

# TRAIDS

# COMPILED



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**INICET FMGE**

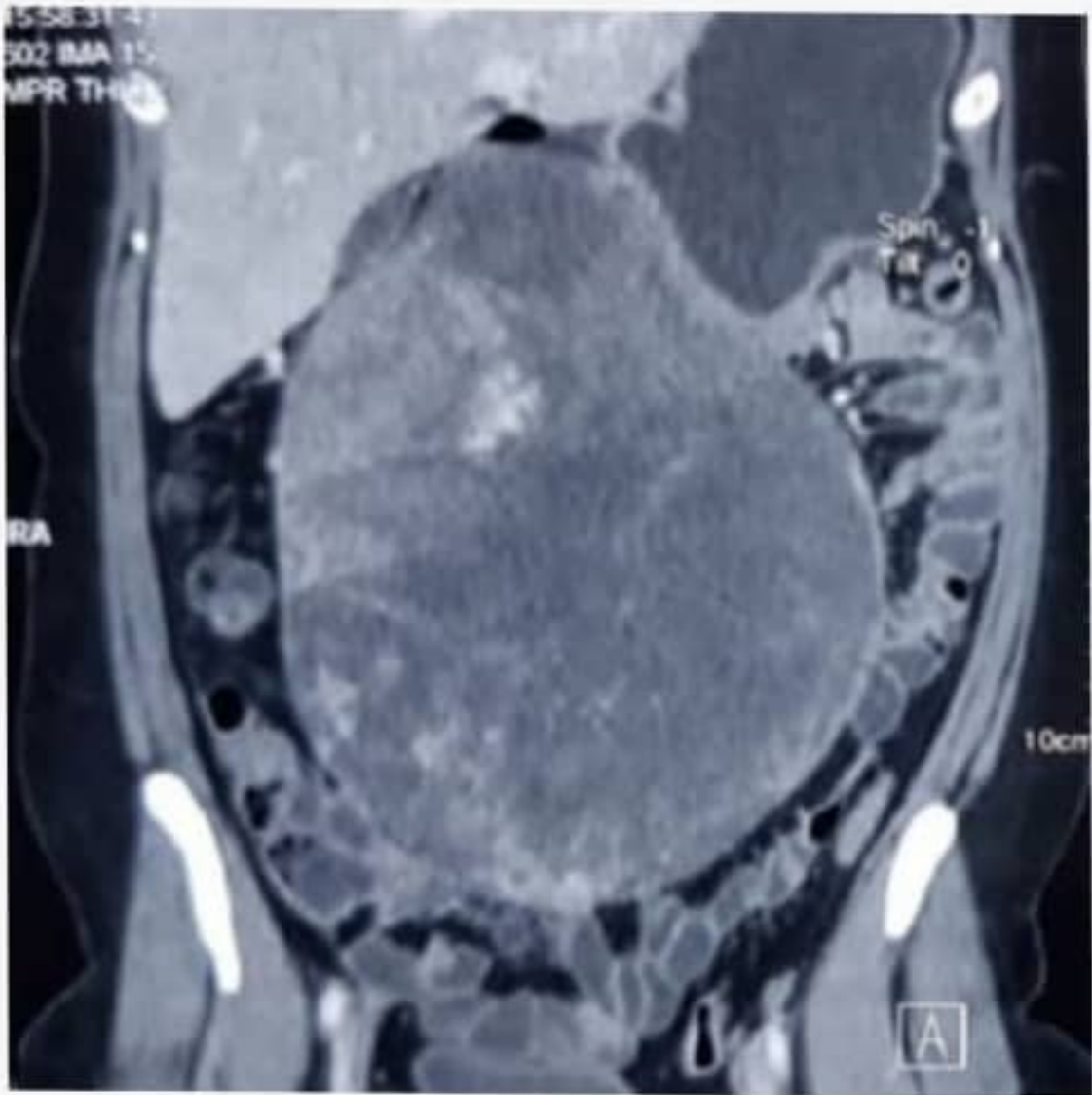
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# Tetany in children

1. Stridor
2. Carpo pedal spasm
3. Convulsions





## Carneys triad

1. Pulmonary Chordoma
2. Para Ganglioma
3. Gastric Fibroid



## PRIMARY ANGLE-CLOSURE GLAUCOMA

### CLINICAL MANIFESTATIONS:

#### FIVE DIFFERENT CLINICAL ENTITIES

##### POSTCONGESTIVE ANGLE-CLOSURE GLAUCOMA

- VOGT'S TRIAD → seen with any type of post-congestive glaucoma & in treated acute congestive glaucoma:
  - CLAUCOMFLECKEN → an anterior sub-capsular lenticular opacity
  - PATCHES OF IRIS ATROPHY
  - SLIGHTLY DILATED NON-REACTING PUPIL → due to sphincter atrophy

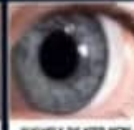
### VOGT'S TRIAD



GLAUCOMFLECKEN



PATCHES OF IRIS ATROPHY



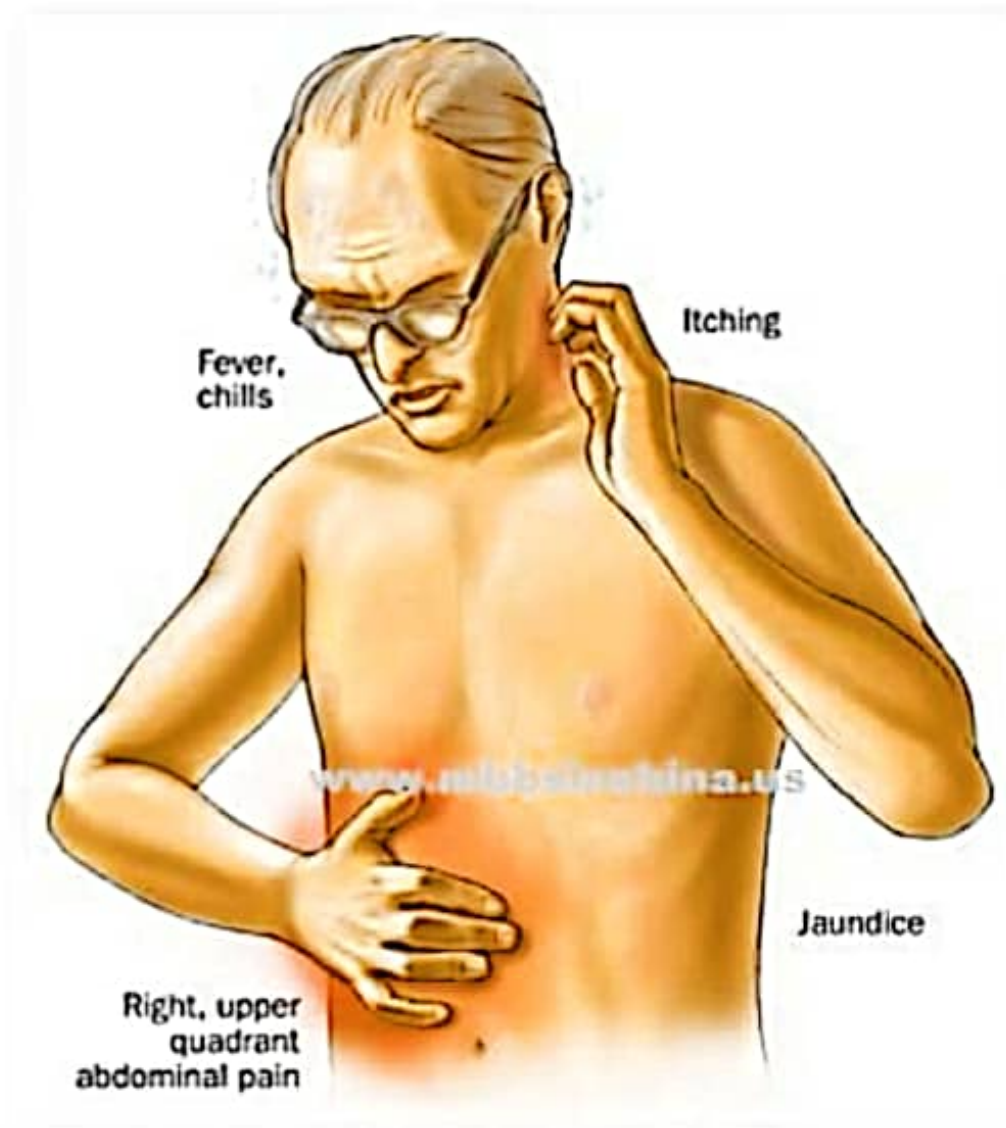
SLIGHTLY DILATED NON-REACTING PUPIL

## Vogts triad

1. In tuberous sclerosis
  - A. Facial nevus (adenoma sebaceum)
  - B. Seizures
  - C. Mental insufficiency
2. In congenital glaucoma /buphthalmias (BPL)
  - A. Blepharospasm
  - B. Photophobia
  - C. Lacrimation
3. In congenital toxoplasmosis
  - A. Congenital cataract
  - B. Chorioretinitis
  - C. Cerebral calcification







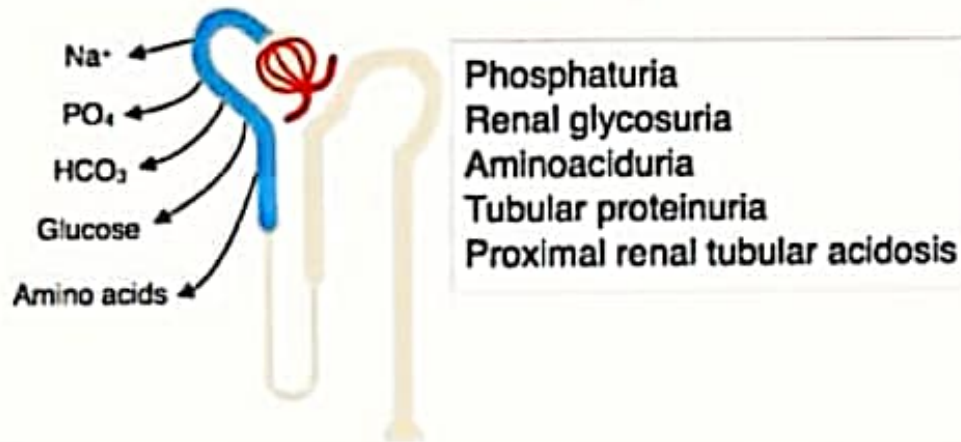
## Charcot's Neurologic Triad

1. scanning speech
2. intention tremor
3. nystagmus



# Fanconi Syndrome

↳ Global proximal tubule dysfunction



## Etiology

- Genetic diseases (Dent, Cystinosis, Wilson, Galactosemia)
- Acquired (Cisplatin, Heavy metals)

