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M E D I C I N E

Diagnosis of Conditions Mimicking Neurological Disease

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Disclosures



- FDA disclosure
 - No FDA disclosures to report
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Introduction:

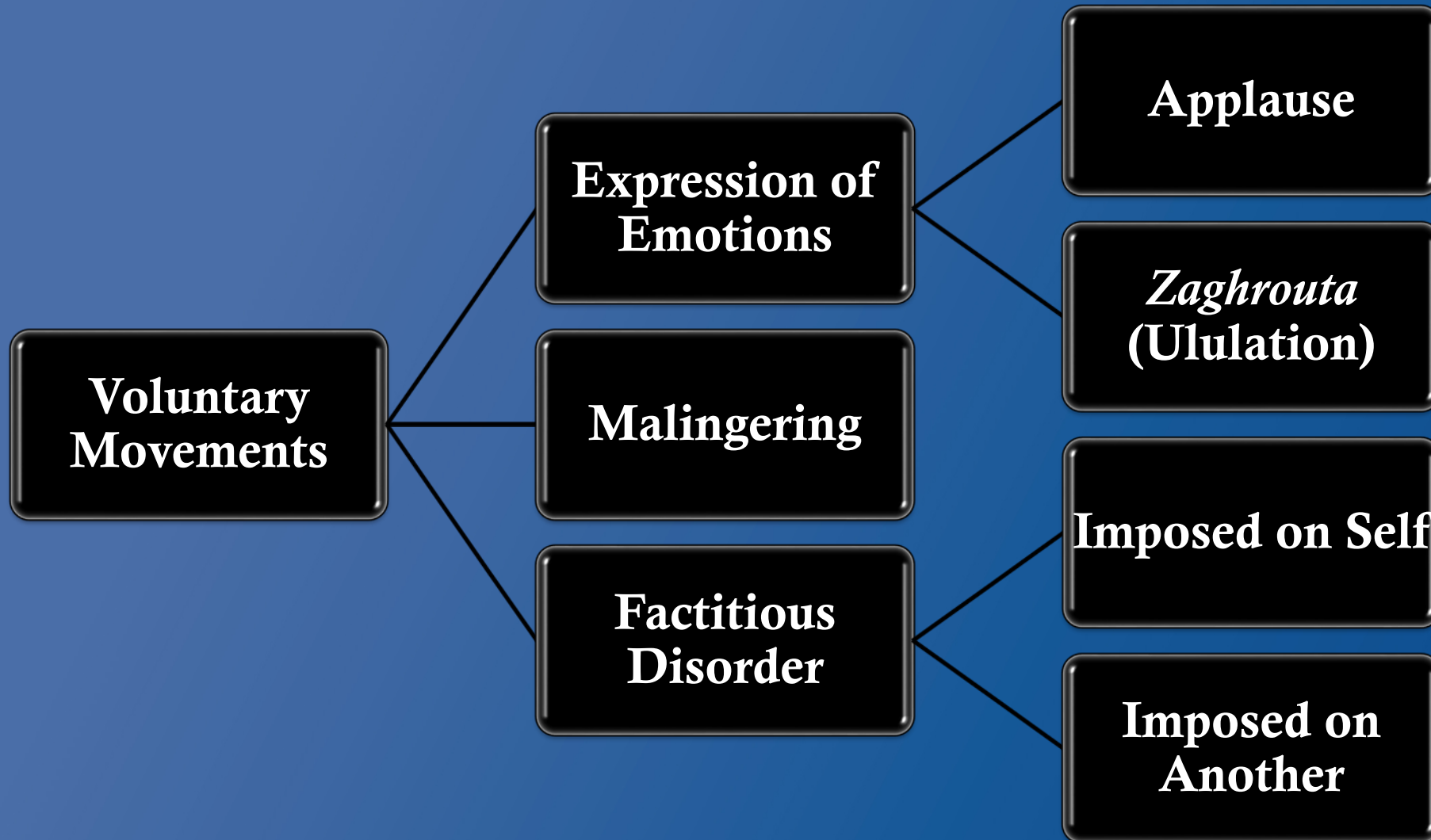


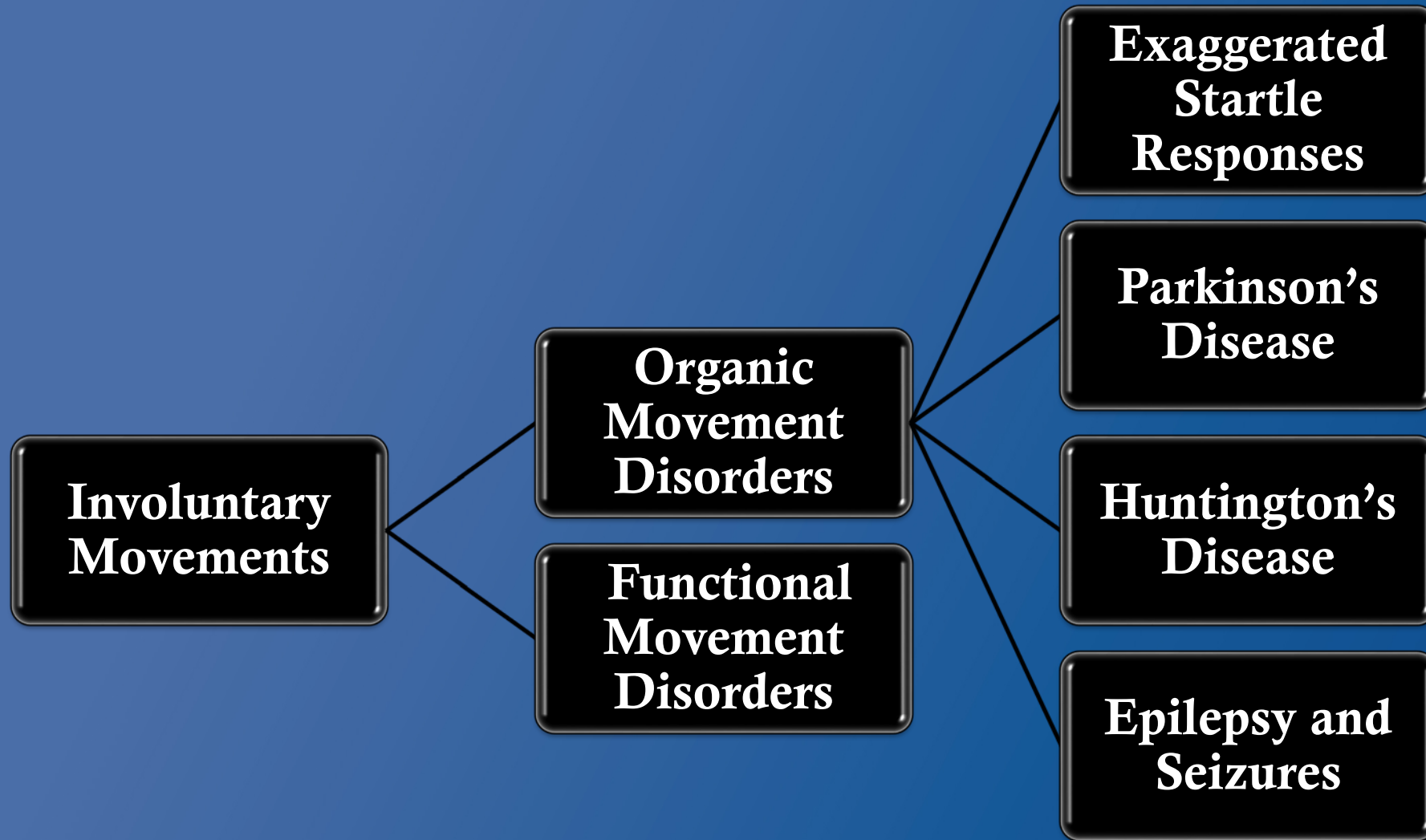
- A vexing problem for clinicians in the emergency department is the presentation of a patient who exhibits the symptoms and signs of neurological disease that merit immediate life-saving interventions.
- Clinicians must consider conditions without apparent pathology that resemble neurological disease requiring urgent care.

Method:



- Reviewing the literature on conditions displaying symptoms and signs that resemble neurological disease.
- Producing a framework to character traits to differentiate neurological disease and mimics.







- **Malingering:**
is the deliberate fabrication of symptoms and signs for specific rewards, such as getting out of school, work, or jail, and getting disability compensation payments.
- **Factitious Disorder:**
is the fabrication of symptoms and signs to obtain medical attention.



There are two subtypes of **factitious disorder**:

- **Imposed on self:**

is characterized by the patient's fabricating symptoms and signs about their own false medical status.

- **Imposed on another:**

is characterized by the patient's fabricating symptoms and signs about the false medical status of another person. An example is a parent's reporting false symptoms and signs for an infant who cannot communicate. This must be recognized as child abuse.

-Each subtype of factitious disorder results in unnecessary diagnostic and therapeutic interventions. By recognizing factitious disorder providers recognize that dangerous tests and surgeries can be aborted.



