

All prospectively identified patients were treated with a second course of IV acyclovir, and 4 received immunotherapy with improvement in 3.

**References.**

1. Armangue T, et al. *Ann Neurol.* 2014 Feb;75(2):317-23.

## **CONTINUOUS EEG IN ENCEPHALITIS**

Investigators from Rady Children's Hospital of San Diego, CA, reviewed records from all 217 children enrolled in the California Encephalitis Project 2004-2011. At least one seizure was observed clinically or recorded on EEG in 100 (46%) children. Diffuse slowing occurred in 88.9%, focal abnormalities in 63.2%, and epileptiform abnormalities in 57.3%. Continuous EEG for at least 1 day in 54 (25%) patients recorded a seizure in more than half of patients. In 22 (10%) children, a seizure was recorded by continuous EEG after routine EEG had failed to record a seizure. Overall, a continuous EEG was more likely to capture a seizure, capture a subclinical seizure, or rule out an event as a seizure than routine EEG ( $p < 0.0001$ ). (Gold JJ, Crawford JR, Glaser C, Sheriff H, Wang S, Nespeca M. The role of continuous electroencephalography in childhood encephalitis. *Pediatr Neurol* 2014 Apr;50(4):318-23).

COMMENTARY. Continuous EEG is an important diagnostic tool in the ICU, to identify nonconvulsive seizures or status epilepticus, aid in management of AED treatment, and to identify seizures in children with suspected encephalitis. An online survey of pediatric neurologists from 50 US and 11 Canadian institutions conducted in 2011 found the following common cEEG indications: altered mental status after status epilepticus (97%), altered mental status of unknown cause (88%). Median number of patients with cEEG per month per center increased from 6 per month in 2010 to 10 per month in 2011 in the US [1].

**References.**

1. Sanchez SM, et al. *J Clin Neurophysiol.* 2013 Apr;30(2):156-60.

## **BRAIN TUMORS**

### **COGNITIVE OUTCOME OF CRANIOPHARYNGIOMA**

Investigators from Carl von Ossietzky University, Oldenburg, and other centers in Germany, compared cognitive performance in a group of 15 patients with childhood craniopharyngioma and hypothalamic involvement and a group of 24 age- and intelligence-matched control subjects. IQ scores were mostly in the average range and not significantly different in patients and controls. Patients had significantly lower performance scores in tests of memory and executive functioning. Delayed recall performance was severely impaired in one-third of the patients. Compared with patients with low-grade hypothalamic involvement, those with high-grade involvement showed worse performance in executive functions and reduced functional aptitude for daily life actions. Preoperatively, only 1 patient was severely obese; postoperatively, most patients