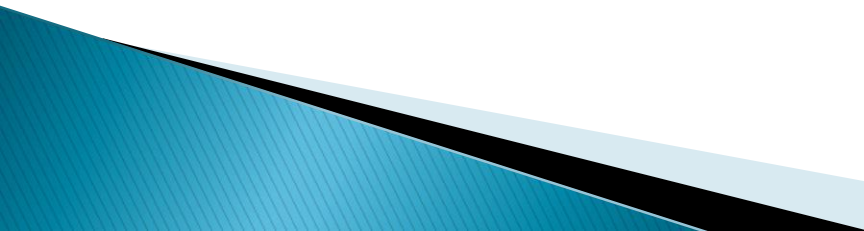


PANDAS & PANS

Reflections from a CAMHS consultant in
Scotland

Neuroimmunology Study Day

- ▶ Attended Neuroimmunology Study Day in April 2018 in Manchester
 - ▶ Once there, realised the involvement of PANS PANDAS Network in its organisation
 - ▶ Constructive discussion with clinicians and families there about PANDAS & PANS
 - ▶ Recognition that there was no Scottish clinician liaison with the UK PANDAS Physicians' Network
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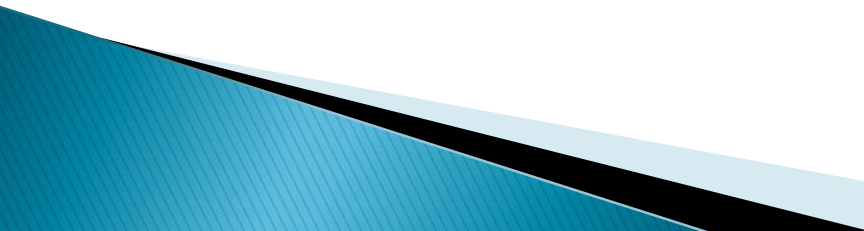
Further Steps

- ▶ Discussion with Dr Michael Morton
 - Recognition of the logical possibility of PANDAS as an entity given the existence and history of Sydenham's Chorea
 - Concerns about the validity of diagnostic criteria
 - Further concerns about robustness of evidence base around treatment
 - Final concerns about where this leaves families with possible PANDAS in terms of ensuring best treatment for them

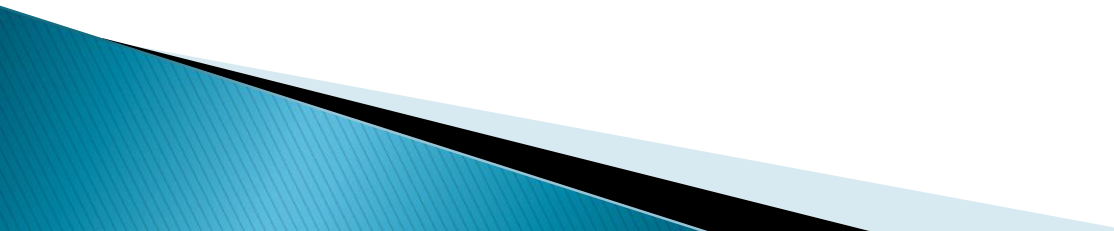
PANDAS Physicians' Network UK Guidelines

- ▶ Contribution made to the psychiatric treatment part of the guidelines
- ▶ Increasing referrals from paediatric neurology and requests for opinion from Tier 3 CAMHS

PANDAS – Diagnostic Criteria

- ▶ Presence of OCD and/or tics
 - ▶ First evident between age of 3 and puberty
 - ▶ Acute onset and episodic (relapsing–remitting course)
 - ▶ Association with Group A streptococcal infection
 - ▶ Association with Neurological Abnormalities
- 

Acute onset

- ▶ Clinical course is characterised by the abrupt onset of OCD or tic symptoms
 - ▶ Often the onset of a specific symptom can be assigned to particular day or week
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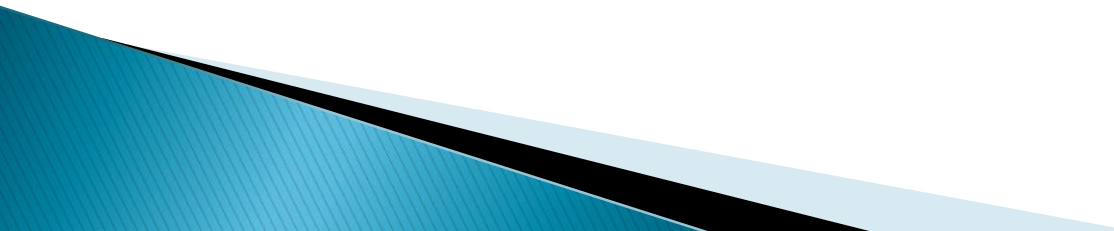
Episodic

