# Teaching Video NeuroImage: Uncommon Neuroophthalmic Finding in a Patient With Miller Fisher Syndrome and Past SARS-CoV-2 Infection

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A 21-year-old woman developed diplopia, rhinolalia, and movement imbalance 3 weeks after COVID-19. On neurologic examination, she presented with left mydriasis, mild bilateral lateral rectus palsy, and horizontal gaze-evoked eyelid nystagmus (Video 1). The patient's generalized hyporeflexia and ataxic gait were consistent with symptoms of Miller Fisher syndrome (MFS). A test for GQ1b antibodies returned positive. Despite immunoglobulin therapy, the patient developed respiratory failure requiring mechanical ventilation. The symptoms improved over the succeeding days. MFS has been associated with COVID-19, but this is the first case with positive GQ1b antibodies. Eyelid nystagmus is an intermittent upward jerking of eyelids associated with posterior fossa lesions that can also be present in MFS.

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#### **Disclosure**

The authors report no disclosures relevant to the manuscript. Go to Neurology.org/N for full disclosures.

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# **Appendix** Authors

Name	Location	Contribution
Aldo F. Costa, MD	Department of Neurology, Universitary Hospital Reina Sofia, Córdoba, Spain	Drafting/revision of the manuscript for content, including medical writing for content, major role in the acquisition of data, study concept or design, and analysis or interpretation of data
Alba Rodríguez, MD	Department of Neurology, Universitary Hospital Reina Sofia, Córdoba, Spain	Drafting/revision of the manuscript for content, including medical writing for content, major role in the acquisition of data, study concept or design, and analysis or interpretation of data

# **Appendix** (continued)

Name	Location	Contribution
Paula Martínez, MD	Department of Neurology, Universitary Hospital Reina Sofía, Córdoba, Spain	Drafting/revision of the manuscript for content, including medical writing for content, and analysis or interpretation of data
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