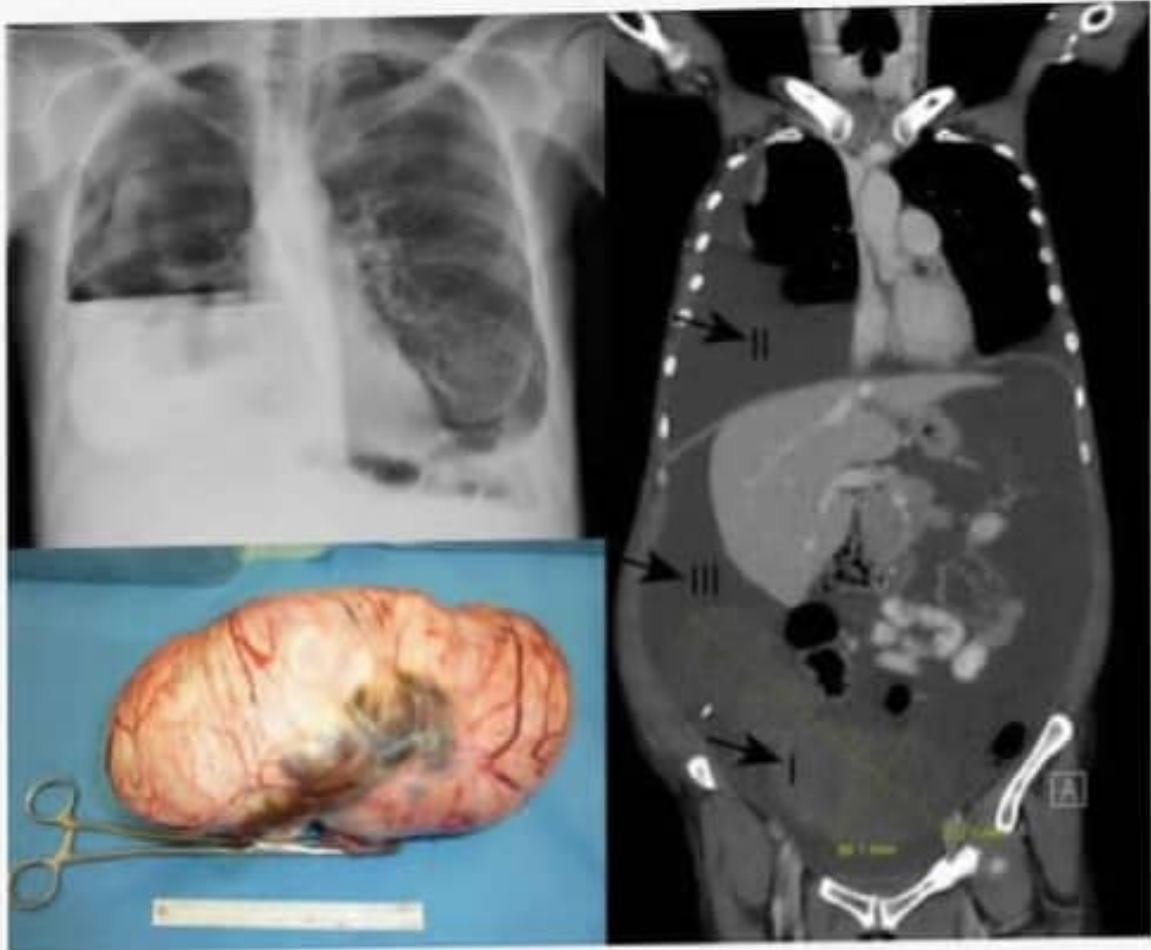
## Clinical

- Growth failure
- Hypovolemia
- Persistent acidosis
- Rickets and osteomalacia (hypophosphatemia)
- Constipation and weakness (hypokalemia)

## Fanconi syndrome triad

1. Aminoaciduria
2. Proteinuria
3. Phosphaturia

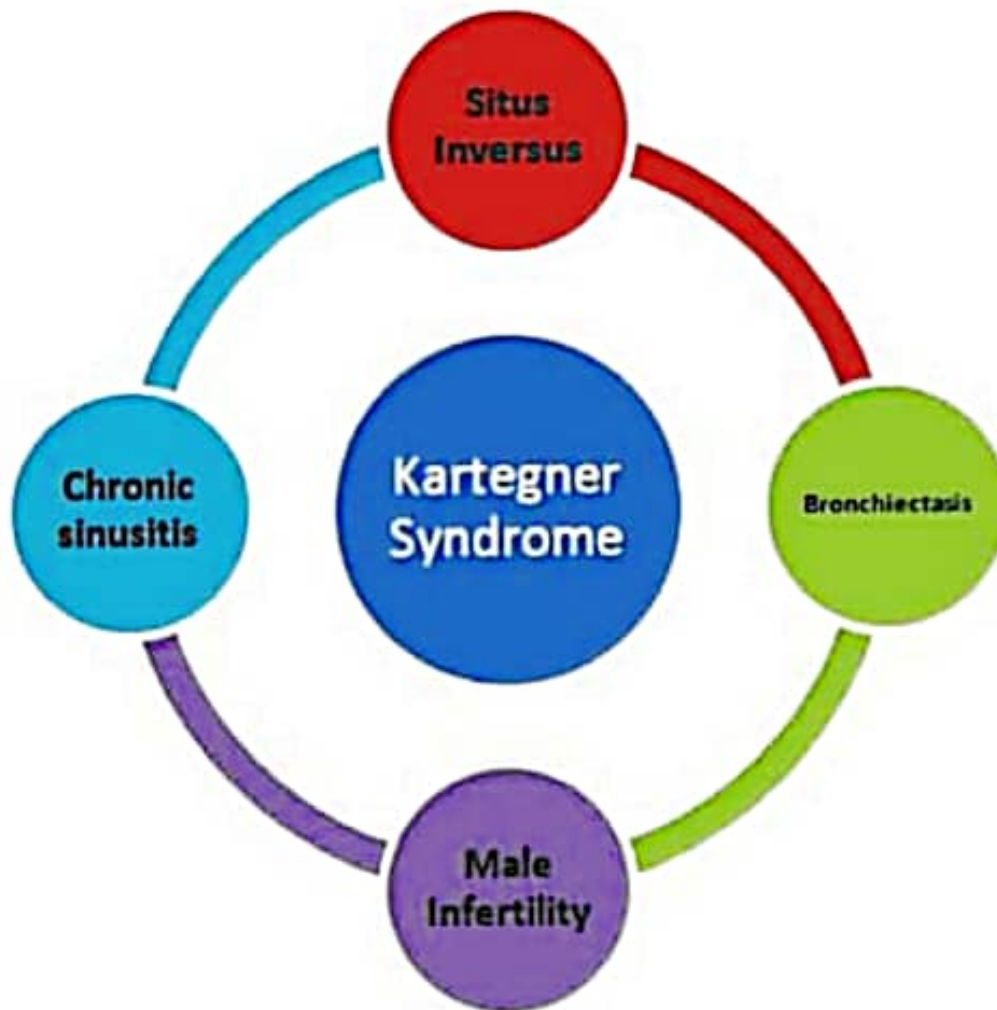




## Triad of Meigs' Syndrome

1. Ascites
2. Pleural effusion
3. Benign ovarian tumor





## Kartagener Syndrome Triad

1. Triad of bronchiectasis
2. Recurrent sinusitis
3. Situs inversus







# Hutchinson's Triad

1. Hutchison's teeth
2. Interstitial keratitis
3. Nerve deafness





## Hemolytic-Uremic Syndrome Triad

1. Anaemia
2. Thrombocytopenia
3. Kidney failure





Introducing

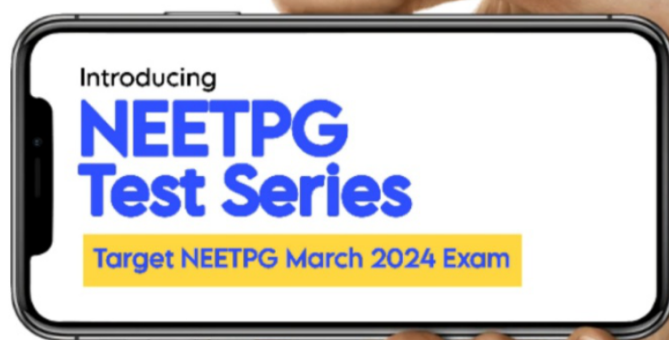
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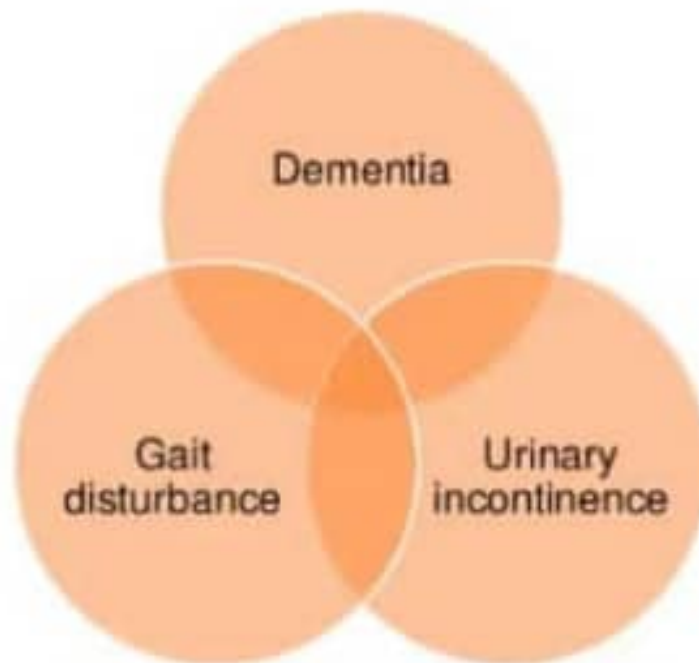
- ▶ Malena,
- ▶ •Obstructive jaundice,
- ▶ •Biliary colic.

## Triad of Sandblom

1. Malena
2. Obstructive jaundice
3. Biliary colic



THE CLASSIC CLINICAL TRIAD FIRST  
DESCRIBED BY HAKIM AND ADAMS IN 1965

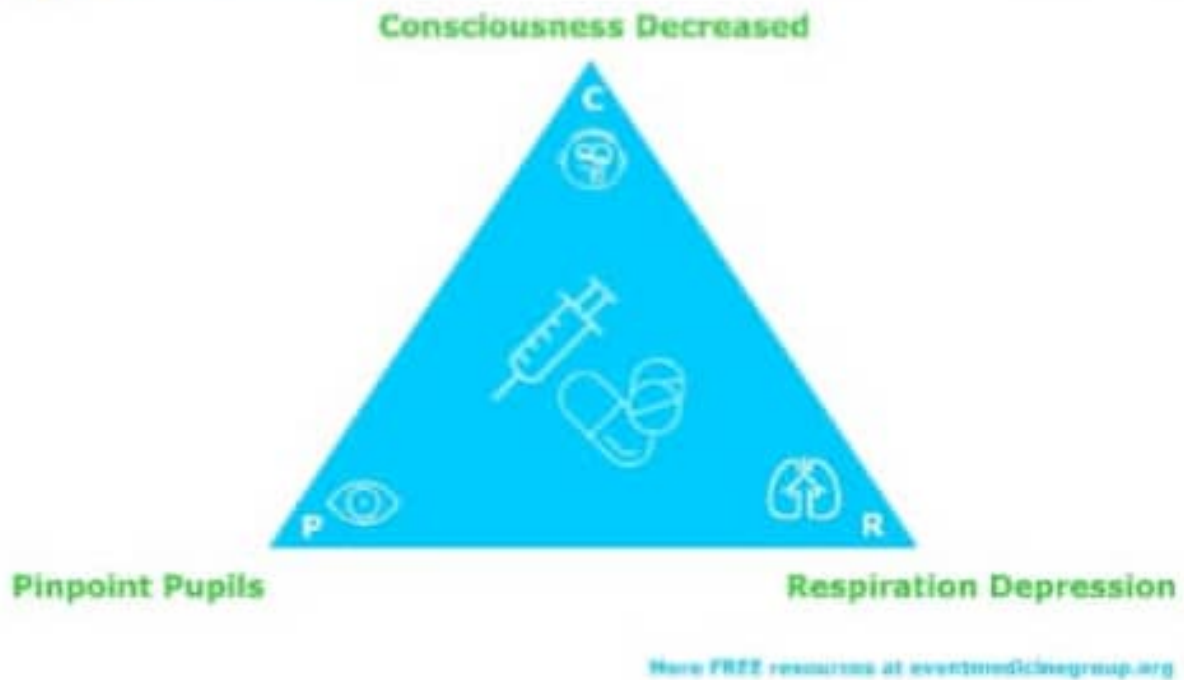


Hakim S, Adams RD. The syndromic problem of symptomatic hydrocephalus with normal cerebrospinal fluid pressure. Observations on cerebrospinal fluid hydrodynamics. *J Neurol Sci.* 1965;22:337-427.

