

Teaching NeuroImages: Frey syndrome

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Figure 1 Minor test, before treatment



Obtained after the patient chewed gum for 1 minute.

A 42-year-old woman presented with left facial sweating whenever she ate. Symptoms started 6 months after surgery for a benign left parotid tumor. The Minor starch-iodine test was performed, revealing areas of abnormal sweating (figure 1). Two weeks following intradermal injection of botulinum toxin targeting areas of hyperhidrosis, symptoms resolved and repeat Minor test revealed resolution of abnormal sweating (figure 2). Gustatory sweating is caused by abnormal innervation of facial sweat glands by sprouting parasympathetic fibers following an injury to auriculotemporal nerve.¹ The distribution can be patchy, making the Minor test essential to accurately target the involved area.

Author contributions

A. Shcherbina: drafting/revising the manuscript, data acquisition, accepts responsibility for conduct of research and final approval, contribution of vital reagents/tools/patients, acquisition of data, study supervision. E. Sader: drafting/revising the manuscript, analysis or interpretation of data, accepts responsibility for conduct of research and final approval, study supervision.

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Figure 2 Repeat Minor test, after treatment



Obtained after the patient chewed gum for 1 minute.

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Disclosure

The authors report no disclosures relevant to the manuscript. Go to [Neurology.org/N](https://www.neurology.org/N) for full disclosures.

Reference

1. Jansen S, Jerowski M, Ludwig L, Fischer-Krall E, Beutner D, Grosheva M. Botulinum toxin therapy in Frey's syndrome: a retrospective study of 440 treatments in 100 patients. *Clin Otolaryngol* 2017;42:295–300.

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