



Are systemic clinical symptoms like low-grade fever, malaise, fatigue and loss of weight important in the diagnosis of spinal tuberculosis?



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Why is this topic Important

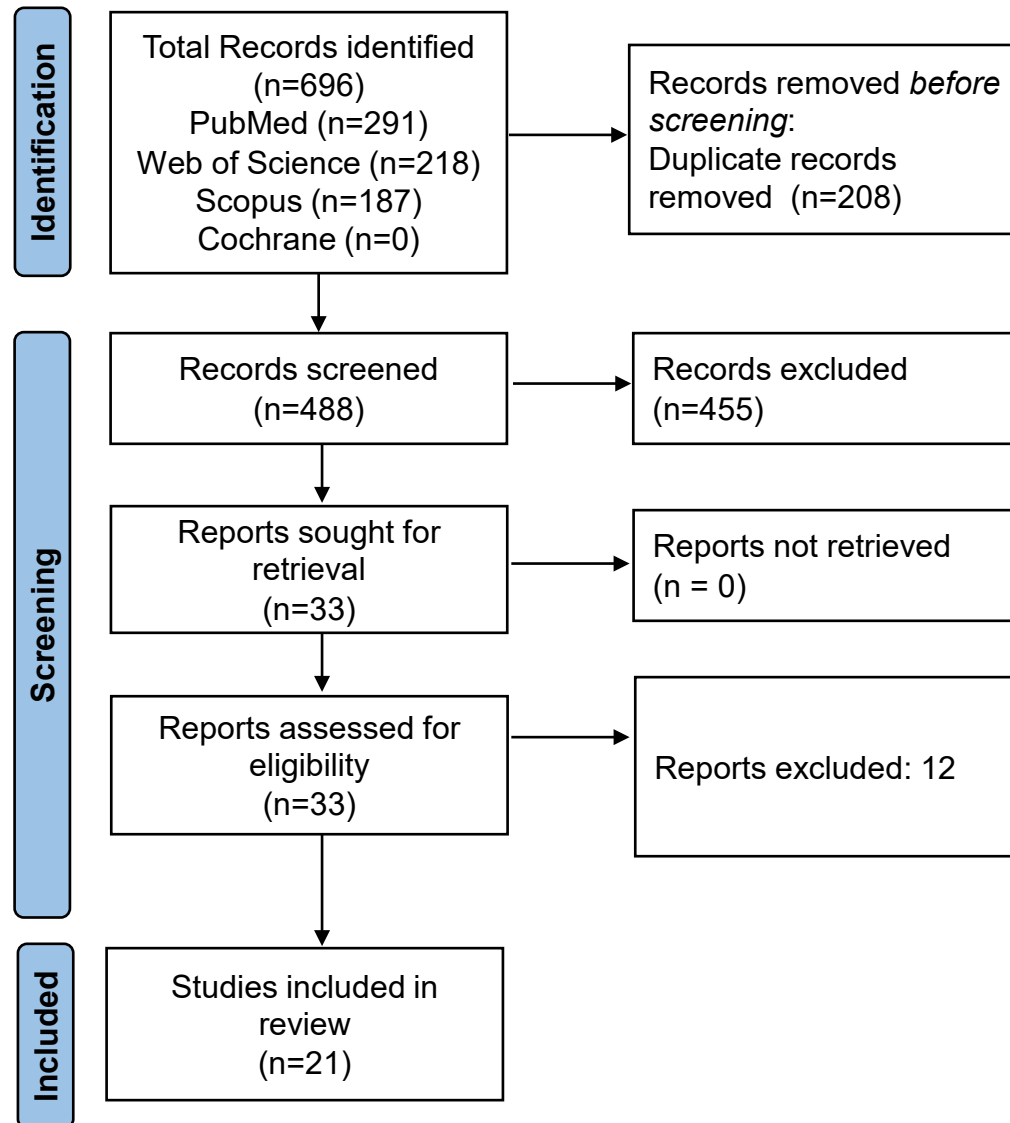
- Spinal tuberculosis often presents with subtle, nonspecific systemic signs before local symptoms like back pain or neurological deficits become prominent.
- Recognizing these early indicators can aid in timely diagnosis and intervention, preventing severe complications like spinal deformities or neurological impairment.
- Awareness of these signs is essential, as delayed diagnosis can lead to significant morbidity.



Literature Review/ Process



Scopus





Findings from Literature

- Back pain- 70.4 -100% prevalence (median values over 90%)
- Fever- 25- 35% prevalence (one study from Iran shows upto 80%)
- Loss of weight- mean prevalence is in the 30% range (Outliers are the Pakistan study of 96.7%)
- Night sweats- mean of 25% (highest is from Tunisia 74.6%)
- Neurological deficits - mean 44% (wide variability upto 77.1% from Taiwan)



Findings from Literature-Temporal variabilities

- Older studies (1977) reported a higher frequency of constitutional symptoms.
- Newer studies (2018 and 2021) report rare constitutional symptoms.
- Neurological deficits are rare in the newer studies (1.4%)



Question:

❖ Are systemic clinical symptoms like low-grade fever, malaise, fatigue, and loss of weight important in diagnosing spinal tuberculosis?



Response:

- ❖ **Yes, Constitutional symptoms are important but does not play a definitive diagnostic role in spinal TB.**



❖ **Vote:**

Agree – 100%, Disagree – 0%, Abstain – 0% (Unanimous Consensus)