Neuropsychiatric features of individuals with LGI1 encephalitis

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Introduction

•LGI1 encephalitis is one of the most common forms of autoimmune encephalitis

•This condition has been noted to have prominent psychiatric features.

•Psychiatric phenotyping to date has relied on small studies and has lacked detail.

Aim

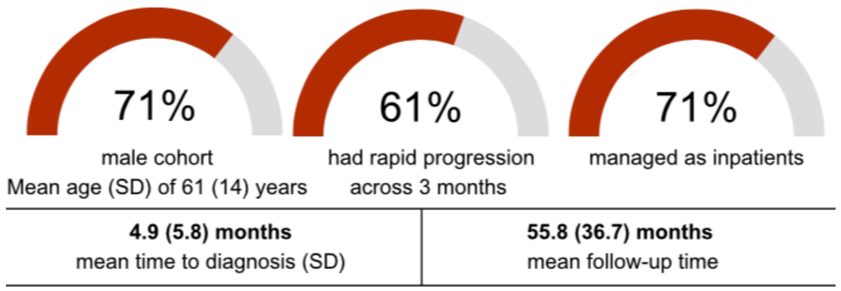
•Assess psychiatric symptoms and clinical course of patients with a confirmed diagnosis of LGI1 encephalitis.

Method

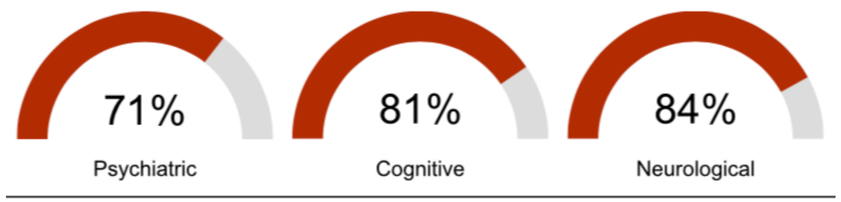
- Patient were treated at the National Hospital for Neurology and Neurosurgery (NHNN), London, UK
- No exclusion criteria
- Patients were diagnosed as positive for LGI1 encephalitis based on clinical assessment in conjunction with positive LGI1-Ab titre from serum or cerebrospinal (CSF) fluid, other CSF paraclinical features, MRI and EEG findings
- Demographic details, medical and psychiatric history, psychiatric symptoms, investigation results and clinical course were collected from patient notes.

Results

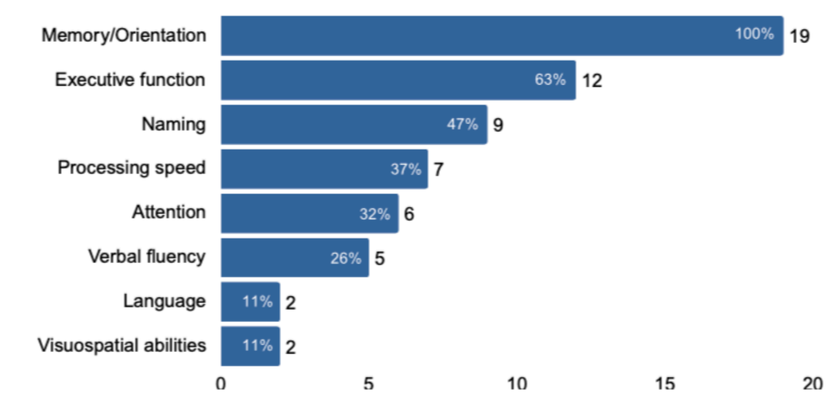
Characteristics of our cohort (N=31)



Presenting symptoms appeared at similar rates



Impairment of domain on formal neuropsychometric assessment (n=19)



Many patients had psychiatric sequalae which resolved after treatment, but a modest proportion of patients experienced ongoing symptoms after treatment

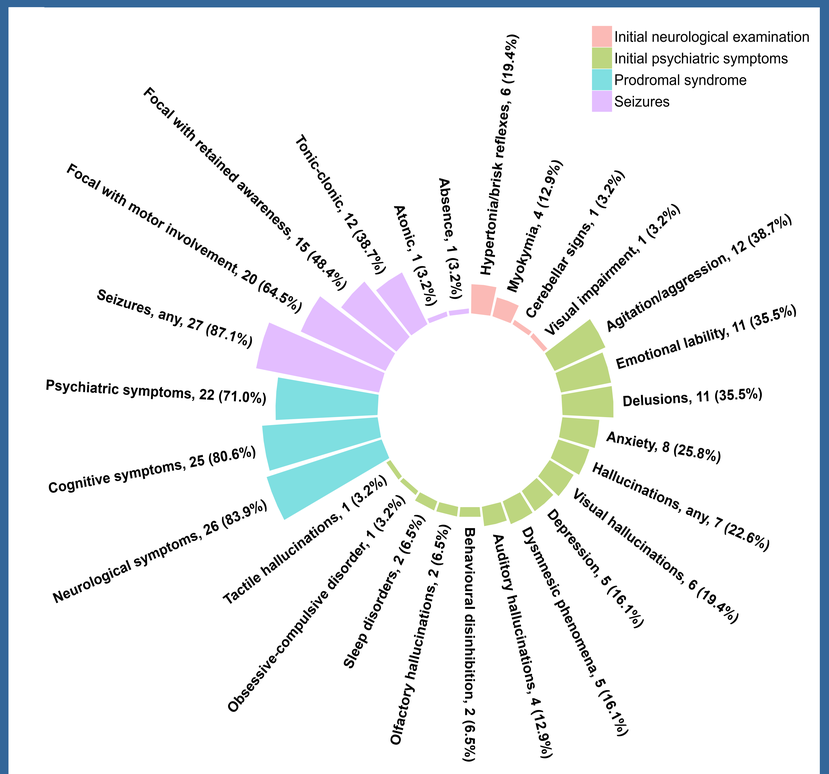


Figure 1: Relative prevalence of prodromal symptoms, initial neurological and psychiatric symptoms, and types of seizures.

Conclusion

•Cognitive impairment and/or psychopathology are rarely absent in LGI1 encephalitis.

•Future research should examine neuroimaging and EEG correlates of psychiatric and cognitive deficits.

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