

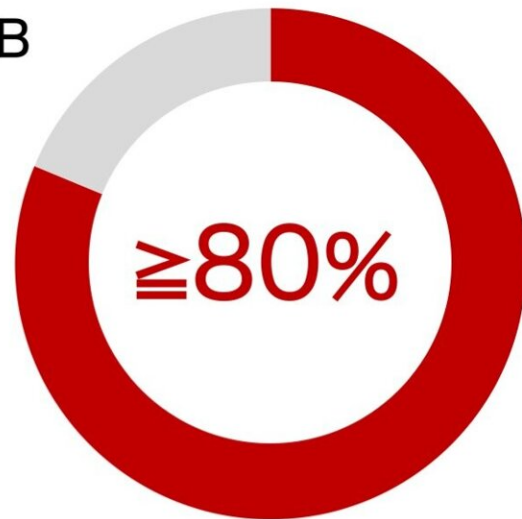
Evaluation of the diagnostic criteria for anti-NMDA receptor encephalitis in children

May 13 2021

A

Criteria	NMDA receptor antibody		Total
	+	-	
Fulfill	13	28	41
Not fulfill	3	93	96
Total	16	121	137

B



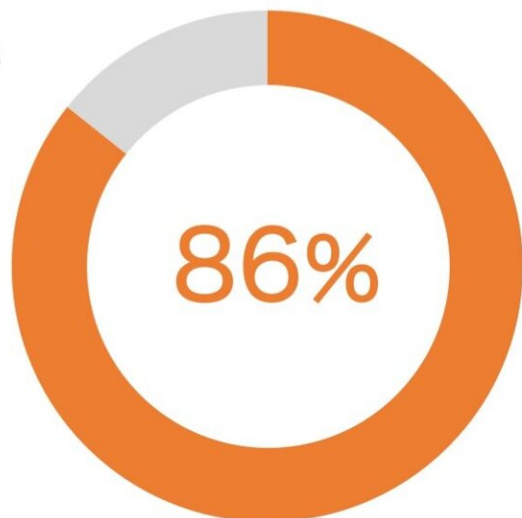
High sensitivity

C



Low positive predictive value

D



Rationale for starting immunomodulatory therapies

The results of evaluation of the clinical diagnostic criteria for anti-NMDA receptor encephalitis in Japanese children are summarized (A-D). Total of 137 patients including 16 patients with positive anti-NMDA receptor antibody were included in the study (A). Over 80% of antibody-positive patients fulfill the criteria, suggesting the clinical diagnostic criteria has high sensitivity (B), however, only about 30% of the children who fulfill the criteria actually tested positive in the antibody analysis in our cohort (C). Most of the children without the antibody, but fulfilled the criteria (false positive cases) were diagnosed with a neuroimmunological disease (D). Collectively, physicians should start immunomodulatory therapy when their patients fulfill the diagnostic criteria. Credit: TMIMS

Anti-NMDA receptor (NMDAR) encephalitis was first reported to develop in female young adults with ovarian teratoma. However, another study with a larger cohort reported that more than one-third of all patients with anti-NMDAR encephalitis were aged under 18 years, suggesting that this encephalitis might be more common in children than originally expected.

A clinical diagnostic approach to autoimmune encephalitis was proposed in 2016, and included [diagnostic criteria](#) for probable and definite anti-NMDAR encephalitis. For a diagnosis of probable anti-NMDAR encephalitis, the criteria require rapid onset (

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