

PRESS INFORMATION

**“8th Meeting of the International Scientific Working Group on TBE
(TBE: Tick Borne Encephalitis)”
“TBE a European Health Challenge“
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Severity and Sequelae of TBE in children and adults

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As early as in the first description of FSME cases observed in Lower Austria between 1927 and 1931 it was pointed out that in addition to the meningitis, it was also possible for consciousness disorders, cerebral nerve pareses, lesions of the motor and sensory paths, and extrapyramidal motor symptoms to occur. Occasionally flaccid pareses of the extremities were observed, with respiratory paralysis and fatal outcome.

In neuropathological terms, a dot-shaped polio-encephalomyelitis with meningeal involvement is present, with main areas affected being the cervical part of the medulla, the brain stem hood, and the cerebellum. The large motor cores of the vertebral medulla and the cranial nerves are damaged. Spino-bulbar forms of FSME are reminiscent of polio.

In the majority of cases, there is a feverish preliminary period of illness, which lasts for two to seven days. After a fever-free interval of some days, fever recurs and neurological symptoms become apparent. The symptoms are more marked among older people, but severe forms also occur among children. Symptoms encountered are central and peripheral pareses, ataxia, cranial nerve paralysis (significant especially with regard to speaking and swallowing disorders), hypokinesias and hyperkinesias, epileptic attacks, speech disorders, other psychotic symptoms, with confusion and finally also respiratory difficulties. The meningitis form has a favourable prognosis, while with encephalitis the illness can be expected to last for weeks, and after myelitis the regression of the symptoms may take years and often remains incomplete. The residual symptoms occur more frequently if the peripheral nervous system was also affected during the acute phase. Sustained cognitive deficits can also have the effect of the patient being unfit for work for long periods of time.

Research into the quality of life after FSME has revealed shortcomings in terms of mood control, activity, and expectations for the future. There are also links with socio-economic factors (profession, income).