

Diplopia (double vision) and heart block in early-disseminated Lyme disease

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<http://danielcameronmd.com/diplopia-double-vision-heart-block-early-disseminated-lyme-disease/>

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One month prior to being evaluated, the man had removed a tick from his outdoor cat. His laboratory tests were positive on both a Lyme enzyme-linked immunosorbent assay screening and confirmatory Western blot with 3 IgM bands: p41, p39, and p23.

His electrocardiography revealed new second-degree Mobitz type I heart block. He was admitted for additional workup and monitoring.

Source: Mayo Clinic, Whitney Blackwell, MD <http://www.mayoclinicproceedings.org>

A magnetic resonance imaging was arranged within 24 hours of admission. The image “revealed abnormal enhancement of the bilateral oculomotor nerves, left trigeminal nerve, and probable left abducens nerve, consistent with disseminated Lyme disease,” [explains Blackwell](#).

The man’s rash, heart block, fatigue and myalgias improved quickly on initiation of a four-week course of intravenous ceftriaxone.

It is not clear if the heart block, diplopia, hospitalization, and 4 weeks of intravenous ceftriaxone could have been prevented if the 49-year-old man had been treated a month earlier at the onset of the rash. The case report did not discuss whether the antibiotics resolved the diplopia.

References:

1. Blackwell WA. Early Disseminated Lyme Disease. Mayo Clin Proc. 2017;92(4):687-688.

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