

Reading EEGs - a practical approach

Lippincott Williams & Wilkins - Reading EEGs A Practical Approach, 1st Edition (2010) (PDF)
L. John Greenfield Jr.

Table 2 <i>Continued</i>	
Specific signs and symptoms	
Generalized or focal seizures—adult MELAS, encephalitis, rabies, Creutzfeldt-Jakob disease	
Prominent limbic symptoms—acute confusional limbic encephalitis, HIV/AIDS, seizure-related	
Respiratory symptoms—encephalitis with animal bite history or prior travel to rabies endemic areas—rabies	
Respiratory symptoms—Acute lung pneumonia, respiratory viruses	
Acute flaccid paralysis—WNV and other arboviruses, rabies	
Parkinsonism—Arbovirus, Toxoplasmosis, neuroleptic drugs, Acetaminophen	
Nonhealing skin lesions—Babesomata, melenoma, Acetaminophen	
Lymphadenopathy—Rickettsia, tick-borne diseases	
Elevated transaminases—rickettsia, tick-borne diseases	
CSF protein >100 mg/L, or CSF glucose <2/3 peripheral glucose, or lymphocytic pleocytosis—HIV/AIDS, Toxoplasmosis, Cryptococcosis, Mycobacterium avium complex—MTB and fungal testing, Mycobacterium praeponys, Angiostrongylus	
CSF eosinophilia—MTB and fungal testing, Mycobacterium praeponys, Angiostrongylus	
Erythrocytes in CSF—N. fowleri	
Neuroimaging features	
Frontal lobe—H. fowlie	
Temporal lobe—anti-VZV, basal ganglia or thalamus, Arbovirus, MTB	
Cerebellum—Epstein-Barr virus	
Diffuse cerebral edema—respiratory virus testing	
Meningoencephalitis—HIV/AIDS, Toxoplasmosis—MTB and fungal infections, B. moniliformis and Hydrococcinea, toxoplasmosis serology	
Hydrocephalus or basilar meningeal enhancement—MTB and fungal infections	
Encephalitis—respiratory virus testing	
Incorporates 50 enhancing lesions—ADEM	
Abbreviations: ADEM = acute disseminated encephalomyelitis; CMV = cytomegalovirus; HSV = herpes simplex virus; IgM = immunoglobulin M; IgG = immunoglobulin G; IgM antibody = IgM antibody; VZV = varicella-zoster virus; WNV = West Nile virus. Copyright © 2010 by Lippincott Williams & Wilkins. Reprinted from Greenfield LJ, eds. <i>Reading EEGs: A Practical Approach</i> . Philadelphia, PA: Lippincott Williams & Wilkins; 2010:111-120. Used with permission of Oxford University Press on behalf of the Infectious Diseases Society of America. This edition is a revised edition of the original publication, <i>Reading EEGs: A Practical Approach</i> , published in 2004. The original publication was a single volume containing 100 chapters. This revised edition contains 50 chapters, reflecting a more rationalized and organized approach to reading EEGs based on risk factors. We recommend utilizing this table as a guidance for initial management of patients with suspected encephalitis.	
*Lumbar puncture is recommended in all individuals with suspected encephalitis unless contraindicated (i.e., significant mass effect/edema, effacement of basilar cisterns on imaging; skin or soft tissue infection in needle path). See reference 56.	



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