

RELAPSING MENINGITIS - A RETROSPECTIVE STUDY

Doina Țăulescu, D.Cârșina, Nadia Sașcă

Clinic of Infectious Diseases,
University of Medicine and Pharmacy, Cluj-Napoca

This study presents the result, in a 17 year's period, on relapsing meningitis that has been hospitalised in our Clinic hospital. The study's goal was the specific (clinic and therapeutic) features that would permit to avoid the relapsing in meningitis. In this interval, there were 31 cases with relapsing meningitis, presenting a number of 66 relapsing events; two patients died in a such episode. Etiologically, the majority were pneumococcal meningitis (19 patients, 61,3%), 9 cases (29,05%) were meningococcal, the remaining cases were staphylococcal and E.coli (1 case) and one (with double relapsing) with unidentified etiology. In five of relapsing events the etiology was double: pneumococcus + meningococcus, or H.influenzae or E.coli or B.Koch (in two cases). In cases with pneumococcal etiology relapsing have been significant (6..10 events) if, following a craniocerebral trauma (TC-C) a fracture line (15 cases) or subdural fistula accompanied by CSF effusion and rhinorhea (7 cases) have appeared. In the cases with meningococcal etiology, relapsing occurred either with different serogroups or following an unknown bacterial meningitis. The patients received treatment with Penicillin G, Ampicillin or antibiotics in association (according to the antibiogram). The occurrence of relapsing under on year requires strict adherence to the therapeutic schedule (21-30 days) and repeating the lumbar puncture. The small number of the cases studied lends to the analysis presented an orienting role, with predictive value.