An example:

- *Zaghrouta* is a long, wavering, high-pitched vocal unique sound resembling a howl with a trilling quality accompanied with a rapid side to side movement of the tongue; then one hand is held over the mouth to make it louder.
- *Zaghrouta* is an entirely voluntary action performed by women in almost every traditional wedding and special parties to express strong emotions and show happiness in the middle east.
- Bereitschaftspotential or contingent negative variation is a slow negative electroencephalographic signal before self-initiated movement that may help to decide if an activity is voluntary or involuntary.

Importance



- Neurological disease should be differentiated from voluntary movement including emotional expressions such as *zaghrouta* (ululation) and fabricated conditions, such as malingering and factitious disorder.
- Understanding cultural background is crucial to identify benign voluntary movements.



How to differentiate?

- Comprehensive history
- Clinical exam
- Trying to identify any falsified signs or hidden motivations
- Understanding normal behavior to express emotions in different cultures and context
- Laboratory examination
- Electrophysiological and motion measurements



Conclusions:

- Recognition of specific characteristics of neurological disease and resembling conditions without an apparent pathological basis is essential to the accurate diagnosis and treatment of patients who present with symptoms and signs suggesting neurological disease.
- The application of proper diagnostic and comprehensive assessments will help avoidance of unnecessary tests and procedures.

Thank You!

For any questions



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