# Hakim Triad

1. Urinary incontinence
2. Gait disturbance
3. Dementia





# Triad of opioid overdose

1. Respiratory depression
2. Pinpoint pupils
3. CNS depression





## The Classic Triad of Graves' Disease

- Hyperthyroidism (90%)
- Ophthalmopathy (20-40%)
  - ▢ proptosis, ophthalmoplegia, conjunctival irritation
  - ▢ 3-5% of cases require directed treatment
- Dermopathy (0.5-4.3%)
  - ▢ localized myxedema, usually pretibial
  - ▢ especially common with severe ophthalmopathy

There is also a close association with autoimmune findings (e.g. vitiligo) and other autoimmune diseases (e.g. ITP)

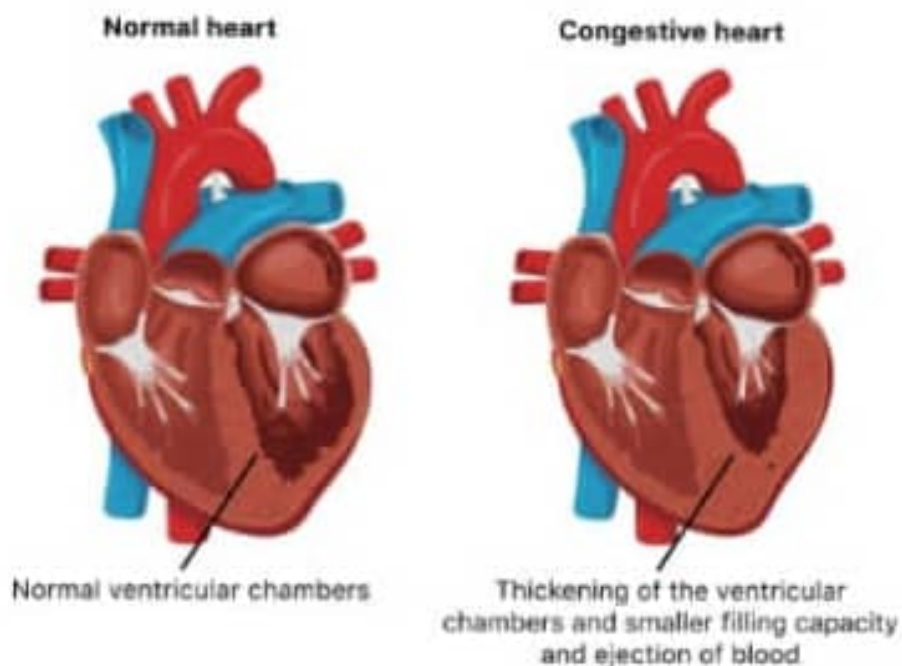
## Graves Disease Triad

1. Goiter
2. Exophthalmos
3. Pretibial myxedema





## Normal vs. Congestive Heart



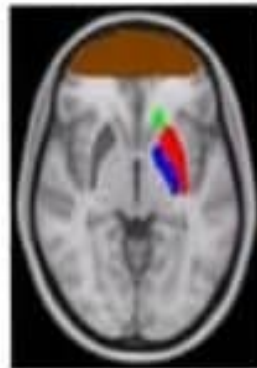
## Congestive Heart Failure Triad

1. Tachycardia
2. Tachypnea
3. Tender hepatomegaly



# Congenital Toxoplasmosis

- The consequences of the infection of the fetus can be very different: between subclinical and very serious.



- **Abortion** Overt disease. The symptoms vary widely, the **classical triad** of Congenital Toxoplasmosis is **Hydrocephalus**

- **Intracranial calcification**
- **Chorioretinitis**

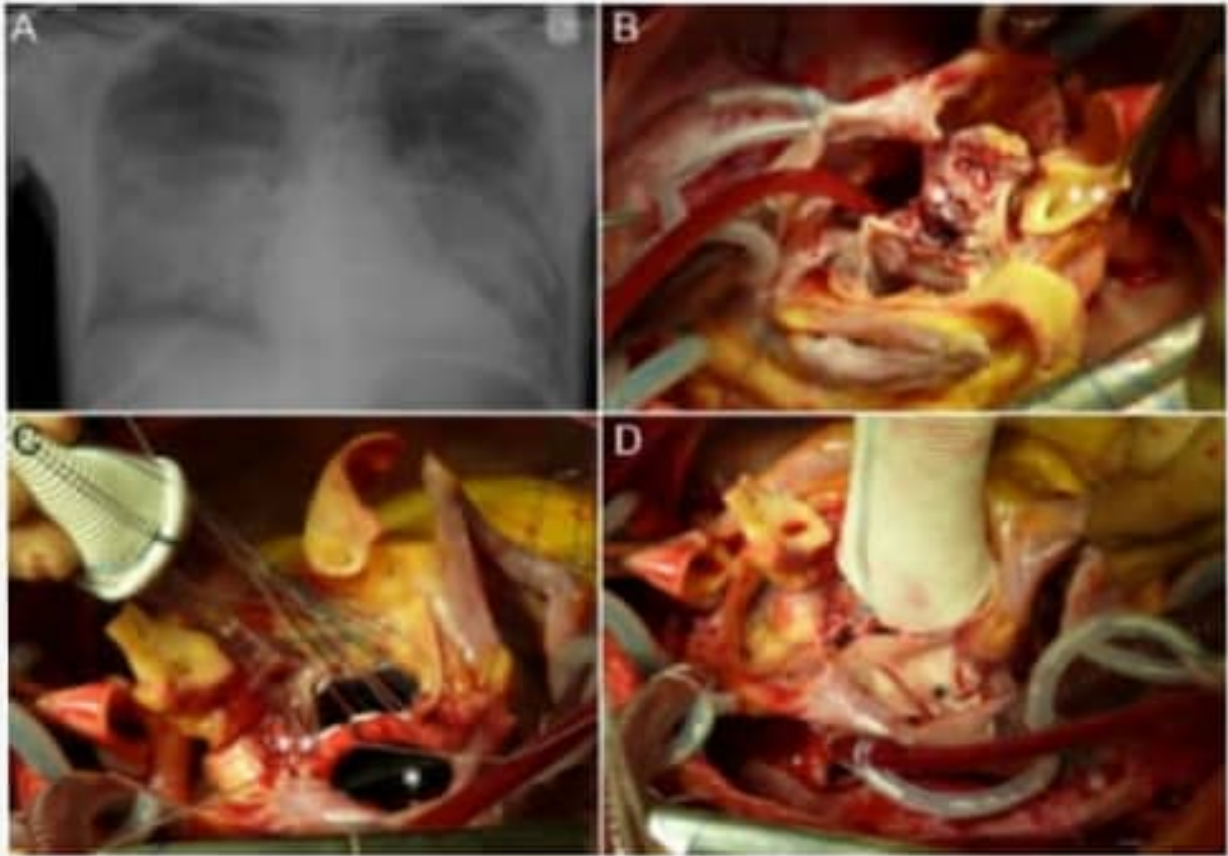


## Triad of congenital toxoplasmosis

1. Chorioretinitis
2. Hydrocephalus
3. Intracranial calcifications



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# Austrian syndrome Triad

1. Pneumonia
2. Endocarditis
3. Meningitis



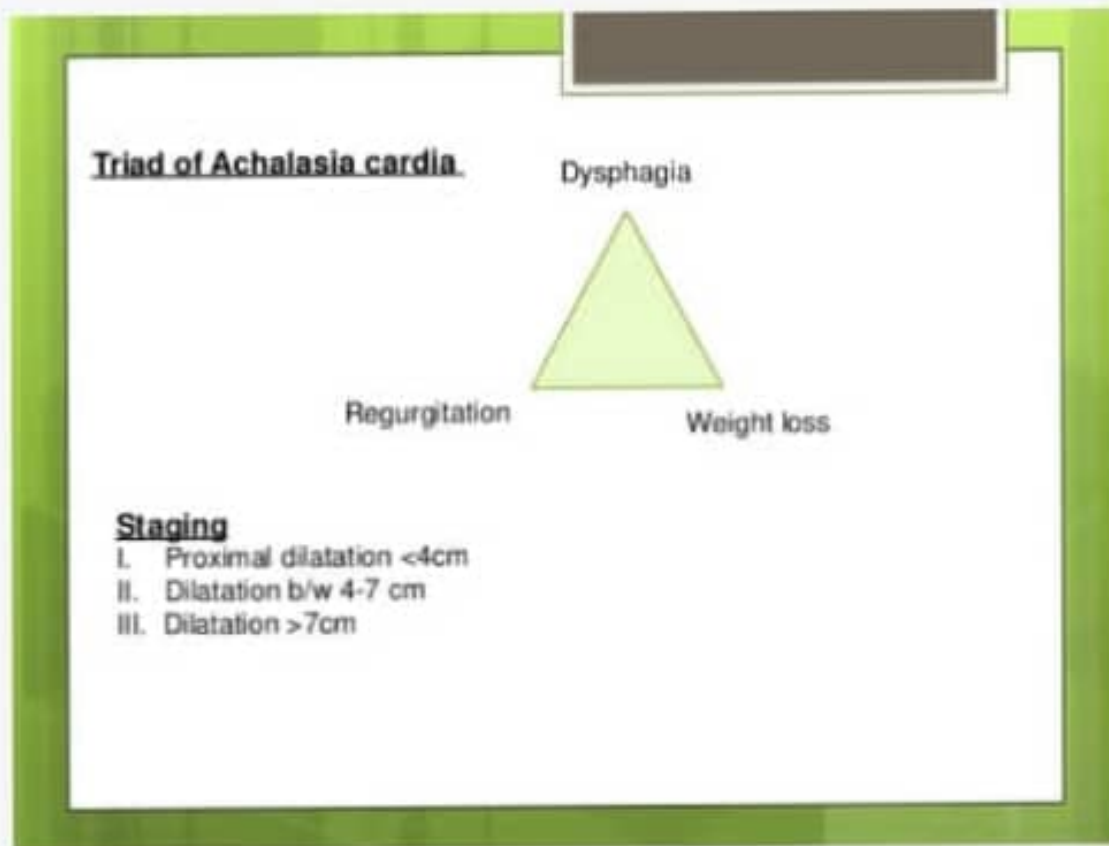


## Amyand's Triad

1. Amyand's hernia
2. Appendicitis
3. Undescended testis







## Achalasia Triad

1. Increase in lower esophageal (LES) tone
2. Decreased Lower Esophageal Tone
3. Aperistalsis



## Samter's triad

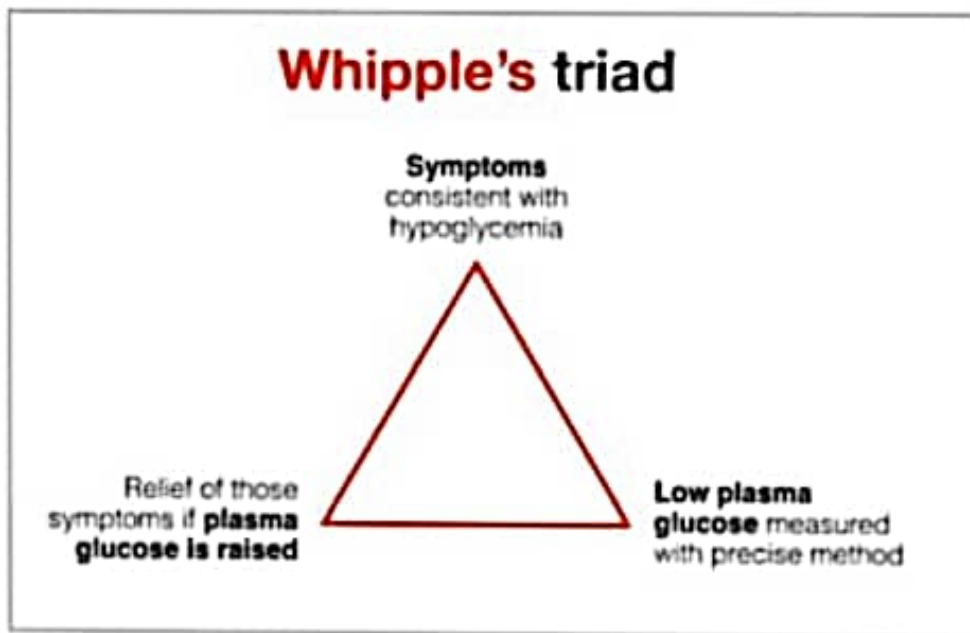
- Samter's triad, or aspirin-exacerbated respiratory disease, is the combination of reactive airways disease, chronic rhinitis and nasal polyps, and sensitivity to aspirin.
- The disease is produced by an abnormality in the arachidonic acid cascade resulting in overproduction of leukotrienes.

