

Neurological symptoms described in children with COVID-19

3 July 2020



acellular in the two patients whose [cerebrospinal fluid](#) was tested, with no evidence of infection on [polymerase chain reaction](#) or culture and negative oligoclonal band test results. A mild excess of slow activity was found in all three patients who underwent electroencephalography. Mild myopathic and neuropathic changes were seen in all three patients who underwent nerve conduction studies and electromyography. In all patients, there was neurological improvement, with two [patients](#) making a complete recovery by the end of the study.

"Clinicians should be adding SARS-CoV-2 to their [differential diagnosis](#) for children presenting with new neurologic symptoms," the authors write.

Two authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text](#)

Children with COVID-19 may present with new neurological symptoms involving the central and peripheral nervous systems, and splenic changes on imaging, according to a study published online July 1 in *JAMA Neurology*.

Omar Abdel-Mannan, M.D., from Great Ormond Street Hospital for Children in London, and colleagues reported neurological manifestations of [children](#) with COVID-19 in a case series involving patients younger than 18 years. Data were included for 27 patients with COVID-19 pediatric multisystem inflammatory syndrome.

The researchers found that four of the patients (14.8 percent) who were previously healthy had new-onset neurological symptoms, including encephalopathy, headaches, brainstem and cerebellar signs, muscle weakness, and reduced reflexes. All four required intensive care unit admission for treatment. In all four patients, splenic signal changes were seen on magnetic resonance imaging of the brain. Samples were

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