

Meige's syndrome

- Abnormal brain networks in Meiges syndrome based on centrality analysis and functional network connectivity: a cross-sectional analysis
- Development and validation of predictive models for meige syndrome patients based on oxidative stress markers
- Progressive gray matter alterations in the Meige's syndrome and across sub-types
- Subthalamic Nucleus Oscillatory Characteristics in Meige, Cervical Dystonia and Generalized Dystonia
- CT-guided extracranial radiofrequency of multiple groups of cranial nerves for the treatment of compound Meige's syndrome
- Clinical outcomes and prognostic factors in patients with primary Meige syndrome undergoing subthalamic nucleus deep brain stimulation: a retrospective study of 65 cases
- Experience of the application of botulinum toxin type A as a treatment of facial hyperkinetic disorders in a Mexican ophthalmological center
- Putaminal-cortical circuits predict response of bilateral deep brain stimulation of the subthalamic nucleus in the primary Meige syndrome after 5 years

Meige's [syndrome](#) is a segmental form of [dystonia](#). It is also known as Brueghel's syndrome and oral facial dystonia.

Named after Henri Meige, the French neurologist who first described the symptoms in detail in [1910](#) ¹⁾

The incidence is about one case in 20,000 people.

Meige's syndrome and [hemifacial spasm](#) (HFS) are two different forms of dystonic [movement disorder](#), but their difference in terms of [resting state functional connectivity](#) (rsFC) remains unclear. Chen et al. applied resting state [fMRI](#) on the patients and quantified their [functional connectivity](#) with graph theoretical measures, including the degree centrality and the betweenness centrality. Fifteen Meige's syndrome patients and 19 HFS patients matched in age and gender were recruited and their MRI data were collected. To analyze the rsFC, they adopted the Anatomical Automatic Labeling (AAL) template, a [brain atlas](#) system including 90 [region of interest](#) (ROIs) covering all the brain regions of the [cerebral cortex](#). For each participant, the time course of each ROI was extracted, and the corresponding degree centrality and betweenness centrality of each ROI were computed. These measures were then compared between the Meige's syndrome patients and the HFS patients. Meige's syndrome patients showed higher betweenness centrality and degree centrality of the bilateral superior medial frontal cortex, the left cerebellum cortex, etc. than the HFS patients. Our results suggest that the rsFC pattern in Meige's syndrome patients might become more centralized toward the [prefrontal](#) and vestibular cerebellar systems, indicating less flexibility in their functional connections. These results preliminarily revealed the characteristic abnormality in the [functional connectivity](#) of Meige's patients and may help to explore better treatment ²⁾.

Clinical features

Primary Meige [syndrome](#) is characterized by [blepharospasm](#) and orofacial-cervical dystonia: [hemifacial spasm](#) with oral movements.

The symptoms usually begin between the ages of 30 and 70 years old and appear to be more common in women than in men (2:1 ratio). The combination of upper and lower dystonia is sometimes called cranial-cervical dystonia.

Treatment

[Meige's syndrome treatment](#).

1)

<http://www.whonamedit.com/doctor.cfm/587.html>

2)

Chen H, Deng K, Zhang Y, Jiang X, Wang Y. Higher betweenness and degree centrality in the frontal and cerebellum cortex of Meige's syndrome patients than hemifacial spasm patients. *Neuroreport*. 2023 Feb 1;34(2):102-107. doi: 10.1097/WNR.0000000000001865. Epub 2022 Dec 17. PMID: 36608166.

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