

A Brief Report on Encephalitis

Ryan Singh*

Department of Medicine, Dalhousie University, Canada

Description

Encephalitis is a type of brain inflammation. Reduced or altered consciousness, headache, fever, confusion, stiff neck, and vomiting are some of the symptoms that can occur. Seizures, hallucinations, difficulty speaking, memory issues, and hearing problems are all possible complications. Viruses including the herpes simplex virus and the rabies virus, as well as bacteria, fungi, and parasites, can cause encephalitis. Autoimmune illnesses and certain drugs are also factors. The cause of many cases is unknown. A weakened immune system is one of the risk factors. Symptoms are used to make a diagnosis, which is then supported by blood testing, medical imaging, and cerebrospinal fluid study.

Vaccines can help to prevent some forms. Antiviral drugs (such as acyclovir), anticonvulsants, and corticosteroids are also possible treatments. At most cases, treatment takes done in a hospital. Some folks require assisted breathing. Rehabilitation may be necessary once the immediate problem has been resolved. Encephalitis was predicted to have impacted 4.3 million individuals worldwide in 2015, with 150,000 deaths.

Adults with encephalitis experience fever, headache, confusion, and occasionally seizures. Irritability, low appetite, and fever are common in younger children and newborns. A drowsy or confused person is frequently revealed during a neurological test. Meningitis or meningoencephalitis is indicated by a stiff neck caused by irritation of the meninges that protect the brain.

Viral encephalitis can be a direct result of an acute infection or one of the complications of a latent infection. Although the majority of viral encephalitis cases are unknown, the most common identified cause of viral encephalitis is herpes simplex infection. Rabies virus, poliovirus, and measles virus are among the other causes of acute viral encephalitis. Arboviral flavivirus (West Nile virus, St. Louis encephalitis), bunyavirus (La Crosse strain), arenavirus (lymphocytic choriomeningitis virus), reovirus (Colorado tick virus), and henipavirus infections are also probable viral causes. Powassan encephalitis is a rare type of encephalitis.

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Limbic encephalitis is a type of inflammatory brain disease that affects only the limbic system. Disorientation, disinhibition, memory loss, seizures, and

behavioural abnormalities are common symptoms. T2 hyperintensity in the medial temporal lobes, as well as other limbic areas, is seen by MRI imaging. Autoimmune causes some cases of limbic encephalitis.

Catatonia, insanity, aberrant movements, and autonomic dysfunction are all symptoms of autoimmune encephalitis. Antibodies can cause autoimmune encephalitis, such as anti-N-methyl-D-aspartate-receptor encephalitis and Rasmussen encephalitis. Anti-NMDA receptor encephalitis is the most frequent autoimmune manifestation, and ovarian teratoma affects 58 percent of women between the ages of 18 and 45 [1-5].

Conclusion

Toxoplasmic Encephalitis (TE), which is caused by *Toxoplasma gondii* and can be fatal in those with weakened immune systems, is commonly treated with pyrimethamine-based maintenance therapy. The use of highly active antiretroviral therapy (HAART) in combination with conventional pyrimethamine-based maintenance medication reduces the risk of relapse in HIV and TE patients from 18 percent to 11 percent. This is a critical distinction because relapse can affect the severity and prognosis of the disease, as well as raise healthcare costs. It's unknown whether intravenous immunoglobulin is beneficial in the treatment of childhood encephalitis. Due to a dearth of randomised double-blind studies with appropriate numbers of patients and sufficient follow-up, systematic reviews have been unable to make strong conclusions. In some cases of childhood encephalitis, intravenous immunoglobulin may be beneficial in terms of length of hospital stay, time to halt spasms, time to restore consciousness, and time to remission of neuropathic symptoms and fever. When compared to placebo (fake) treatment, intravenous immunoglobulin for Japanese encephalitis appeared to have no benefit.

Conflict of Interests

None.

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*Address for Correspondence: Ryan Singh, Department of Medicine, Dalhousie University, Canada, E-mail: ryansingh45@yahoo.com

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