



# Guillain-Barre

# Syndrome



Progressive weakness of limbs

Usually ascending weakness (starting from lower limbs), but proximal muscles tend to be affected before distal

Mild sensory sx distally

Radiculopathic (trapped nerve at level of spinal column) symptoms

May also have:

- Areflexia
- Involvement of cranial nerves
- Autonomic features e.g. urinary retention
- Back pain

Serious if respiratory muscle and/or autonomic involvement.

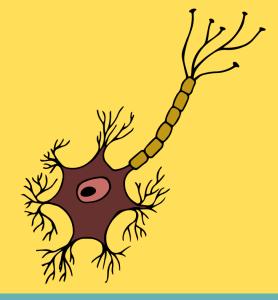
## INVESTIGATIONS

Lumbar puncture- high protein only (normal WCC)

NCS show reduce conduction speed (due to demyelination)- may be normal in the early stages

#### TREATMENT

Intravenous Immunoglobulin



### **PATHOGENESIS**

Acute inflammatory demyelinating polyradiculoneuropathy (AIDP) is most common type.

Immune-mediated demyelination of peripheral nervous system.

Often follows respiratory or GI (campylobacter jejuni) infection.

## VARIANTS AND SIMILAR CONDITIONS

Miller Fisher variant= ataxia, areflexia and ophthalmoplegia

Chronic inflammatory demyelinating polyradiculoneuropathy (CIDP) is similar condition- progresses more slowly

#### COMPLICATIONS

Respiratory muscle involvement (weakness), leading to respiratory failure

Autonomic neuropathy- can lead to cardiac arrest via autonomic instability

IVIG therapy can cause liver inflammation and renal failure Dysphagia- NG tube feeding needed