31st ANNUAL CONFERENCE OF ANDHRA PRADESH NEURO SCIENTISTS ASSOCIATION
APNEUROCON 2024 GUNTUR

A CASE OF FORGOTTEN INFECTIOUS DISEASE

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INTRODUCTION

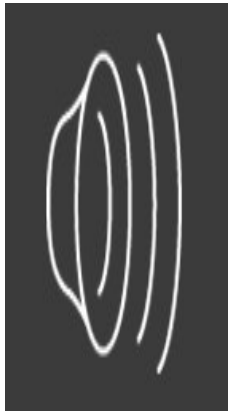
Pediatric tetanus is a rare and forgotten disease in countries with high childhood tetanus toxoid vaccination rates. Tetanus is one of the diseases prevented by vaccines and is not transmitted from person to person. As a result of higher childhood tetanus toxoid vaccination rates, tetanus incidence has significantly decreased in recent years.

AIMS / OBJECTIVES

Herein, we describe an unimmunized patient, a 4 -year-old boy, diagnosed with generalized tetanus who was successfully treated.

MATERIALS / METHODS

A 4 year old male child , born of non-consanguineous parentage, normal birth weight , cried immediately after birth, uneventful neonatal period, not vaccinated appropriately for age, no H/O fever/dog bite, presented with trismus, rigidity of the jaw muscles(risus sardonicus), and sustained generalized stiffness ,asthenia , stimulus induced painful spasms of 1 week duration predominantly in the trunk/lower limbs which parents observed as stiff/tight body during episodes while lying on the bed and abnormal gait while walking . As the patient was unimmunized, tetanus infection was suspected based on clinical signs and symptoms.



RESULTS & DISCUSSION

Child was treated with tetanus immunoglobulin,metronidazole and diazepam,muscle stiffness and spasms decreased significantly.
A single dose of antitoxin (3,000 U , i.m of tetanus human immune globulin) was given.
A 10-day course of metronidazole was given.
Diazepam was started on weight basis till the spasms subsided.
The patient was advised and started on tetanus vaccination according to schedule
The cause of this disease is the anaerobic, spore-forming rod **Clostridium tetani**. There is centripetal migration of the tetanus toxin **(tetanospasmin)** , via the peripheral nerves, in the axis cylinders or the perineural sheaths – Local tetanus. Modern studies, using fluorescein-labeled tetanus antitoxin, have disclosed that the toxin is also widely disseminated via blood or lymphatics - generalized form of the disease. The tetanus toxin is a zinc-dependent protease. Tetanus is typically classified into four groups: generalized, localized, cephalic, and neonatal. The diagnosis is primarily based on clinical evaluation. The toxin interferes with the function of the reflex arc by the blockade of inhibitory transmitters, mainly GABA, at presynaptic sites in the spinal cord and brainstem. The Renshaw cell, the source of recurrent inhibition of spinal and brainstem motor neurons, is preferentially affected.

CONCLUSION

Don’t forget the forgotten infective diseases . Many a times anteceded infections may not be apparent . Emphasizes the importance of vaccination and educating the masses regarding the same. Generalized tetanus has become one of the forgotten infectious diseases thanks to universal vaccination with the tetanus toxoid.