## Samter's triad

1. Asthma
2. Sensitive to Aspirin
3. Polyps







## Whipples triad

1. Signs/Symptoms suggestive of hypoglycemia
2. RBS of  $< 50$  gm
3. Relief of signs of hypoglycemia after treatment



## Diagnosis

- **Mackler's triad (<14% of patients)**
  - Vomiting (~80%)
  - Lower chest pain
  - Subcutaneous emphysema (~25%)
- **Common misdiagnosis**
  - PPI
  - Myocardial infarction
  - Pneumonia
  - Pulmonary embolism
  - Aortic dissection
  - Pancreatitis

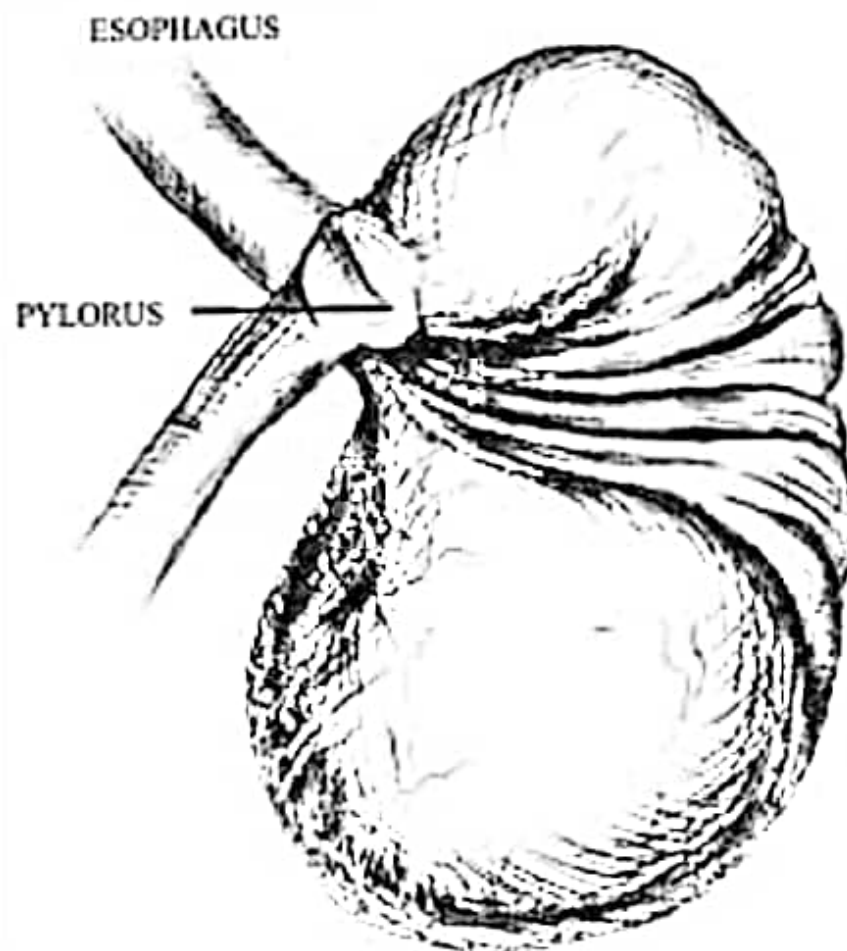


# Mackler's triad

## Esophageal rupture

1. Vomiting
2. Pain
3. Subcutaneous  
Emphysema





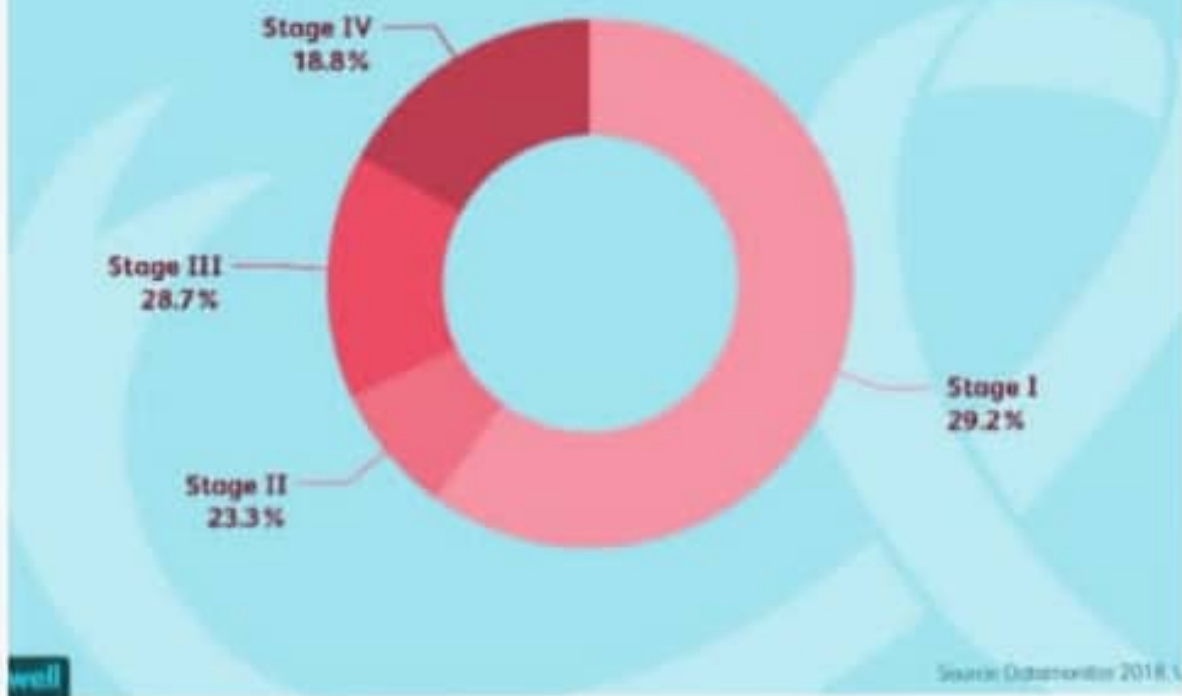
## Burkhardt triad

### Gastric Volvulus

1. Retching
2. Inability to vomit
3. Inability to pass nasogastric tube



## Renal Cell Carcinoma: Stage at Diagnosis



## Triad of Renal cell carcinoma

1. Hematuria
2. Palpable abdominal mass
3. Flank Pain



# Kwashiorkor



"Kwashiorkor is caused by inadequate amount of proteins in the body. This disease is usually found in countries where good food is not readily available."

For More Information,  
Visit: [www.epalnassist.com](http://www.epalnassist.com)

## Triad in Kwashiorkor

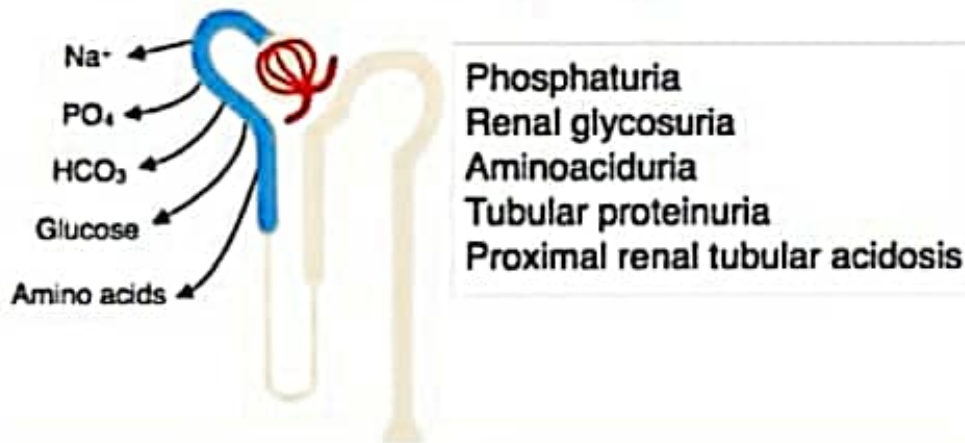
1. Edema
2. Growth retardation
3. Mental changes





# Fanconi Syndrome

↳ Global proximal tubule dysfunction



## Etiology

- Genetic diseases (Dent, Cystinosis, Wilson, Galactosemia)
- Acquired (Cisplatin, Heavy metals)

## Clinical

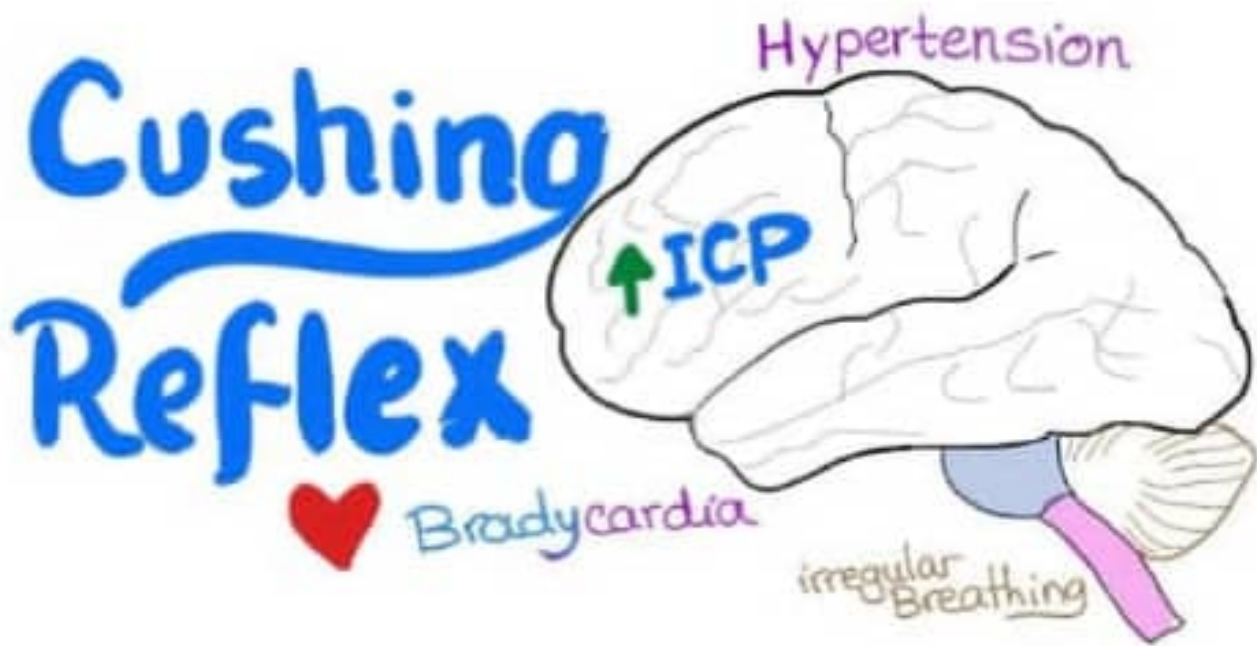
- Growth failure
- Hypovolemia
- Persistent acidosis
- Rickets and osteomalacia (hypophosphatemia)
- Constipation and weakness (hypokalemia)