- ▶ Relapsing–remitting pattern with abrupt, dramatic, debilitating exacerbations of existing symptoms at which time symptoms seem to explode in severity
- ▶ For this criteria to be met, tic exacerbation has to incapacitate patient

Association with Group A streptococcal (GAS) infection

- ▶ PANDAS, like Sydenham's Chorea, is about neuropsychiatric symptoms associated with an immunologic response
- ▶ Ix:
 - 24–48 hour agar cultures
 - ASO and AntiDNase B titres

Problem with ASO and Anti-DNase B titres

- ▶ Titres from a prior streptococcal infection can stay raised for many months creating a potential false positive association
 - ▶ 40% of children with documented GAS infections do not show a titre rise
 - ▶ Timing is critical in looking for the 2–4 fold rise in titre (1–4 weeks for ASO from initial infection and 6–8 weeks for Anti-Dnase B)
- 

Association with Neurological Abnormalities

- ▶ During symptom exacerbations, patients will often have abnormal results on neurological examination

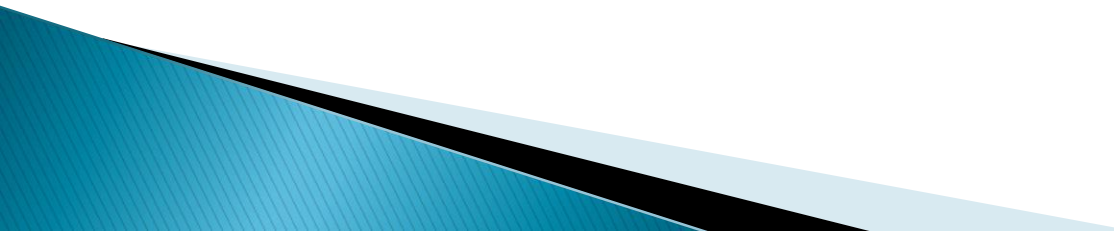
PANS

- ▶ Abrupt onset or recurrence of OCD or restrictive eating disorder
- ▶ Co-morbid neuropsychiatric symptoms (at least 2) with a similarly acute onset:
 - Anxiety, sensory amplification or motor abnormalities
 - Behavioural regression
 - Deterioration in school performance
 - Mood disorder
 - Urinary symptoms
 - Sleep Disturbance
- ▶ Symptoms not better explained by known neurologic or medical disorder

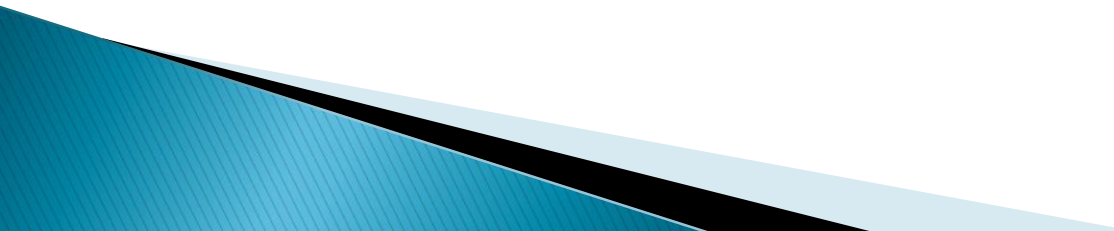
PANDAS in CAHMS

»» Perspective from a CAMHS
consultant in Scotland

Contact with UK PANDAS Physicians' Network

- ▶ Access to draft guidelines
 - ▶ Liaison with other clinicians across the UK network
 - ▶ Supported organisation of similar Neuroimmunology Study Day in Glasgow – October 2019
- 

Scottish Cases

- ▶ Families keen to see somebody perceived to have an understanding of PANDAS/PANS
 - ▶ Referrals from other specialties in hospital:
 - Neurology
 - Rheumatology
 - ▶ Requests for 2nd opinion from community CAMHS teams
- 

Assessment

- ▶ Paediatric Acute Neuropsychiatric Symptom Scale (Swedo)
- ▶ http://pandasnetwork.org/wp-content/uploads/2018/11/pandas_pans_scale.pdf
- ▶ <http://www.nepans.org/panspandas-rating-scalestracking-tools.html>
- ▶

PANDAS – Treatment

- ▶ If assessing with paediatrician, ensure consensus on diagnosis
- ▶ Contact GP to discuss diagnosis and fully inform them around the decision to trial antibiotics
- ▶ If antibiotic trial doesn't work:
 - Inform on evidence base for symptomatic treatments with PANDAS/PANS
 - Only proceed with discussion on other systemic interventions (e.g. steroids) if paediatrician is comfortable with this

PANDAS/PANS – The Future

- ▶ More clarity needed around diagnostic criteria and evidence-based treatment
 - ▶ More clinicians with understanding of PANDAS/PANS needed for families who either have a young person with PANDAS/PANS or have a young person with a debilitating presentation which may resemble PANDAS/PANS
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