Autoimmune encephalitis refers to a rare, under-recognized group of diseases where the body’s immune system mistakenly targets healthy brain cells leading to brain inflammation (brain swelling). Nerve cells may be damaged or destroyed. There are various types of autoimmune encephalitis and the individuals afflicted by these conditions can present with a whole variety of neurological and psychiatric symptoms. The symptoms typically develop over a few weeks or months, but they may occur over a few days.

In autoimmune encephalitis, the first sign is often behavior and personality change. These changes may be mild at first, but over the course of weeks, behavioral changes often worsen, and many patients are agitated or aggressive.

Delayed diagnosis is common, but improvements are being made to assist in early detection. Early diagnosis and treatment may improve the outcome. The role of cognitive, speech, and physical therapy are very important for recovery.

Neurologic symptoms can include memory/cognitive issues, seizures, uncontrollable movements, problems with speech as well as deficits with mobility and function. Catatonia and coma may follow. Some patients require admission to the ICU and in some instances, the use of mechanical ventilation and cardiac pacemaker.

Psychiatric symptoms can include psychosis (altered perception of reality), delusions (false beliefs), hallucinations (seeing or hearing things that others do not see or hear), aggression, and compulsive/repetitive behaviors.

The degree of impairment varies, but for some symptoms can be very severe. Affected individuals often require prolonged hospitalization and treatment. The recovery process is slow (often spending several months in the hospital and a few years of treatment), and many individuals are left with cognitive impairments and residual changes in behavior, which can be aided by cognitive, speech, and physical therapy.
HOW CAN AUTOIMMUNE ENCEPHALITIS AFFECT SCHOOL PERFORMANCE?

Children with AE are at risk of poor academic functioning because of the following:
- Deficits in executive functions (memory, inattention, poor organization)
- Cognitive deficits
- Severe headache
- Drowsiness
- Confusion
- Seizures
- Problems with senses or movement
- Uncontrollable movements
- Sudden change in blood pressure or heart rate

HOW CAN SCHOOLS ASSIST STUDENTS WITH AUTOIMMUNE ENCEPHALITIS?

ACADEMIC

- Start academic interventions under one of two laws: IDEA for Other Health Impairment or Section 504
- Include PT, OT and ST in relation to IEP.
- Set up homebound or intermittent homebound if the student will miss a lot of school.
  - Provide memory aides such as organizers and a detailed schedule for assignments.
- Provide a permanent pass to the nurse’s office.
- Assign a moderate workload.
- Extend due dates for lengthy projects during times of illness.

SOCIAL/ EMOTIONAL

- Provide counseling if the student becomes withdrawn or has difficulty with peers or adults.
- Conduct a staff in-service for those involved with the student.

PHYSICAL

- Allow for use of an elevator if stairs are a safety issue.
- Provide PT/OT/ST evaluations if needed.
- Provide an Individualized Health Plan (IHP)