## Fanconi syndrome triad

- Aminoaciduria
- Proteinuria
- Phosphaturia







## Triad of Cushing's reflex

1. Bradypnea
2. Bradycardia
3. Hypotension



# Behçet syndrome



Relapsing uveitis



Recurring genital ulcers



Recurring oral ulcers

## Painful Ulcers



## Triad in Behcet's syndrome

1. Recurrent oral ulcers
2. Genital ulcers
3. Iridocyclitis



Anderson Triad >>

**Esophageal rupture**

- ▶ **Subcutaneous emphysema**
- ▶ **Rapid respirations**
- ▶ **Abdominal rigidity**

BY | Mustafa Sand

Most likely intra-abdominal

## Anderson triad

1. Subcutaneous emphysema
2. Rapid respiration
3. Abdominal rigidity





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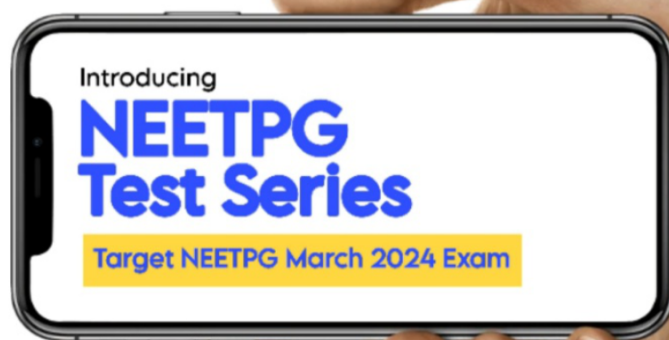
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# Alkaptonuria Triad

1. Ochronotic arthritis
2. Ochronotic pigmentation
3. Urine darkens on standing

Typically seen in  
alkaptonuria





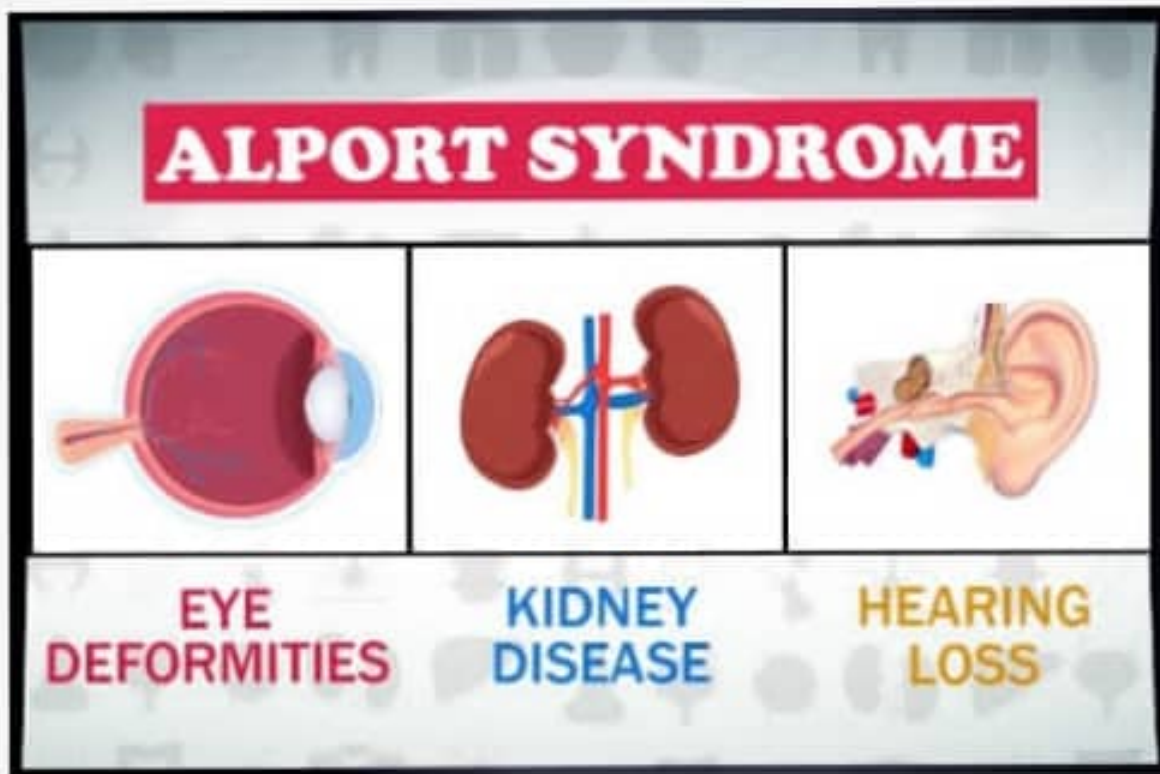
# Triad of Albinism

1. Black locks
2. Oculocutaneous albinism
3. Sensorineural hearing loss



**Alkaptonuria** is a rare inherited disorder that occurs due to deficiency of homogentisic acid oxidase, resulting in the **triad** of dark-colored urine, ochronosis, and ochronotic arthropathy. Life expectancy is usually normal. The incidence of **alkaptonuria** is 1 in 250000 to 1 in 1000000 live births (source)

