

Acute viral encephalitis

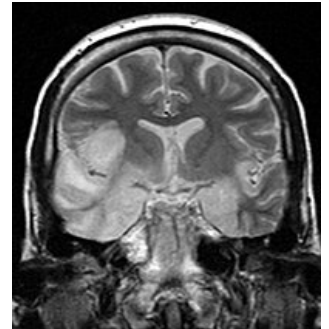
The result of acute viral encephalitis are neuronal and glia defects occurring with inflammation and edema.

Etiology

- Mumps, *HSV*, *VZV*, *EBV*.
- Substantial link to the vector: tick – tick encephalitis, Russian spring encephalitis; mosquito - western equine disease (USA), western Nile encephalitis (Africa).
- **Post-infectious encephalitis** – follow childhood infections (measles, chickenpox, rubella), it is not a direct effect of the virus.

Clinical manifestations

- General manifestations ("influenza"): muscle pain, fever, headache, meningeal reactions, cerebrospinal fluid cell proliferation.
- Symptoms of brain impairment - focal/diffuse, according to location.
- With hemisphere involvement → epilepsy, involuntary movements, paresis, confusion, speech disorders.
- **Rhombencephalitis** = defects in cerebellar and brainstem structures.
- Mesencephalic defect → oculomotoric and autonomic disorders.
- Cerebellar defect → ataxia, dysarthria.
- Brainstem defect → nystagmus, quadraparesis, cranial nerve palsy.
- **Spinal cord** defect → mixed motor, sensitive and autonomic dysfunction.



MRI - HSV encephalitis

Prognosis

- Usually lasts for several weeks;
- the prognosis depends on the type of virus;
- mortality HSV infection 20-30%, in mumps only 2%;^[1]
- also the neurological consequences vary in severity.

References

Related articles

- Encephalitis
 - Viral encephalitis: Rabies, Polio, Herpetic encephalitis, tick-borne encephalitis

Literature

1. SEIDL, Zdeněk a Jiří OBENBERGER. *Neurologie pro studium i praxi*. 1. vydání. Praha : Grada Publishing, 2004. ISBN 80-247-0623-7.