Viral Encephalomyelitis Features of the Course and Outcomes

Khojimatova Malika Shukhratovna,

Doctoral student at the Department of Neurology of Andijan Medical Institute

Abstract: Encephalomyelitis is an inflammation of the substance of the brain and spinal cord, which can develop under the influence of various factors, while manifesting approximately the same cerebral, focal symptoms. Today, the problem of encephalomyelitis and inflammatory diseases of the nervous system in general remains relevant, especially in our region, since not all patients are aware of the severity and outcome of these diseases.

Keywords: Inflammation, neurological, neuroimaging, immunological features

Aim of the study:

To determine the clinical and neurological, neuroimaging, immunological features and outcomes of viral encephalomyelitis in the Andijan region.

To achieve this goal, we examined 32 patients treated in the neurological departments of the clinic of the Andijan Medical Institute from 2015 to 2019, with a diagnosis of acute viral encephalomyelitis. There were patients aged 18 to 70 years, the ratio of men and women was approximately equal. All patients underwent clinical neurological, neuroimaging and immunological studies.

Research results:

In all patients, the disease began acutely, at the onset of the disease, catarrhal phenomena were observed in the form of a runny nose. In 1/3 of patients, temperature rises up to 38 ° C were observed. On palpation, the lymph nodes were not enlarged. Meningeal symptoms lasted 7-20 days. The protein content in the cerebrospinal fluid was 0.5-2.0 %. Moderate leukocytosis in the blood, increased erythrocyte sedimentation rate. The average age of the patients was 33.7 ± 13.7 years. In two cases (48.4%), the disease was registered mainly in women more often in the postpartum period.

The diagnosis of viral encephalomyelitis was confirmed by the results of a specific serological study (detection of IgM and IgG over time). Almost 93% of patients sought medical help and were hospitalized 3-4 days after the onset of the disease. In half of the cases, a febrile form of the disease was observed (56.3%), in 10.9% - meningeal. It should be noted that the share of focal forms accounted for a third of cases of the disease (32.8%).

A third of the patients (34.4%) had a severe severity of the disease, the rest had an average one. Characterized by an acute onset of the disease with fever lasting 9.4 ± 3.9 days. Meningeal syndrome was manifested by stiff neck muscles, less often - by a positive symptom of Kernig and Brudzinsky. In the study of cerebrospinal fluid, predominantly lymphocytic pleocytosis was registered - 237.0 ± 115.0 in 1 mm3.

The clinical picture of focal forms depended on the level of damage to the nervous system and manifested itself in the form of persistent flaccid paralysis and paresis, predominantly paraplegic forms, symptoms of damage to the nuclei of the cranial nerves (pairs III, VII, IX, X, XII) with the development of polioencephalitis and symptoms of dysfunction of the pelvic organs (mixed type).

Complete recovery after encephalomyelitis was observed in 15% of patients, recovery as an outcome of focal forms was recorded in 77.5% of cases. Death was registered in three cases. (7.5%).

Among the residual phenomena, tetraparesis or severe weakness of the lower extremities was revealed in 42.9%, with delayed urination and an act of deformation, focal symptoms in the form of facial asymmetry, ptosis of the eyelids or deviation of the tongue 33.3%, cerebellar ataxia - 28.6%, tremor of the tongue or brushes - 23.8%.

Neuroimaging studies of the brain and spinal cord in patients were carried out using magnetic resonance imaging. The following changes were found on the tomograms of T1 and T2 modes:

A Bi-Monthly, Peer Reviewed International Journal Volume 1 Issue 1

ISSN NO: 2770-0003

Date of Publication:16-10-2021

ISSN NO: 2770-0003 Date of Publication:16-10-2021

Infiltrative lesions of both hemispheres and several segments of the spinal cord accounted for 40%, infiltrative changes in the brainstem and one segment of the spinal cord accounted for -35%.

Conclusion: focal forms of viral encephalomyelitis are found in more than a third of cases and are accompanied by persistent residual effects in 85.7% of cases, which depended on the moment patients sought medical help.

References:

- 1. Galaktionov, V.G. Immunology. M. Academy, 2004.-- S. 122-123.
- 2. Kasatkina E.L. Clinical and immunological aspects of encephalomyelopolyradiculoneuritis: Dis. ... Cand. honey. sciences. M., 1987.
- 3. Lobzin Yu.V. Meningitis and encephalitis / Yu.V. Lobzin, V.V. Pilipenko, Yu.N. Gromyko. SPb.YOOO "FOLIANT Publishing House", 2003. 128 p.
- 4. Odinak M.M. Private neurology / M.M. Same. SPb.: Lan, 2002. "- 446 p.
- 5. Petri A. Visual statistics in medicine / A. Petri, K. Sabin. M.: GEOTAR-MED, 2003.-- 144 p.