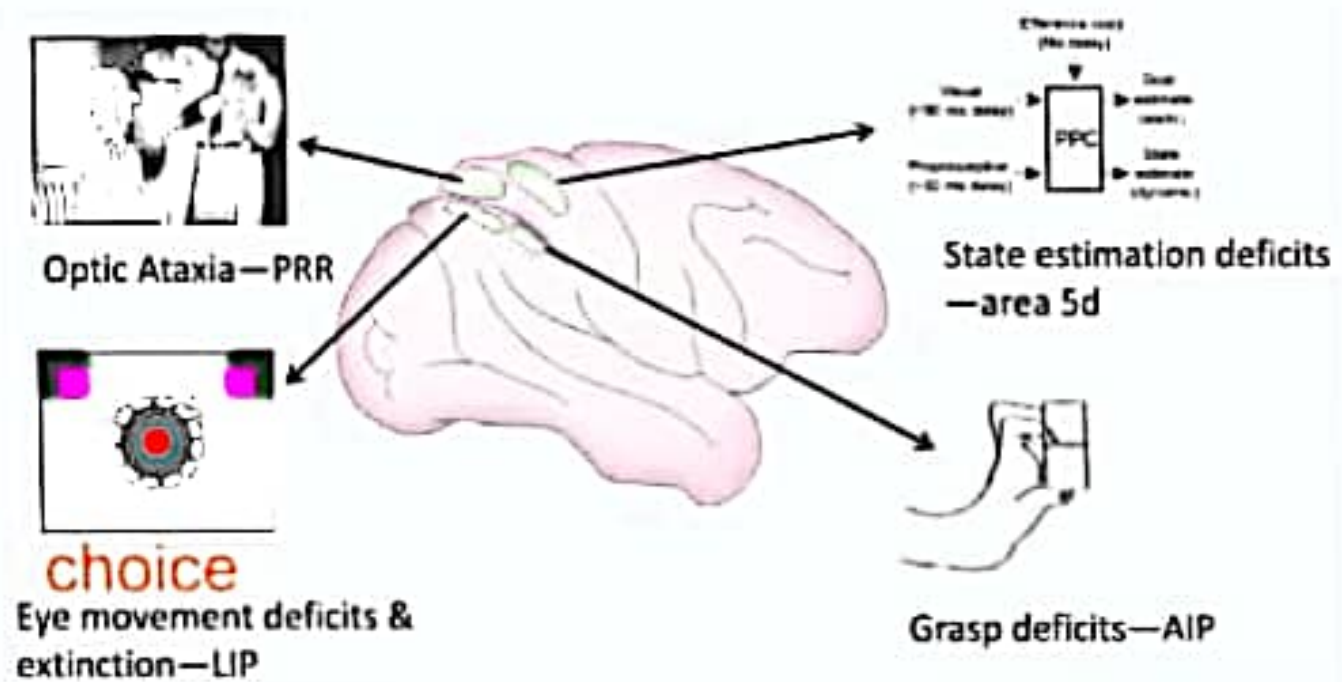




## Triad in Alport's Syndrome

1. Progressive renal failure
2. Sensorineural hearing loss
3. Ocular anomalies



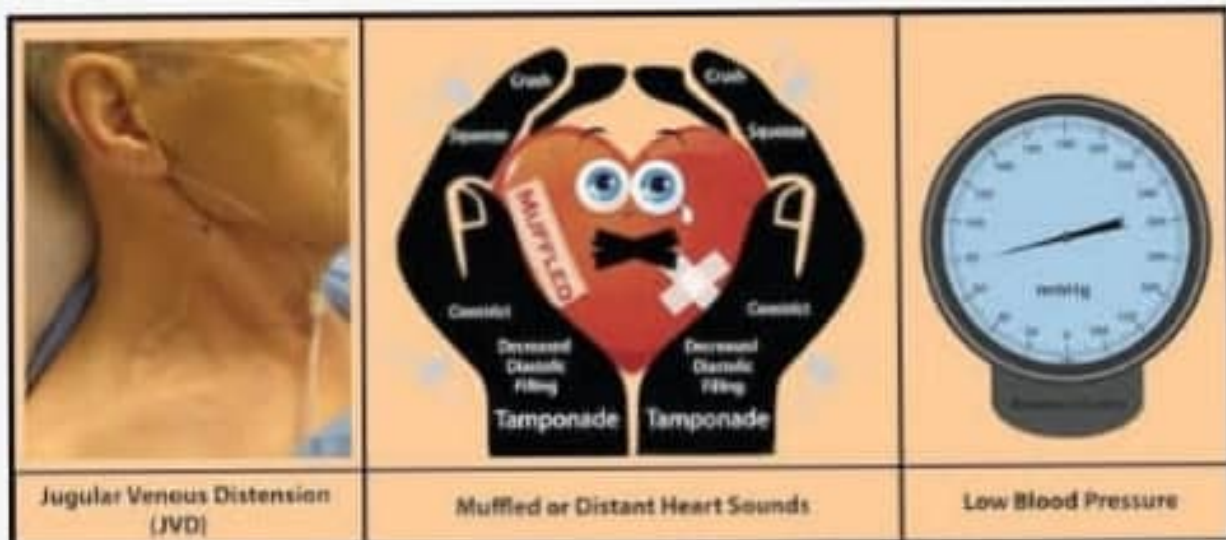


# Balint's syndrome triad

1. Simultagnosia
2. Optic ataxia
3. Oculomotor apraxia



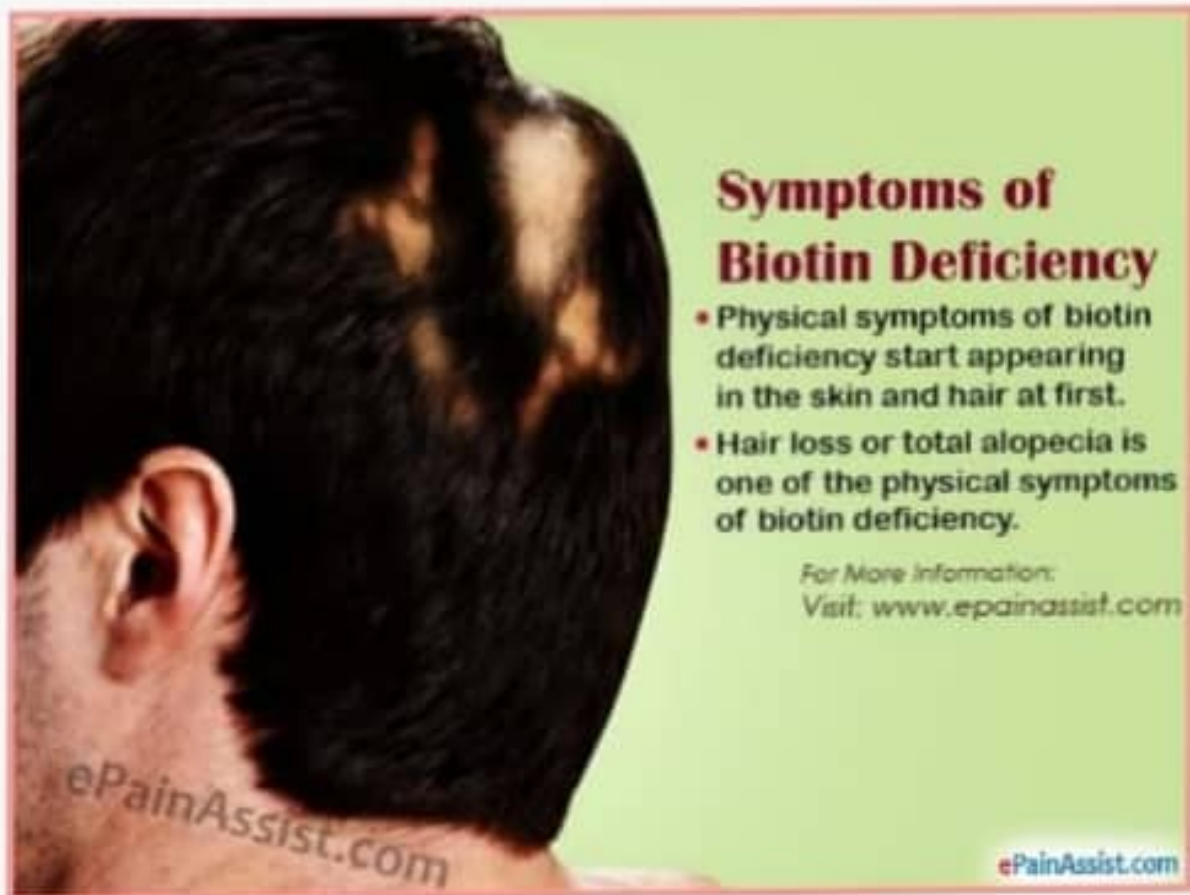




## Beck triad (Cardiac tamponade)

1. Muffled heart sounds
2. Jugular veins are distended
3. Decreased arterial pressure





## Triad in Biotin deficiency

1. Glossitis
2. Alopecia
3. Dermatitis





## Charcot's Cholangitis Triad

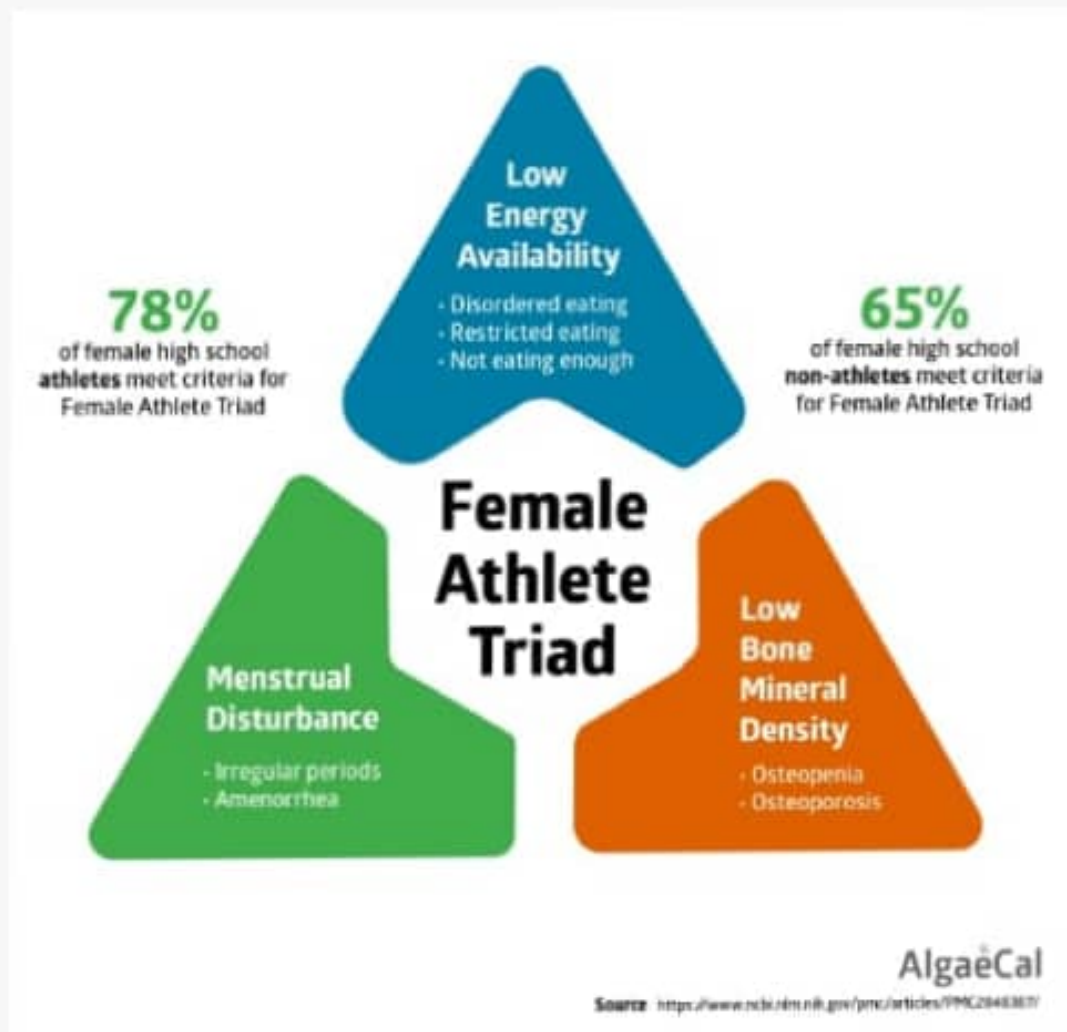
1. Right Upper Quadrant Pain
2. Fever
3. Jaundice



# Tetralogy of Fallot

1. Pulmonary stenosis
2. Overriding of the aorta
3. Right ventricular hypertrophy
4. Ventricular septal defect (VSD)





## Female athlete triad

- Eating disorders
- Amenorrhea
- Decreased bone mineral density





## Gradenigo syndrome

- Gradenigo syndrome consists of
  - (i) ear discharge (suppurative otitis media),
  - (ii) diplopia (CN VI paralysis)
  - (iii) retro-orbital pain (CN V) involvement.
- Fever, headache, vomiting, neck rigidity, facial paralysis, vertigo



## Gradenigos triad

- Sixth nerve palsy
- Deep seated retro-orbital pain
- Persistent ear discharge



## GRANCHER'S TRIAD

- lessened vesicular quality of breathing,
- skodaic resonance, and
- increased vocal fremitus; seen in early pulmonary tuberculosis.



## Grancher's triad

1. Lessened quality of breathing
2. Skodaic resonance
3. Increased vocal fremitus



# Hemolytic Uremic Syndrome (HUS)

Most common cause of acute renal failure in children



*E. coli* H7:0157

Other causes

Complement-mediated

*Strep. pneumoniae*

HIV

Drug toxicity

Shiga-like  
toxin  
(Verotoxin)

  
HUS Triad



Microangiopathic  
hemolytic anemia  
(Schistocytes)



Thrombocytopenia



Renal  
Insufficiency

## Epidemiology

- Primarily affects children under the age of five years

## Clinical

- Prodrome of abdominal pain, vomiting, bloody diarrhea
- Hemolytic anemia, thrombocytopenia, acute kidney injury (Triad)
- Seizures, lethargy

## Treatment

- Mainly supportive
- No antibiotics
- Plasma infusion and plasma exchange
- Eculizumab (in severe CNS involvement)

# Hemolytic uremic syndrome

1. Anaemia
2. Thrombocytopenia
3. Renal failure





# Hutchison triad

1. Hutchison teeth
2. Interstitial keratitis
3. Nerve deafness





## DISCUSSION



➤ Kartagener's syndrome is a subset of Primary Ciliary Dyskinesia (PCD) an autosomal recessive disorder related to abnormal cilia structure and function.

➤ Patients typically present in childhood but this may be delayed due to slow progression.

## Kartagener's triad

1. Sinusitis
2. Bronchiectasis
3. Inversus(situs)



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## Miller Fisher syndrome (MFS)

- presents with ataxia, areflexia and ophthalmoplegia. 25% of patients may develop limb weakness.
- Electrophysiological studies show primarily sensory conduction failure.
- Antiganglioside antibodies to GQ1b are found in 90% of patients and are associated with ophthalmoplegia .
- There have been limited pathological studies in MFS but demyelination of nerve roots has been demonstrated.

## Triad in Miller Fisher Syndrome

1. Ataxia
2. Areflexia
3. Acute external ophthalmoplegia



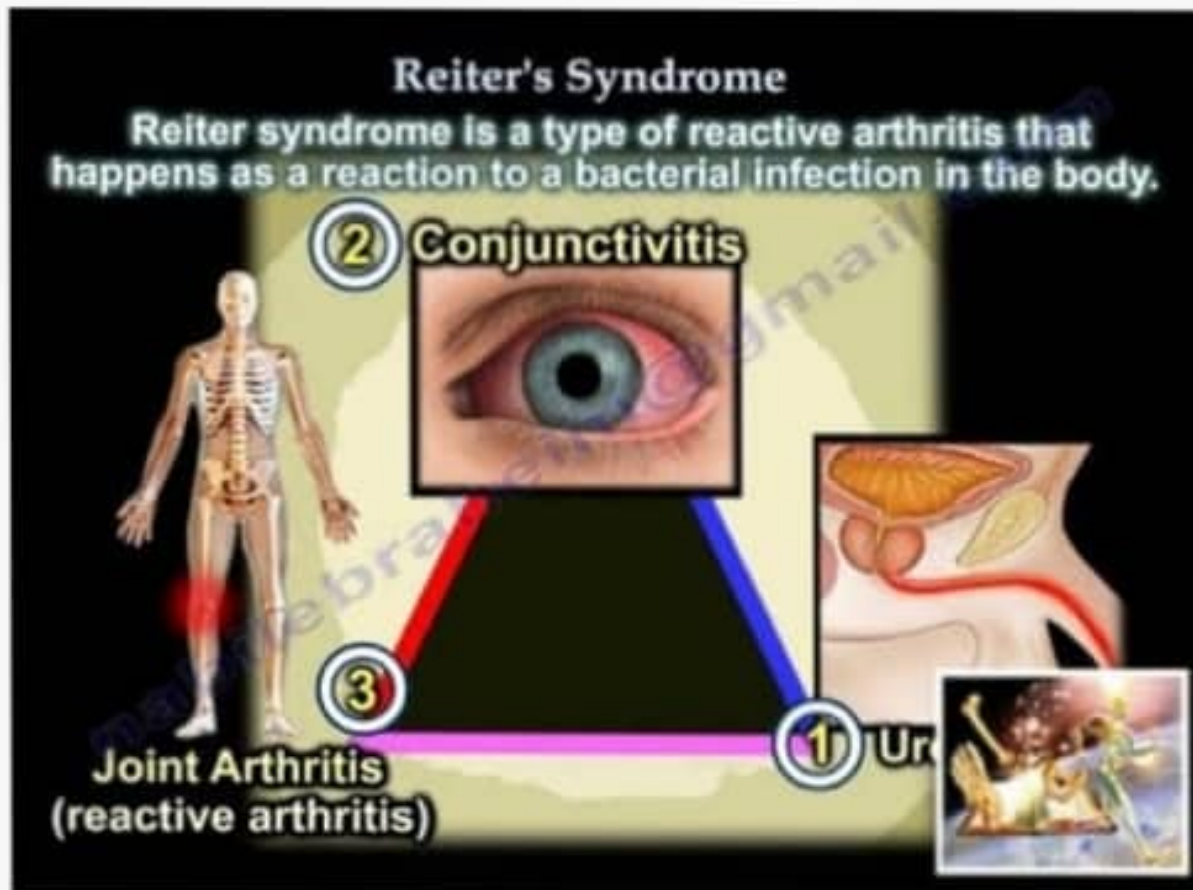
## Osler's Triad

- Pneumonia, endocarditis, meningitis
- *Streptococcus pneumoniae* is the culprit
- Often associated with alcohol abuse, mortality is extremely high

