

The first description of FMF in medical literature before it was officially named.

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BENIGN PAROXYSMAL PERITONITIS *

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THE purpose of this paper is to describe in detail an unusual clinical syndrome which is at present little understood and often undiagnosed. The characteristics of this disorder are constant and distinctive.

The syndrome is characterized by recurrent paroxysms of severe abdominal pain with fever which may be as high as 105° F. Chilliness or a shaking chill may accompany the attacks. Involvement of the peritoneum is indicated by the subjective symptom of marked abdominal soreness and the objective finding of widespread, exquisite direct and rebound tenderness. On occasion true involuntary spasm of the abdominal wall may be noted. These abdominal signs are often so striking that to the surgeon they suggest an acute abdominal peritonitic lesion. Emergency operation has been repeatedly urged.

Chest pain of a pleuritic type is frequently present at some stage of the attack. Marked malaise, severe prostration, intense nausea and vomiting are almost constant characteristics. Diarrhea is conspicuously absent. Leukocytosis is a frequent finding. An occasional case may show urticarial wheals during the acute episode. This disease affects young people, often beginning in the second or third decade and continuing for many years. Nevertheless, they remain in good general health and their disorder, essentially benign, continues without the development of any persistent anatomical lesion and without permanent impairment of any physiologic function.

Although cases of an essentially similar nature have been previously described, emphasis has heretofore been laid upon the florid manifestations of erythema and purpura. This has tended to obscure the fundamental clinical picture of a disease which usually runs its course without skin eruption of any kind and with no bleeding tendency whatsoever. To draw attention to its distinctive clinical features, the term "benign paroxysmal peritonitis" is suggested until such time as classification becomes possible on a sound etiologic or pathologic basis.

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