The Other Babinski Sign in Hemifacial Spasm
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Objective: To assess the frequency of the other Babinski sign among patients with hemifacial spasm (HFS), and determine its use in differentiating HFS and blepharospasm (BSP).

Background: The other Babinski sign, described by Joseph Babinski in 1905, is manifested by simultaneous eye closure and eyebrow elevation. The utility of the sign in differentiating HFS and BSP has not been systematically studied. We sought to characterize the frequency, sensitivity or specificity of this finding.

Design/Methods: Patients included were diagnosed with HFS (n=75; 45 women) or BSP (n=73; 50 women), and videotaped. HFS was clinically diagnosed with the presence of unilateral involuntary facial muscle contractions affecting one or more muscle groups innervated by the ipsilateral facial nerve. Patients with BSP had bilateral contraction of periorbital muscles without other associated facial or oromandibular dystonia. A patient was considered positive for the presence of the other Babinski sign if the videotape showed unilateral contraction of the frontalis muscle, causing eyebrow elevation, with concurrent contraction of the ipsilateral orbicularis oculi muscle, causing eyelid closure. Patients with unilateral frontalis contraction but not concurrent eye closure were excluded, as such contraction may have been compensatory (voluntary) as in patients with BSP, rather than involuntary as typically observed in patients with HFS.

Results: The other Babinski sign was present in none of the BSP patients but was evident in 19 (25.3%) of the HFS patients (10 women). The sensitivity of the other Babinski sign as a test of the presence of HFS was 25.3%; whereas specificity for the presence of the sign, compared with BSP, was 100%.

Conclusions/Relevance: The other Babinski sign, found in 25% of our cases of HFS, but not in any of the cases of BSP, is an under-recognized physical sign which can be used to distinguish HFS from BSP.

REFERENCE