# PANDAS/PANS Advisory Council

# Diagnosis Workgroup

# MeetingJune 20, 2022 Approved Meeting Minutes

Via Zoom

**Present:** Sylvia Fogel MD; John Gaitanis MD; Julia (YuJuan) Zhang MD

**Not Present:** Melissa McCormack MD

# Meeting Agenda

1. Meeting called to order
2. Review and discuss research review
3. Create broad outline for our report—subject to change over time
4. Discuss next steps of work group
5. Set date and time for next meeting
6. Adjourn

**Group Members Reviewed Literature**

* Emphasis on broad presentation of immune dysfunction across a range of neuropsychiatric illnesses
* Discussed idea of molecular mimicry versus broader inflammatory process as anti-inflammatories can help with symptoms even though molecular mimicry may still be occurring.
* Antibiotics discussed in terms of anti-inflammatory properties
* Discussed idea of therapeutic trial of anti-inflammatory strategy (NSAIDs, steroids) when traditional approaches have failed—may be helpful diagnostically.

**Group Members Discussed a Broad Outline for Report**

Historical diagnoses—John

 Propose PANS as primary diagnostic focus with PANDAS subsumed by PANS

Emerging understanding of role immune system in host of neuropsychiatric syndromes, including traditional psychiatric diagnoses. Sylvia/John

 Depression/schizophrenia/OCD

Emphasize broad spectrum of clinical symptoms and immunological responses. Melissa (to be confirmed by her)

 “Core” symptoms

 Eating disorders/anorexia (not initially mentioned in historical papers)

 Global motor incoordination (ex. handwriting)

 Attention/executive dysfunction

 Anger/aggression/self-injury

 Sleep disturbance

 Hyper-adrenergic response –dilated pupils

 Repeated/cyclical worsening post immune challenge

 Subacute presentation

 Pre-existing or baseline neuropsychiatric issues or developmental issues do not rule out PANS and may increase risk (need literature here).

Confirmatory testing paragraph Julia

Diversity of immune findings

Simplify work-up but particular importance to labs that will guide treatment

CLINICAL DIAGNOSIS—sometimes labs will be WNLs

Diagnosis through therapeutic trial. Not assigned

Short course NSAIDs?

Short course steroids?

Possibly-Consider role of anti-inflammatory strategies in chronic or more traditional presentations of mental illness, especially if traditional treatments are not effective. Sylvia

**Group Members Discussed Presentation of Data in Chart Form in the Final Report.**

Discussed these examples:

Table: Clinical Overall Diagnosis of PANS

Table: Clinical presenting symptoms

Table: Initial work-up—confirmatory work-up

Table: Therapeutic treatment response

Table: Differential diagnosis

**Next Meeting: TBD**

**Meeting Adjourned**