## Osler's triad

1. Telangiectasias
2. Capillary fragility
3. Hereditary hemorrhagic diathesis

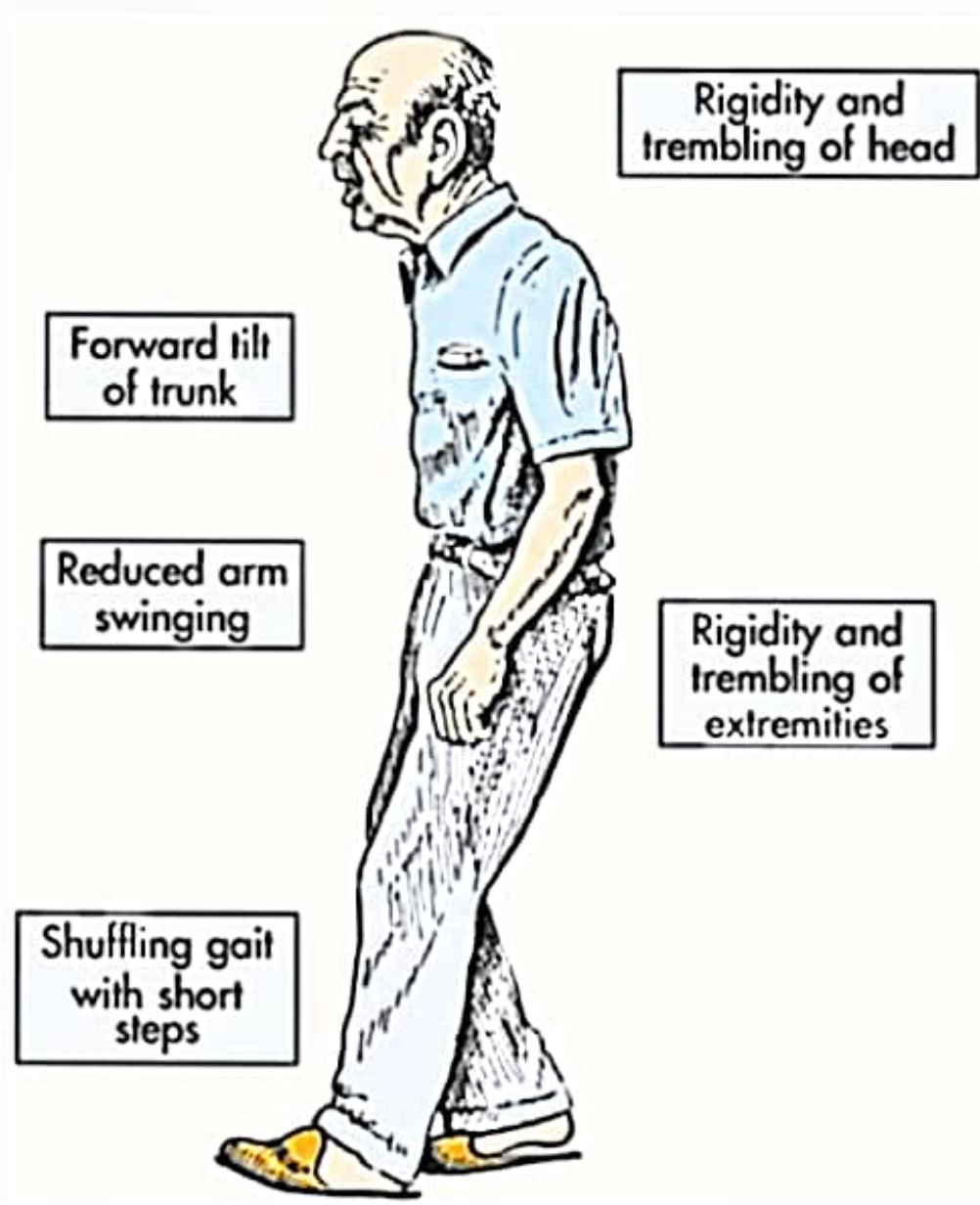




## Triad in Reiter's syndrome

1. Urethritis
2. Conjunctivitis
3. Arthritis



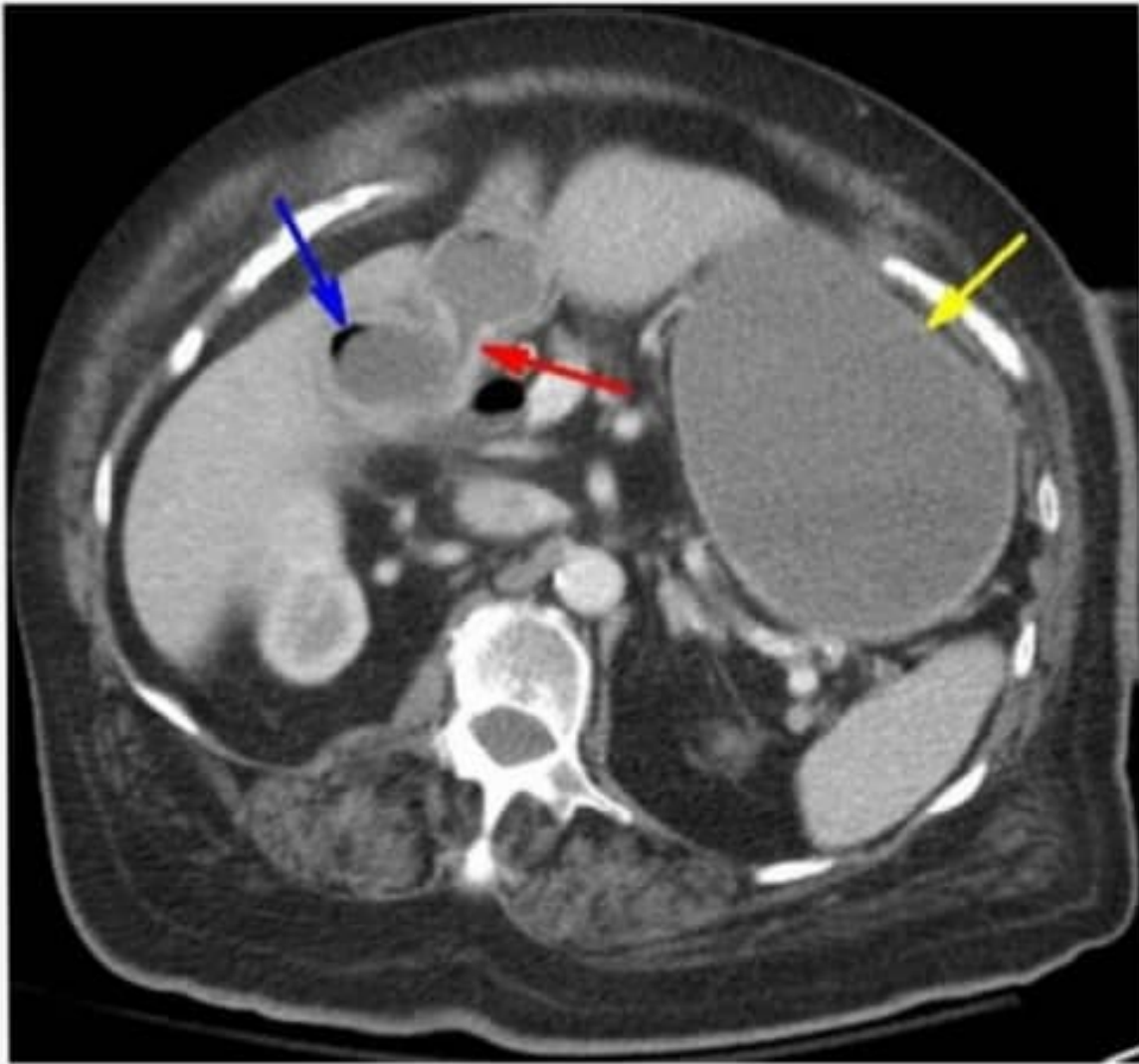


## Parkinson's triad

1. Pin rolling tremors
2. Rigidity
3. Bradykinesia







## Rigler's triad

1. Ectopic gall stones
2. Small bowel obstruction
3. Pneumobilia





### **Muscle pain**

Muscular pain usually comes and goes with the fever, but the pain can be severe enough to disrupt daily activities.

### **Sore throat**

This is one of the first symptoms of AOSD. The lymph nodes in the neck might be swollen and tender.

### **Enlarged internal organs**

The liver and spleen are often enlarged.

### **Rash**

A salmon-pink rash might come and go with the fever. The rash usually appears on the upper body, arms or legs but is rarely itchy.

### **Fever**

During an episode of active AOSD, most people develop a fever of at least 39°C (102.2°F) every day for at least a week. The fever usually reaches a peak in the late afternoon or early evening. There may be two fever spikes daily.

### **Inflammation / fluid collection in the lungs and heart**

Some patients develop inflammation, sometimes with accumulation of fluid, around the heart or lungs which can cause breathing difficulties and sometimes chest pain.

### **Achy and swollen joints**

The joints, especially knees and wrists, might be stiff, painful and inflamed. Ankles, elbows, hands and shoulders might also ache. The joint discomfort usually lasts at least two weeks.

