

Fast Facts

Encephalitis

-Inflammation of the brain

-Most common reason is a viral infection, but bacterial infections and noninfectious conditions can cause it

-Some of the most common viral agents are herpes simplex virus 1 (HSV 1), herpes simplex virus 2 (HSV 2), Epstein-Barr virus (infectious mononucleosis), varicella-zoster virus (chickenpox & shingles), enteroviruses (poliovirus or coxsackievirus), mosquito-borne viruses (West Nile, La Crosse, St. Louis, western equine, and eastern equine), tick-borne viruses (Powassan), and rabies virus

-Certain childhood infections (measles, mumps, and rubella) can also cause it

-Two main types of encephalitis: primary and secondary

-Primary is when the virus or other infectious agent directly infects the brain. It can be widespread or concentrated and may be a reactivation of a virus that had been inactive after a previous illness

-Secondary comes from a faulty immune system response to an infection elsewhere in the body. Rather than attacking the cells causing the infection, the immune system attacks healthy cells of the brain. It typically occurs two to three weeks after an illness, which is why it's also known as post-infection encephalitis

<i>Symptoms</i>	<i>Treatment</i>	<i>Prevention</i>
<p><i>Mild:</i></p> <ul style="list-style-type: none"> -Headache -Fever -Aches in muscles/joints -Fatigue/weakness <p><i>Severe:</i></p> <ul style="list-style-type: none"> -Confusion/agitation/hallucinations -Seizures -Muscle weakness -Problems with speech/hearing -Loss of sensation -Paralysis of certain parts of the face/body -Loss of consciousness (coma) <p><i>Infants/Children:</i></p> <ul style="list-style-type: none"> -Bulging fontanel (soft spots of their skulls) -Nausea/vomiting -Body stiffness -Irritability 	<p><i>Mild:</i></p> <ul style="list-style-type: none"> -Bed rest -Plenty of fluids -Anti-inflammatory drugs (acetaminophen, ibuprofen, and naproxen) -Antivirals (acyclovir, ganciclovir, and foscarnet) <p><i>Severe (hospitalized):</i></p> <ul style="list-style-type: none"> -Breathing assistance -Intravenous (IV) fluids -Anti-inflammatory drugs (corticosteroids) -Anticonvulsants (to prevent seizures) <p><i>Complications:</i></p> <ul style="list-style-type: none"> -Physical therapy -Speech therapy -Occupational therapy 	<p><i>Avoid exposure to viruses:</i></p> <ul style="list-style-type: none"> -Wash hands frequently and thoroughly, especially after going to the bathroom and before/after meals -Don't share utensils or beverages -Teach children good hygiene habits -Keep vaccinations current, especially before traveling <p><i>Prevent spread of mosquito and tick-borne viruses:</i></p> <ul style="list-style-type: none"> -Dress in long-sleeved shirts and long pants -Avoid being out during dawn and dusk when mosquitoes are most active -Stay away from wooded areas with tall grasses and shrubs since this is where ticks live -Use repellents that contain DEET on skin and clothing (everyone three months old and older—just don't put it on kids hands since these often end up in their mouths)

<p>-Poor feeding/not waking for feeding</p>	<ul style="list-style-type: none"> -Be careful when applying repellent to the face, spray your hands and then wipe it on your face -If you're going to use sunscreen as well, put that on first. (Note: Do not use products that contain both DEET and sunscreen on children since reapplication can expose the child to too much DEET.) -For infants two-month-old and younger, cover their infant carrier or stroller with mosquito netting -Spray clothing and other outdoor gear with the insecticide permethrin (do not apply this to your skin) -Remove any sources of water around your house -If you notice sick/dying birds or animals in your area, contact your local health department
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