

(ACUTE INFECTIOUS POLYNEURITIS)**DEFINITION**

1. **Guillain-Barre Syndrome** is an acute and diffuse post-infective disorder of the nervous system involving the spinal roots and peripheral nerves, with occasional involvement of the cranial nerves.

CLINICAL FEATURES

2. The cardinal clinical features are progressive and usually symmetrical weakness with hyporeflexia. The weakness usually begins in the distal lower limbs and spreads upwards (ascending paralysis).
3. There is often an initial febrile illness in which no neurological symptoms appear followed by a latent period of a few days to a few weeks. More often the patient is seen in the paralytic stage and the initial febrile illness may be slight or absent.
4. Sensory symptoms in the form of distal paraesthesias and mild impairment of position and vibration sense occur, though these are usually not progressive. Autonomic dysfunction leading to tachycardia and hypertension or hypotension are common and can complicate the management of patients with respiratory compromise.

AETIOLOGY

5. **GUILLAIN-BARRE SYNDROME** is a world-wide illness and occurs throughout the year. It has a bimodal age distribution, with most cases being in young adults and a lesser peak in incidence in the 45 to 64 age group.
6. The exact aetiology is largely unknown. However, it is generally accepted that Guillain-Barre Syndrome is an autoimmune disorder although its pathogenesis is unclear. There is evidence for both lymphocyte-mediated delayed hypersensitivity and for a humoral mechanism involving antibodies to the peripheral nervous system.
7. Autoimmune diseases are those in which the body reacts against its own constituents. Genetic factors are important. These may be solely responsible or may merely create a predisposition in which the body then reacts to an external factor, thus leading to the autoimmune response. External factors which interact with a genetic predisposition are infection (especially viral) and drugs.
8. Many predisposing or preceding events have been implicated in this condition although a common antigen has not been identified. Almost half of the cases have no identifiable antecedent event. Guillain-Barre Syndrome has been known to follow;
 - 8.1. upper respiratory infections and gastrointestinal illnesses
 - 8.2. infections by Enterovirus, Mycoplasma and psittacosis

- 8.3. hepatitis, infectious mononucleosis
- 8.4. infection by the Epstein-Barr virus
- 8.5. vaccination against rabies and swine flue
- 8.6. surgical operations pregnancy and malignancy (especially Lymphomas).

CONCLUSION

9. Guillain-Barre Syndrome is an inflammatory disorder affecting the peripheral nervous system. It is of largely unknown aetiology. The currently accepted concepts regarding its aetiology are discussed above. External factors have not been shown to affect the course of the disease.

REFERENCES

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