush when starting with sports (jogging)

Case1 (HV T3 left)



Flush: right side
Anhydrosis: left side
Pathology: left side

Case 2 (HV T3 right)



Flush:
Anhydrosis:
Pathology:

left side right side right side





### **Symptoms:**

Paleness and anhydrosis at the affected side, obvious by a flush at the contralateral side during sports activity

#### **Incidence**

Rare, case reports

### **Etiology:**

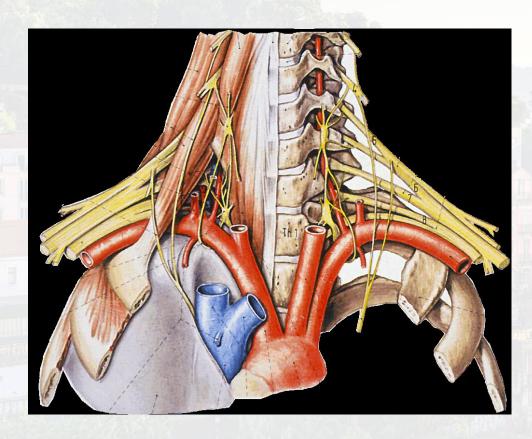
- idiopathic
- congenital
- post epidural anesthesia
- post thoracic surgery

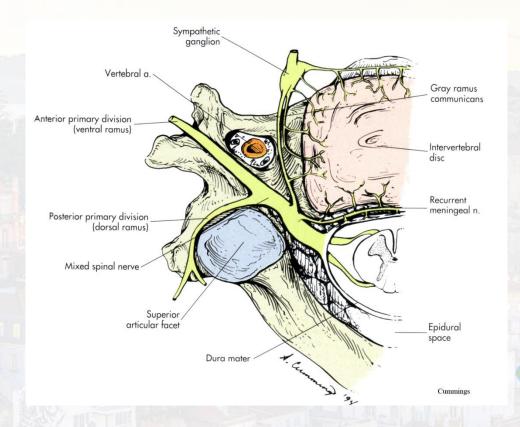




### **Anatomy/ Pathophysiology:**

- Sympathetic trunk: paravertebral ganglion
- Lesion probably at the level T2/T3











#### Literature:

#### Idiopathic/ congenital

Kang JH, Shahzad Zafar M, Werner KE. Child Neurology: An infant with episodic facial flushing: A rare case and review of congenital harlequin syndrome. Neurology. 2018 Aug 7;91(6):278-281.

Algahtani H, Shirah B, Algahtani R, Alkahtani A. Idiopathic Harlequin Syndrome Manifesting during Exercise: A Case Report and Review of the Literature. Case Rep Med. 2017;2017:5342593.

Kim JY, Lee MS, Kim SY, Kim HJ, Lee SJ, You CW, Kim JS, Kang JH. A pediatric case of idiopathic Harlequin syndrome. Korean J Pediatr. 2016 Nov;59(Suppl 1):S125-S128.

Jain P, Arya R, Jaryal A, Gulati S. Idiopathic harlequin syndrome: a pediatric case. J Child Neurol. 2013 Apr;28(4):527-30.

Lance J W, Drummond P D, Gandevia S C, Morris J L (1988) Harlequin syndrome: the sudden onset of unilateral flushing and sweating. Journal of Neurology, Neurosurgery, and Psychiatry 51:635-642.



#### Literature:

#### Epidural anesthesia

Redondo JM, Rivas M, Martín ML, Torrado MD, Rodríguez MJ. Harlequin syndrome as a rare complication after epidural anesthesia in an obstetric patient. Minerva Anestesiol. 2018 Apr;84(4):524-526.

Lefevre A, Schnepper G. Development of Harlequin Syndrome following placement of thoracic epidural anesthesia in a pediatric patient undergoing Nuss procedure. Clin Case Rep. 2017 Aug 3;5(9):1523-1525.

Nagasaka Y, Wasner G, Sharma B, Fleischmann K. Harlequin Syndrome After Thoracic Paravertebral Block. A A Case Rep. 2016 Feb 1;6(3):48-51.

Zinboonyahgoon N, Srinivasan S, Narang S. Harlequin Syndrome Following Implantation of Intrathecal Pumps: A Case Series. Neuromodulation. 2015 Dec;18(8):772-5.

Boling B, Key C, Wainscott J, Rebel A. Harlequin syndrome as a complication of epidural anesthesia. Crit Care Nurse. 2014 Jun;34(3):57-61.



#### Literature:

#### Thoracic surgery

Kydes AT, Kelley AM, Pandya SR, Barst SM. Postoperative Harlequin Syndrome: Case Report of a Rare but Clinically Striking Condition. A A Pract. 2018 Apr 15;10(8):215-217.

Hussein N, Haqzad Y, Lodhia J, Begum S, Cowen M. Harlequin syndrome following upper lobectomy. Asian Cardiovasc Thorac Ann. 2018 Mar;26(3):234-235.

Lee DH, Seong JY, Yoon TM, Lee JK, Lim SC. Harlequin syndrome and Horner syndrome after neck schwannoma excision in a pediatric patient: A case report. Medicine (Baltimore). 2017 Nov;96(45):e8548.

Jeon YJ, Son J, Cho JH. Harlequin Syndrome Following Resection of Mediastinal Ganglioneuroma. Korean J Thorac Cardiovasc Surg. 2017 Apr;50(2):130-132.

Jung JM, Lee MH, Won CH, Chang SE, Lee MW, Choi JH, Moon KC. latrogenic harlequin syndrome: a new case. Ann Dermatol. 2015 Feb;27(1):101-2



#### **Discussion:**

- Lesion of the sympathetic trunk / paravertebral ganglion ipsilateral to the hemivertebra
  - Approach including costotransversectomy
  - Resection of the vertebral body
  - Resection of the rib head
  - Manipulation within the neuroforamen
  - Ligation of the nerve root (case 1)
  - Stretching of sympathetic fibers
  - Correction maneuver with closing of the gap





#### **Discussion:**

- > How to avoid ...
  - Gentle dissection within the foramen
  - Avoid ligation of the nerve root
  - Dissection of rib head and vertebral body close to the bony surface (leave the periosteum in young children?)
  - Especially careful at the level of T2 and T3