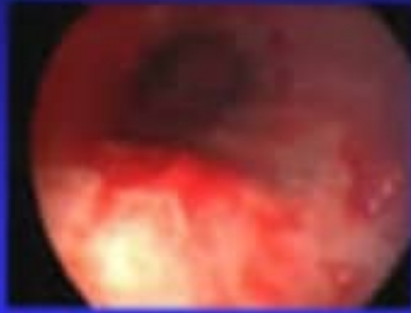


## Triad in Still's disease

1. Persistent high spiking fever
2. Joint pains
3. Salmon colored rash



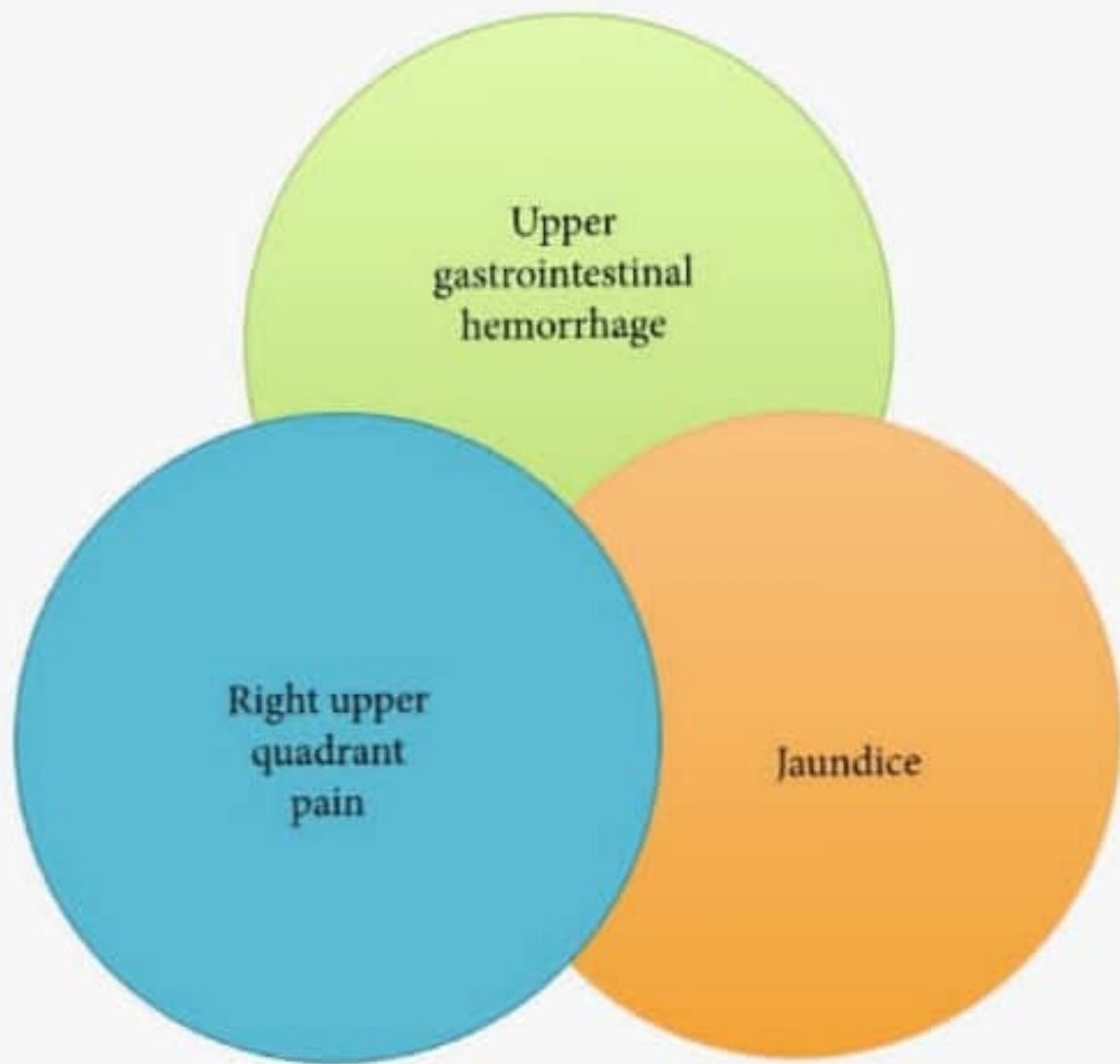
## Dieulafoy lesions



## Dieulfoys triad

1. Hyperesthesia of skin
2. exquisite tenderness
3. guarding over McBurney's point

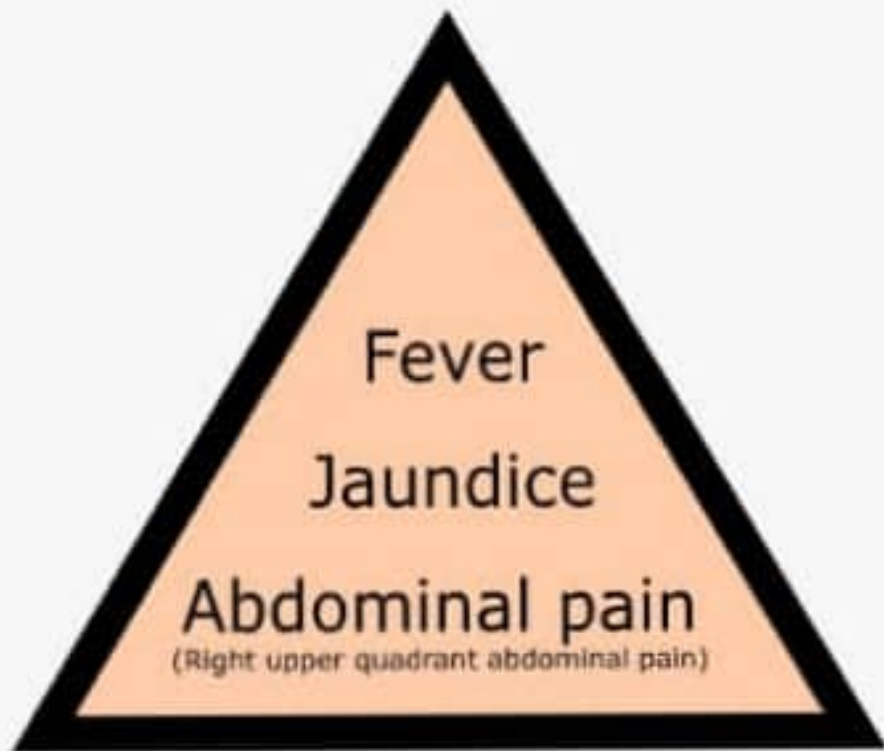




## Hemobilia triad

1. Colicky pain
2. Obstructive jaundice
3. Melena





Charcot's cholangitis triad

## Charcot's triad

1. Pain in abdomen
2. Jaundice
3. Fever





## ACUTE APPENDICITIS- "Murphy's Triad"



## Murphy's triad

1. Pain in right illiac fossa
2. Vomiting
3. Fever





# SAINT'S

*Saint is known as Sadhu*

# SaDHu

**S**tones in gall bladder

**D**iverticulosis

**H**ialal hernia



Mediwood

## Saints triad

1. Diverticulosis
2. Gall stones
3. Hiatus hernia



## WILMS' TUMOUR- Clinical Features

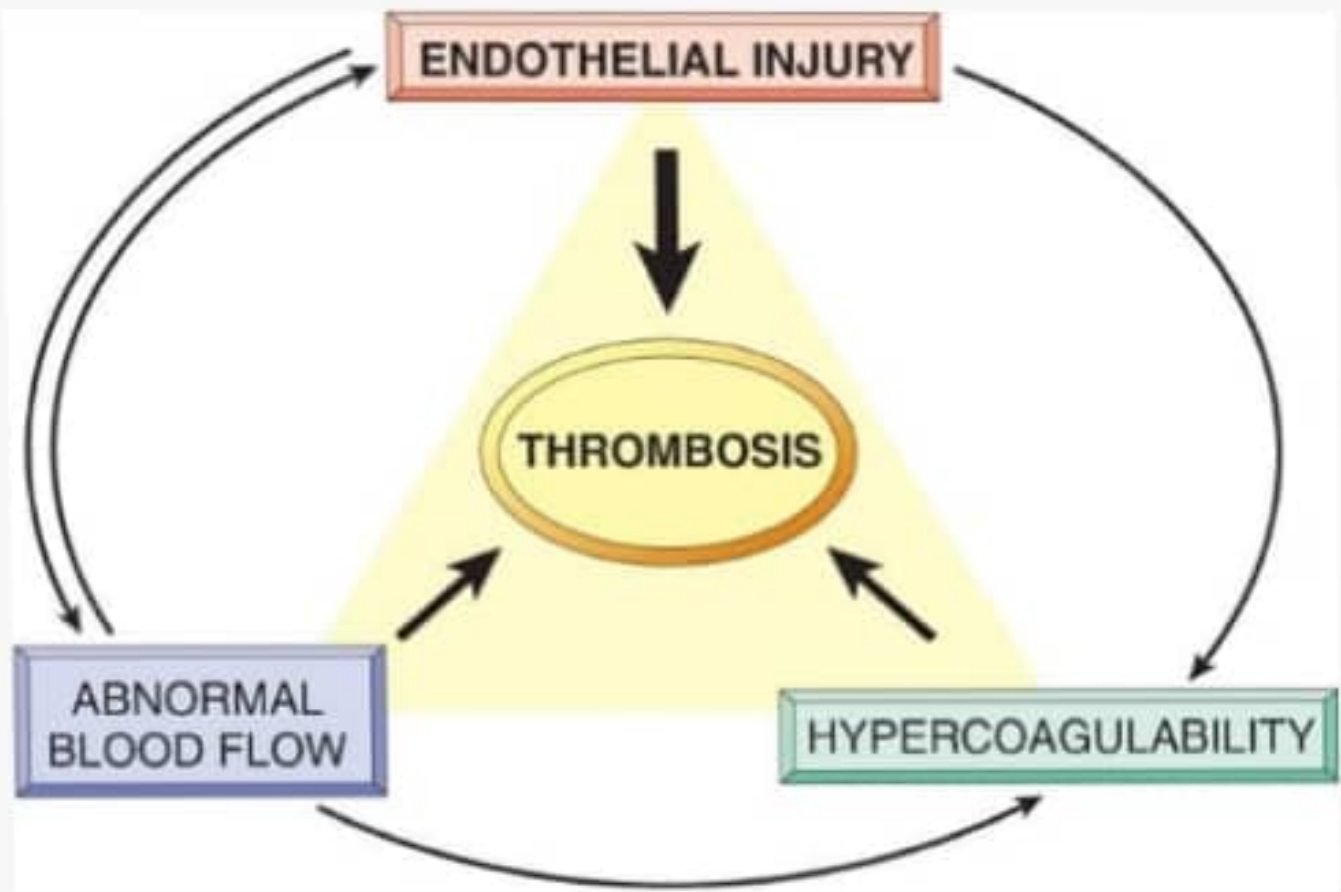
- ✓ Abdominal mass- normally won't cross midline- 75%
- ✓ Haematuria- Gross-18%, Micro-24%
- ✓ Hypertension- 26%
- ✓ Abdominal pain- 28%
- ✓ Fever- 22%
- ✓ Pulmonary metastases (15% of cases)
- ✓ Involvement of renal vein, inferior vena cava (IVC involved in 8% of cases) or atrium
- ✓ Patients with a genetic predisposition to Wilms tumor, such as Beckwith-Wiedemann syndrome, WAGR syndrome, or Denys-Drash syndrome.



## Triad in Wilm's tumor

1. Hematuria
2. Fever
3. Renal mass





## Virchow's triad

1. Endothelial injury
2. Stasis
3. Hyper coagulability





## Trotter's triad

1. Conductive deafness
2. Immobility of soft palate
3. Facial palsy



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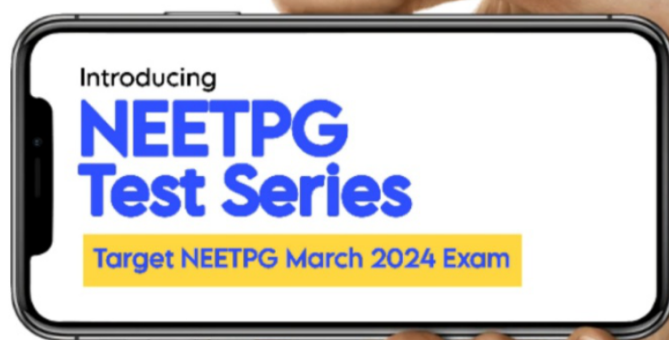
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