

P0219 **Etiology and prognosis of paediatric encephalitis: about 31 cases**

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**Background:** Infectious encephalitis may be a severe disease, because of the risks of adverse events during the acute phase and of poor recovery. The diagnosis of encephalitis itself may be difficult to establish, and the etiology may remain undetermined. An international consensus has been published in 2013, proposing a standardized case definition and diagnostic algorithm for adults and children. However, child encephalitis is less described, and neurological outcome in pediatric encephalitis have rarely been studied. We aimed to analyze the cases of encephalitis in children attending our center in the last years, to assess both the pathogens involved and the prognosis.

**Materials/methods:** This is an epidemiological, monocentric retrospective study. We included all cases of encephalitis (according to the recent guidelines) in children (1 month to 15 year old), attending Grenoble University Hospital from 2009 to 2013.

**Results:** 31 cases of infectious encephalitis were included (17 females and 14 males). Mean age was 6.2±4.5 years. 23 were hospitalized in intensive care. A pathogen was identified in 61% of the cases, including 21% with a direct pathogen identification in the cerebrospinal fluid. Viruses were the leading cause: the most frequently identified agents being enteroviruses (26%), *Mycoplasma pneumoniae* (16%), Epstein-Barr virus (6%), herpes simplex virus (3%), varicella zoster virus (3%) and influenza virus (3%).

33% of children still have neurological symptoms when discharged (motor or cognitive), and 29% of children had sequelae one month after the encephalitis: motor (13%), cognitive (17%) or psychological/psychiatric (21%). In 12% of these cases, sequelae interfered with daily life. Due to a large number of patients lost to follow-up, longer term sequelae seem important (50%) but are harder to interpret.

**Conclusions:** Child encephalitis is a potentially severe disease, with a high rate of sequelae. The recent international consensus, including a diagnosis algorithm, will probably improve the diagnosis and treatment of this disease.