

# Cranial mononeuropathies

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# Learning objectives

- Olfactory nerve (CN 1)
  - COVID -19
  - Neurodegenerative disease (e.g. Parkinson's disease)
  - Structural (e.g. superficial siderosis)
- Trigeminal nerve (CN 5)
  - TG neuropathy
  - Facial onset sensory motor neuropathy/neuronopathy (FOSM)
  - Roger's sign
- Facial nerve (CN VII)
  - Ramsey Hunt syndrome
  - Bilateral facial weakness
  - Partial facial weakness (e.g. leprosy)
  - Taste disorder (chorda typani)
- Vestibulo-cochlear nerve (CN VIII)
  - CANVAS (Cerebellar ataxia, neuropathy, vestibular abnormality syndrome)
- Accessory nerve (CN XI)
  - Neck flexion weakness – useful sign in differential diagnosis

## Key Message

- Clinical assessment of the cranial nerves remains an essential aspect of the neurological consultation.
- Abnormalities of smell and vestibular function maybe harbingers and clues to neurodegenerative and genetic disorders such as Parkinson's Disease and CANVAS (which is now recognized as the commonest cause of recessive ataxia) .

## References

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