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In Syndrome

Guillain Barre Syndrome / Landry's Ascending Paralysis

Definition :

- It is a rare but serious post-infectious immune-mediated neuropathy.
- It results from the autoimmune destruction of nerves in the peripheral nervous system causing symptoms such as numbness, tingling and weakness that can progress to paralysis.

Etiology :

- The GBS and its variants are considered post-infectious, immune-mediated neuropathies.
- In Campylobacter jejuni gastrointestinal infections, a lipooligosaccharide present in the outer membrane of the bacteria is similar to gangliosides that are components of the peripheral nerves.
- Therefore an immune response triggered to fight infection can lead to a cross-reaction on host nerves.

Epidemiology :

- 0.4 to 2 per 100,000.

Clinical Features :

- A pattern of proximal and distal weakness, which is flaccid.
- Significant neck flexion weakness.
- Areflexia or hyporeflexia.
- Patients experience non-length-dependent sensory symptoms.
- Facial diplegia
- Dysphagia
- Respiratory failure can occur in up to 30% of patients.

Diagnosis :

- Mostly clinical diagnosis.
- Electromyography and nerve conduction studies.
- Cerebrospinal fluid (CSF) shows a classic pattern of albuminocytologic dissociation.

Treatment :

- These include either intravenous immunoglobulin (IVIG) or plasma exchange.
- IVIG is given 2 grams/kilogram divided over 5 days.
- Plasma exchange is generally given as a volume of exchange over five sessions.

Prognosis :

- 3 – 10% mortality.
- Despite above treatment, all patients do not recover fully and they have residual weakness, pain and fatigue.
- Even after 6 months, 1/5th patients are handicapped as they are not able to walk.

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