Meningism

Meningism is a set of <u>symptoms</u> similar to those of <u>meningitis</u> but not caused by meningitis. [1][3][4] Whereas meningitis is <u>inflammation</u> of the <u>meninges</u> (membranes that cover the central nervous system), meningism is caused by nonmeningitic irritation of the meninges, usually associated with acute <u>febrile</u> illness, [1][2]

Meningism	
Other	Meningismus, ^{[1][2]}
names	pseudomeningitis ^{[1][3]}

especially in children and adolescents.^[2] Meningism involves the triad (3-symptom <u>syndrome</u>) of nuchal rigidity (neck stiffness), <u>photophobia</u> (intolerance of bright light) and <u>headache</u>. It therefore requires <u>differentiating</u> from other CNS problems with similar symptoms, including meningitis and some types of <u>intracranial hemorrhage</u>. Related clinical signs include <u>Kernig's sign</u> and three signs all named <u>Brudzinski's sign</u>.

Although <u>nosologic</u> coding systems such as ICD-10 and MeSH define meningism/meningismus as meningitis-like but in fact not meningitis, many physicians use the term "meningism" in a loose <u>sense</u> clinically to refer to any meningitis-like set of symptoms *before the cause is definitively known*. In this sense, the word implies "suspected meningitis". The words "meningeal symptoms" can be used instead to avoid confusion between the <u>word senses</u>, thus reserving the term "meningism" for its strict sense. Readers of the medical literature should remain aware that the words are used in more than one sense.

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Signs and symptoms

The main clinical signs that indicate meningism are *nuchal rigidity*, *Kernig's sign* and *Brudzinski's signs*. None of the signs are particularly sensitive; in adults with meningitis, nuchal rigidity was present in 30% and Kernig's or Brudzinski's sign only in 5%.^[5]

Nuchal rigidity

Nuchal rigidity is the inability to flex the <u>neck</u> forward due to rigidity of the neck muscles; if flexion of the neck is painful but full range of motion is present, nuchal rigidity is absent.

Kernig's sign

Kernig's sign (after <u>Waldemar Kernig</u> (1840–1917), a <u>Russian</u> neurologist) is positive when the thigh is flexed at the hip and knee at 90 degree angles, and subsequent extension in the knee is painful (leading to resistance). [6] This may indicate subarachnoid hemorrhage or meningitis. [7] Patients may also show <u>opisthotonus</u>—spasm of the whole body that leads to legs and head being bent back and body bowed forward.

Brudzinski's signs

<u>Jozef Brudzinski</u> (1874–1917), a <u>Polish</u> pediatrician, is credited with several signs in meningitis. The most commonly used sign (<u>Brudzinski's neck sign</u>) is positive when the forced <u>flexion</u> of the neck elicits a reflex flexion of the hips, with the patient lying supine. [5][8]

Other signs attributed to Brudzinski:^[9]



Positive Kernig's sign in cerebrospinal meningitis

- The symphyseal sign, in which pressure on the <u>pubic</u> symphysis leads to abduction of the leg and reflexive hip and knee flexion.^[10]
- The cheek sign, in which pressure on the cheek below the <u>zygoma</u> leads to rising and flexion in the forearm.^[10]
- Brudzinski's reflex, in which passive flexion of one knee into the abdomen leads to involuntary flexion in the opposite leg, and stretching of a limb that was flexed leads to contralateral extension.^[11]

See also

- Meningitis
- Meningoencephalitis

References

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External links

- FPnotebook page on meningeal signs (https://web.archive.org/web/20070916034418/http://www.fpnotebook.com/NEU97.htm)
- Image of Kernig's sign (https://www.nlm.nih.gov/medlineplus/ency/imagepages/19077.htm)

Classification ICD-10: R29.1 (htt D p://apps.who.int/cla ssifications/icd10/br owse/2016/en#/R2 9.1) · ICD-9-CM: 781.6 (http://www.ic d9data.com/getICD 9Code.ashx?icd9=7 81.6) · MeSH: D008580 (https://w ww.nlm.nih.gov/cgi/ mesh/2015/MB cg i?field=uid&term=D $008580) \cdot$ DiseasesDB: 29490 (http://www.d

> iseasesdatabase.co m/ddb29490.htm)

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