



**Diagnosis**

- Biphasic presentation flu like illness followed by brainstem dysfunction.
- Positive CSF/Blood Culture in infectious causes.
- CSF pleocytosis in paraneoplastic syndrome's.
- MRI

(Infectious Etiology: Hyperintense lesion in brainstem and cerebellum  
Autoimmune etiology: Normal neuroimaging/hyperintense lesion in brainstem, CVT present in Behcet Disease)

**Treatment**

- Ampicillin and Acyclovir to treat the infectious etiology empirically.
- Followed by Iv Prednisolone and immuno-suppressive therapy(Azathioprine,cyclophosphamide,rituximab)
- Moderate response to IVIG and plasmapheresis
- Poor response to treatment after onset of neurology sequela
- Mortality rate of 10-15%