

Web Table 1 Features of Autoimmune Encephalitis in Children

<i>Antibody syndrome</i>	<i>Antigen</i>	<i>Clinical features</i>	<i>Evaluation</i>	<i>Additional findings</i>	<i>Tumor-association</i>
<i>Antibodies to cell surface antigens</i>					
Anti-NMDAR	Amino terminus of NR1 subunit of NMDA receptor	Seizures, encephalopathy, dyskinesias, autonomic dysfunction, mutism.	Mesial temporal hyperintensity on MRI; Extreme delta brush on EEG	May follow herpes simplex encephalitis	Present Ovarian teratoma
Limbic encephalitis	Component proteins of the VGKC complex, leucine-rich glioma-inactivated 1 (LGI1) and contactin-associated protein-like 2 (Caspr2)	Limbic encephalitis, fever-related epileptic encephalopathy, status epilepticus and drug-refractory epilepsy. Caspr2-encephalitis includes features of peripheral nerve hyperexcitability including neuromyotonia and Morvon syndrome.	Mesial temporal/basal ganglia hyperintensity, white matter signal changes on MRI.	Typical facio-brachial dystonic seizures in anti-LGI1. Antibodies to VGKC complex may be positive in the absence of antibody positivity or LGI1 or CASPR2	Rare- thymus, lung
Anti-GABA-A receptor	Anti-gamma -amino butyric acid type A (GABA-A) receptor	Seizures and status epilepticus, movement disorders and memory impairment.	Mesial temporal hyperintensities on MRI.	A few cases described in children	Rare- thymus, Hodgkin lymphoma
Anti-GABA-B receptor	Anti-gamma -amino butyric acid type B (GABA-B) receptor	Limbic encephalitis or seizures.	Mesial temporal hyperintensity, cortical-subcortical hyperintensities on MRI.	Few reports in adolescent females	Lung, thymus
Anti-Glycine	Alpha-1 subunit of the receptor	Progressive encephalomyelitis with rigidity and myoclonus, as well as optic neuritis.	MRI usually normal	Reported in only a few cases of pediatric AIE.	None
Anti-D2 receptor	Amino terminus of dopamine D2 receptor	Parkinsonism, dystonia, lethargy, psychiatric intensities symptoms.	Bilateral basal ganglia hypermay be seen.	Rare	–
Anti-AMPA receptor	Target the glutamate receptor (GluR1) or (GluR2) subunit of the AMPA receptor	Limbic encephalitis		Extremely rare in children	–
Anti-mGluR5	Anti-metabotropic glutamate (mGluR5) receptor	Limbic encephalitis	May exhibit hippocampal hyperintensity on MRI.		Hodgkin lymphoma (Ophelia syndrome)
Anti-Neurexin-3 alpha	Neurexin-3 alpha	Anti-NMDAR like syndrome, orofacial dyskinesias, seizures, encephalopathy		After the initial report, findings not replicated	
Anti-DPPX	Dipeptidyl peptidase-like protein	Stiff-person syndrome, myoclonus, ataxia, tremor,		Diarrheal symptoms may be present	–

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		parkinsonism, opsoclonus myoclonus			
Anti-glutamate receptor	Glutamate receptor delta 2	Opsoclonus-myoclonus-ataxia syndrome (OMAS)	–	–	–
<i>Antibodies to intracellular antigens</i>					
Anti-Hu	Anti-neuronal nuclear antigen 1	Limbic encephalitis, drug refractory epilepsy	–	–	Paraneoplastic (neuroblastoma) and non-paraneoplastic
Anti-Ma2	Intracellular onconeural protein	Limbic encephalitis/brainstem or diencephalic dysfunction	–	Infrequent in children	Testicular tumors in males (young adults)
Anti-GAD	Glutamic acid decarboxylase (responsible for GABA synthesis)	Neuropsychiatric and memory impairment, focal seizures, pediatric stiff-person syndrome	MRI usually normal. May have hyperintensities in hippocampus, cerebellum.	Infrequent in children	Not described