

Persistent Neuropathic Pain After Chikungunya Fever: A Biopsy-Confirmed Case of Post-Viral Small Fiber Neuropathy

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Introduction

Chikungunya fever typically causes acute febrile arthralgia, but chronic neuropathic pain syndromes post-infection are rare and diagnostically challenging. This case highlights post-viral small fiber neuropathy (SFN) causing refractory neuropathic pain and emphasizes the need for multidisciplinary care.

Case Description

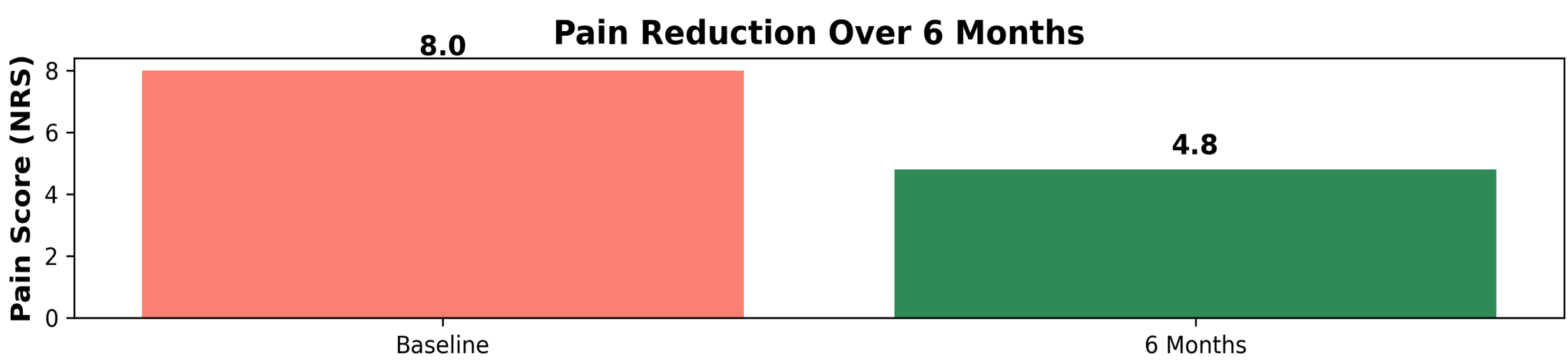
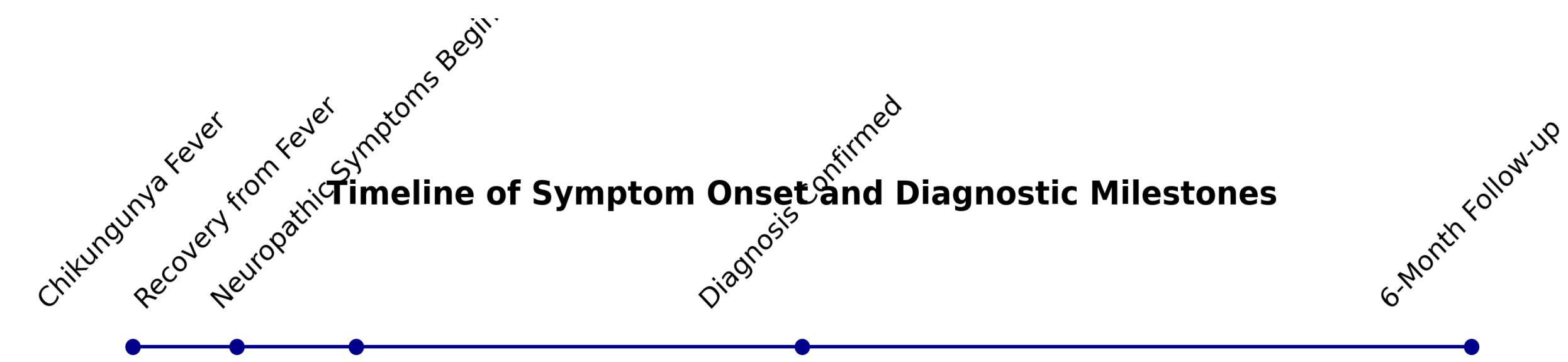
- Patient: 42-year-old previously healthy woman.
- Timeline:
 - Acute Chikungunya fever resolved in 2 weeks.
 - Neuropathic symptoms (burning pain, dysesthesia, allodynia) began 1 month later.
- Diagnostics:
 - Normal labs, imaging, and nerve conduction studies.
 - Quantitative sensory testing: thermal hypoesthesia.
 - Skin punch biopsy: confirmed SFN with reduced intraepidermal nerve fiber density.
- Treatment:
 - IV lidocaine infusions, structured desensitization therapy, TENS, and interdisciplinary care.

Results

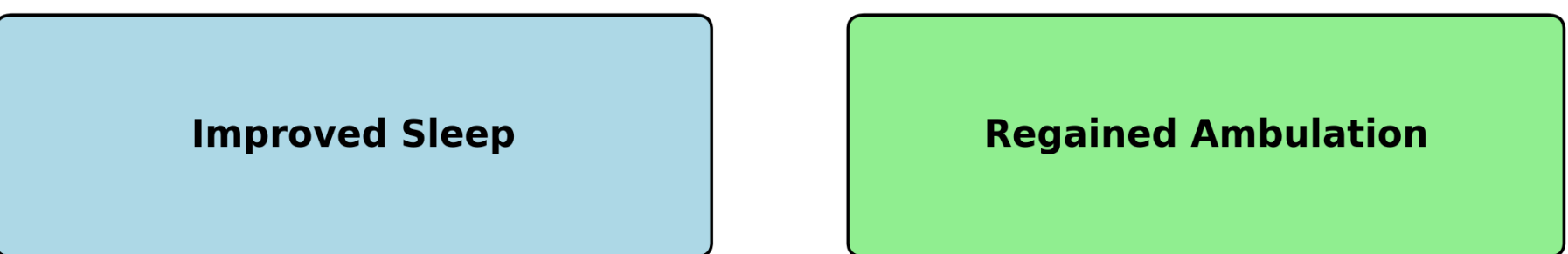
- After 6 months of multimodal management:
 - ~40% pain reduction on Numeric Rating Scale.
 - Improved sleep quality.
 - Regained ambulatory ability with supportive devices.
- Neuropathic symptoms persisted, requiring ongoing therapy.

Discussion

This case demonstrates a rare, biopsy-confirmed SFN after Chikungunya fever. Conventional electrodiagnostic studies were normal, delaying diagnosis until advanced sensory testing and biopsy. Differentiating persistent arthralgia from neuropathic pain is critical. Early recognition and multidisciplinary management improve outcomes.



Clinical Outcomes



Conclusions

Post-viral SFN can lead to chronic neuropathic pain. Comprehensive diagnostic workup and multimodal therapy are essential for functional recovery.

Contact

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