



GENERAL PRINCIPLES FOR TREATING PANS

Pediatric Acute-onset Neuropsychiatric Syndrome

Overview of Treatment of PANS

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Adapted from: Reference Table 1



Diagnose

PANS is a clinical disorder and "a diagnosis of exclusion" defined by abrupt onset of obsessive-compulsive symptoms and/or severe eating restrictions and at least two concurrent cognitive, neurological, or behavioral symptoms.

Chang et al. 2015



Psycho-Therapeutic

Utilize psychiatric medications and behavioral interventions as appropriate to provide symptomatic relief. Symptom presentations differ per child; therapies should be individualized and may require adjustment. "Start low & go slow".

Thienemann et al 2017



Anti-Microbial

Treat underlying infections. At the start of treatment for all PANS cases, a course of antibiotics is suggested even without a documented infection. Consider prophylactic or longer term therapeutic courses of antibiotics.

Cooperstock et al 2017



Immunomodulation

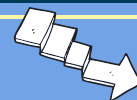
Treat symptoms caused by neuroinflammation or postinfectious autoimmunity with anti-inflammatory or immunomodulatory therapies based on disease trajectory and symptom severity. Therapy can be useful even after infections are cleared and biomarkers are no longer found.

Frankovich et al. 2017



Evaluate

Evaluate all treatments repeatedly to determine appropriate alterations based on symptoms worsening or improving. Treatments should correspond with the severity of the symptoms and disease trajectory.



Taper Treatment

Taper or stop treatment as symptoms resolve. If patient relapses, treatment must be resumed and continually evaluated as needed. Symptom course can be relapsing-remitting, chronic-static, or chronic-progressive.