



이 순 태

서울대학병원 신경과

Case-based learning: Infection/Autoimmune Disease

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Encephalitis has many possible causes that make the differential diagnosis complex and difficult. Differentiation of viral encephalitis from autoimmune encephalitis is always challenging. Although a recent proposed diagnostic criteria for autoimmune encephalitis promotes the standardization of diagnosis, the criteria requests reasonable exclusions of other causes including viral etiologies. Some of the viral encephalitis can be confirmed by PCR of viral genome from CSF, and about half of the autoimmune encephalitis are confirmed by autoimmune antibody tests. However, laboratory tests have high chances of error, false positivity, and false negativity. Negative results from laboratory tests do not excluded the etiologies, and false positivity of laboratory tests can lead to unnecessary treatments. Accordingly, the differential diagnosis between viral and autoimmune etiologies should stand on both clinician's expert experiences and laboratory References. In addition, when the diagnosis is uncertain, treatments should cover both etiologies as much as possible. Because viral and autoimmune encephalitis are fatal while treatable, both promptness and accuracy of interventions are necessary. Some of the autoimmune treatments can aggravates viral activity and increases risks of secondary infections. This lecture presents some encephalitis cases and discusses the diagnostic and therapeutic approaches.

Key Words:

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