

## A Case of Carotidynia Mimicking Trigeminal Neuralgia

Jin-Seok Ko, M.D., Seung-Hyun Kim, M.D.\*, Juhan Kim, M.D.

Department of Neurology, College of Medicine, Hanyang University

Carotidynia is defined as an atypical craniofacial pain syndrome caused by the dilatation or distension of the extracranial arteries. We report an unusual case of carotidynia mimicking trigeminal neuralgia caused by an arteriosclerotic tortous carotid artery. A 68-year-old woman suffered from frequent episodes of severe electrical shock-like radiating pain around her left ophthalmic and maxillary division of the trigeminal nerve for 5 years. Initially, under the impression of trigeminal neuralgia, carbamazepine was tried. She was reevaluated due to an unsatisfactory pharmacological response. On examination, no abnormalities were found on the craniofacial region except for a tortous pulsating tender mass on the region of the left carotid artery. Routine laboratory findings and a connective tissue study were normal. Neck sonography and a 4-vessel angiography showed a tortous left internal carotid artery with stenosis extending near to the skin. The patient was treated for 2 weeks with a nonsteroidal anti-inflammatory agent, steroids, a prophylctic beta blocker, and a TCA antidepressant. The pain gradually subsided.

J Korean Neurol Assoc 17(6):928~930, 1999

**Key Words :** Carotidynia, Atherosclerotic, Trigeminal neuralgia

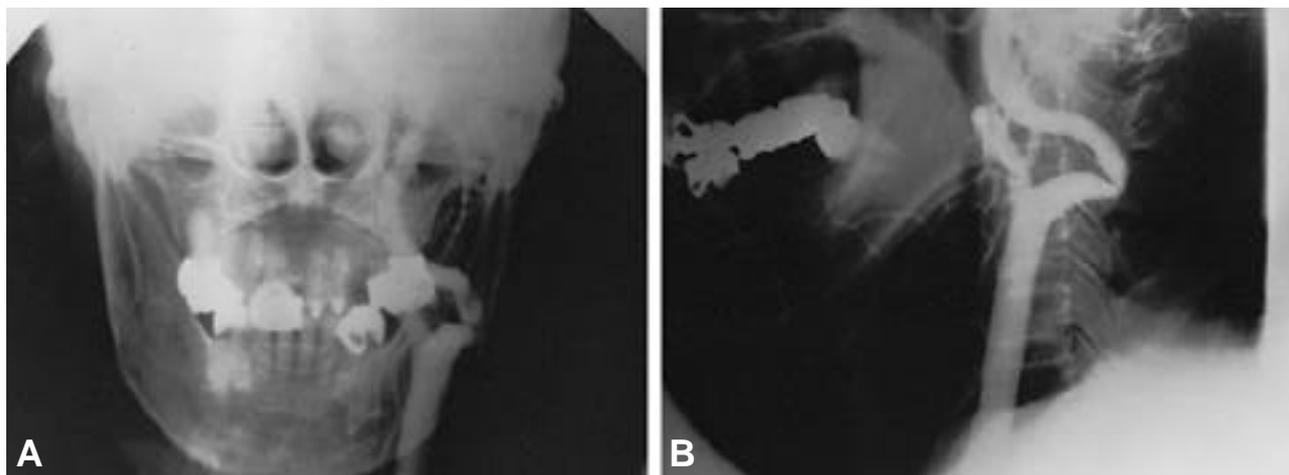
68 가 5

Fay<sup>2</sup> 가 Fay's sign

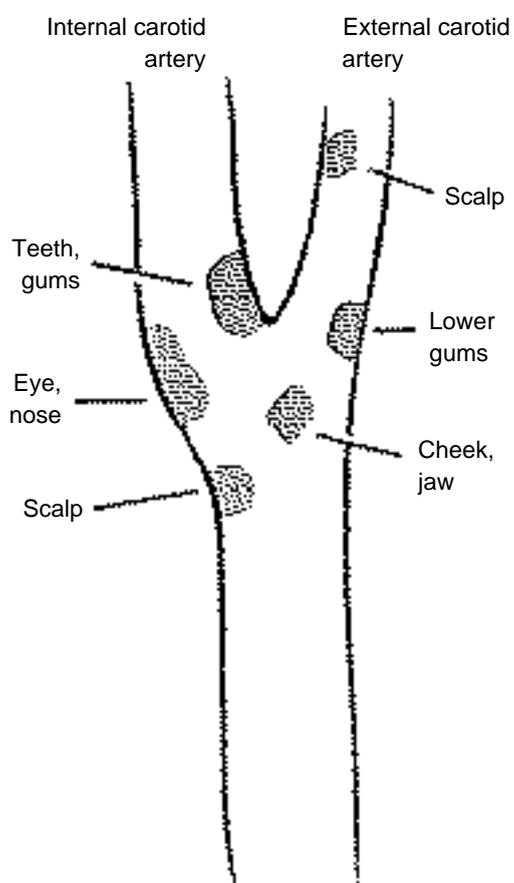
(vasomotor phenomena) (psychosomatic factor) carbamazepine 600mg 가

(migrainous), (nonmigrainous, classic), (arteriosclerotic) (bruit) 5,400/mm<sup>3</sup>, 14.4 g/dl, 145,000/mm<sup>3</sup>, 5 mm/hr

Manuscript received July 30, 1999.  
 Accepted in final form August 20, 1999.  
 \* Address for correspondence  
**Seung-Hyun Kim, M.D.**  
 Department of Neurology,  
 Hanyang University Hospital  
 Haengdang-dong 17, Sungdong-ku,  
 Seoul, 133-792, Korea  
 Tel : +82-2-2290-8371, Fax : +82-2-2290-8377  
 E-mail : kimshl@email.hanyang.ac.kr



**Figure 1.** Anteroposterior view (A) and lateral view (B) of 4-vessel angiography show arteriosclerotic, tortuous left internal carotid artery extending to near the skin.



Right common carotid artery and bifurcation

**Figure 2.** Right common carotid artery and bifurcation showing radiation of pain by electrical stimulation. Adapted from Hill LM (1994).

(Fig. 1).

indomethacin

prednisone

. 60  
가

propranolol

(Fig. 2).<sup>5,6</sup>

60

1 가

가

가 prednisone  
 가 ergotamine, methy-  
 sergide 1,7 propranolol 가

가

1,10

가

가

1,8-10 가

가

8

가

가

1,7,8,10

indomethacin

## REFERENCES

1. Clark HV, King DE, Yow RN, et al. Carotidynia. *American Family Physician* 1994;50:987-990.
2. Fay T. Atypical neuralgia. *Arch Neurol Psychiat* 1927;25:309-315.
3. Hilger JA. Carotid pain. *Laryngoscope* 1949;52:829-838.
4. Loveshin LL. Vascular neck pain-a common syndrome seldom recognized. *Cleve Clin Q* 1960;27:5-13.
5. Hill LM, Hastings G. Carotidynia: A Pain Syndrome. *J Fam Pract* 1994;39:71-75.
6. Fay T. Atypical facial neuralgia, a syndrome of vascular pain. *Ann Otol* 1932;41:1030-62.
7. Lovshin LL. Carotidynia. *Headache* 1977;17:192-195.
8. Fox GN. Carotidynia. *Family Practice Residency of Southwest Idaho* 1983;28:113-116.
9. . . . . Carotidynia 1 1990;8:129-133.
10. Cannon CR. Carotidynia: An unusual pain in the neck. *Otolaryngol Head and Neck Surg* 1994;110:387-390.