

Abstract

Introduction: One of the commonest causes for non infectious encephalitis is autoimmune encephalitis which occurs by immune mediated inflammation of brain. NMDA receptor encephalitis is the commonest type

Case history: A 50 year old female presented with subacute onset alteration of behavior preceded by an acute febrile illness. She was diagnosed with NMDA receptor antibody positive autoimmune encephalitis and treated successfully.

Discussion: Anti NMDA receptor encephalitis is a very rare entity with 0.7 to 12.6 incidence for 100,000 population. Usual presentation is subacute onset neuropsychiatric manifestations which start with an acute febrile illness.

Detection of NMDA receptor antibodies in cerebrospinal fluid is diagnostic. First line treatment options are with immunosuppression, immunoglobulin and plasma exchange.

Conclusion: Early starting of appropriate first line followed by second line therapy appropriately will help good outcomes with NMDA receptor encephalitis.