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Psychiatric symptoms and long-term management in children with anti N methyl-D-aspartate receptor encephalitis based on 12 year data from a large Children's Hospital in China

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Objectives: This study aimed to summarize the age-specific characteristics of psychiatric symptoms in children with anti-N-methyl-D-aspartate receptor (NMDAR) encephalitis and to explore the risk factors affecting the prognosis of psychiatric symptoms.

Methods: The clinical data and follow-up results of 222 children with anti-NMDAR encephalitis diagnosed from August 2012 to October 2022 were analyzed.

Results: (1) 122 cases (122/222, 55.0%) had psychiatric symptoms as the first symptom, including psychotic symptoms (86/222, 38.7%), dyssomnias (177/222, 79.7%)), speech disturbance (177/222, 79.7%), emotional disturbance (178/222, 80.2%), catatonia (80/222, 36.0%), and cognitive disturbance (197/222, 88.7%). (2) School-age and adolescent children were more likely to have psychotic symptoms than preschool children. There was an age difference in speech disturbance between school age and preschool children. (3) Nine (9/149, 6.0%) patients had persistent cognitive dysfunction, 18 (18/146, 12.3%) patients had persistent psychiatric symptoms, and 3 (3/149, 2.0%) patients died after discharge. There was an overlap between cognitive and psychotic symptoms. Grimacing was an independent risk factor for poor prognosis of cognitive disturbance in pediatric patients (P = 0.022). Having precursor gastrointestinal symptoms (P = 0.004), psychotic symptoms (P = 0.027), and catatonia (P = 0.029) were independent risk factors for poor prognosis of psychiatric disorders pediatric patients.

Conclusions: Psychiatric symptoms in children with anti-NMDAR encephalitis are age-specific. The long-term prognosis for cognitive and psychiatric disorders is relatively good, and long-term antipsychotic treatment is not required. Starting second line immunization requires caution.

Biography

Yue Hu from the Children's Hospital of Chongqing Medical University, specializes in diagnosing and treating pediatric neurological disorders such as epilepsy, intracranial infections, and paralysis, with expertise in managing complex cases involving multiple neurological symptoms in children.