# Research and Clinical Highlights Enterovirus Meningitis in the Children-Clinical Spectrum, Viral Serotypes and Result

Levitzky Monteiro<sup>1\*</sup>, Maquart Fridman<sup>1</sup>, Guidi Fazilleau<sup>2</sup>

<sup>1</sup>Department of Allergy and Immunology, FAU Charles E. Schmidt College of Medicine, 2950 Cleveland Clinic Blvd, Weston, FL 33331, USA <sup>2</sup>Department of Allergy and Immunology 2950 Cleveland Clinic Blvd, Weston, FL 33331, USA

\*Correspondence: Levitzky Monteiro, Department of Allergy and Immunology, FAU Charles E. Schmidt College of Medicine, 2950 Cleveland Clinic Blvd, Weston, FL 33331, USA. E-mail: monteriro.l@hotmail.com

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#### Abstract

**Background:** picornavirus infectious disease is one in all the most typical viruses inflicting infectious disease in kids that is underdiagnosed. The medical specialty of energy unit infections isn't well studied within the geographical region and Arab Gulf Region. No Study was conducted in Asian country to explore additional concerning infectious agent infectious disease. This study can facilitate to review picornavirus infectious disease to guide management and patient care in Asian country and can facilitate to decrease the price of treatment by avoiding extra investigations.

**Aims:** This study demonstrates prevalence, clinical presentation and infectious agent serotypes of nonpolio picornavirus infectious disease among kids, but fifteen years admitted in Royal hospital; kid health department throughout the timeframe of 1/10/2015 to 29/04/2016. we tend to additionally aim to extend awareness among pediatrician and general practitioners to own an occasional threshold of investigation kids with typical presentation of picornavirus infectious disease and to guide the management set up which can facilitate in reducing the number of patient days and antibiotics usage.

**Methods:** A retrospective chart review study was conducted at Royal hospital, a tertiary care center in state of Asian country, throughout the amount between 2015-2016. All clinical aspects were studied together with clinical shows, laboratory findings and outcomes.

**Results:** A thirty-eight cases were enclosed within the study with nearly hour males compared to fourhundredth females. Among all symptoms studied, fever accounts for eighty-seven, headache sixty-six, fifty-two had neck stiffness clinically and solely Martinmas had bulging opening. Among alternative symptoms, lethargy is that the commonest symptoms with nearly Martinmas. metastasis infectious agent panel wiped out eighty-seven of the patients and PCR was positive for picornavirus in forty fifth compared to CSF picornavirus PCR that accounts for 18.4%.

**Conclusion:** we tend to conclude that picornavirus infectious disease has big selection of clinical presentation. it's delicate self-limiting infection in otherwise healthy kids with totally recover. Most of the cases failed to be needed prolonged antibiotics.

Key words: Enterovirus; Children-Clinical spectrum; Viral serotypes.

#### **INTRUDUCTION**

Meningitis is outlined as Associate in Nursing inflammation of the meninges caused by microorganism or viruses' infection [1]. infectious agent infectious disease isn't uncommon however is a smaller amount serious, and most of the time self-limiting. it's additional severe in kids but one month older and within the upset. However, it's vital to discover infectious agent infectious disease to rule out serious causes and to guide management set up.

Many viruses will cause infectious disease. Among these square measure non-polio Enteroviruses that square measure fiber polymer viruses. There square measure nearly of one hundred serotypes underneath animal virus family [2]. the most web site of replication is humor tissues within the gut and cavity that results in pathology that last for 3-5 days. when pathology phase; the viruses unfold into alternative organs like lungs, CNS, heart and liver. The period is around 3-6 days. Humans square measure the sole natural host of enteroviruses. Transmission of infection is by faecoral and metastasis routes. 10-20 million of symptomatic infections annually in United State thanks to picornavirus. they're additional rife among kids thanks to multiple factors together with situation, poor hygiene, and opportunities for dirty contamination in lower social economic countries [3].

The medical specialty of energy unit infections isn't well studied within the geographical region and Arab Gulf Region. In Saudi Arabia, there has been a big increase in EVs throughout period [5]. So far, no study was conducted in Asian country to appear for picornavirus infection among kids.

The Enteroviruses have a worldwide distribution, with marked summer/fall seasonality in temperate climates and high year-round incidence in tropical and semitropical areas. infectious agent polymer PCR is that the mothed accustomed diagnosed picornavirus [4].

This is a retrospective chart review study that appears into picornavirus infection in kids, its clinical presentation, strategies of diagnosing, outcome and additional management that helps the pediatricians to own a wider scoop in management and higher centered and efficient management set up.

# **METHODS**

#### Study

This is a quantitative descriptive study. A retrospective chart review study that conducted at the Royal hospital tertiary care center in Asian country. information was collected from electronic records of (Al-Shifa System) and transferred in information assortment sheet exploitation epi-data entry software system. during this study we tend to enclosed all kids but fifteen years older World Health Organization admitted in pediatric medicine words of Royal Hospital from 1/10/2015 to 29/04/2016 with history of fever, headache, photophobia and acoustic phobia with positive non-Polio picornavirus within the metastasis infectious agent panel or positive CNS multiplex PCR that differentiate it from poliomyelitis enteroviruses.

# **Statistical Analysis**

For information analysis, SPSS program was used. For descriptive functions, categorized variables was represented as percentages. Continuous variables were conferred as mean with variance.

Before conducting this analysis, moral approval and permission was obtained from Royal Hospital analysis Committee. Confidentiality was maintained throughout the analysis and the information was used for the analysis functions.

#### **RESULTS**

#### **Clinical Shows**

Duration of symptoms ranged between 25 days before presentation to the hospital. Median period of symptoms was three days before visiting the hospital is a lot of distinguished with forty seventh compared to alternative days a pair of, four and 5days with (24%, pure gold and five-hitter respectively). Fever is that the commonest symptoms that accounted for eighty-seven of symptoms then headache sixty-six and physiological reaction hr. Median fever was 38c degree. Neck pain was solely gift in forty seventh of symptoms. Photophobia accounts for twenty sixth compared to acoustic phobia 16 PF. alternative symptoms were enclosed within the study embrace lethargy, irritability, poor feeding, seizure, higher tract infection (URTI) symptoms, and abdominal pain. Among these symptoms, lethargy was a lot of distinguished in four patients (10.5%). higher metabolic process symptoms were solely gift in five-hitter. Among this cohort of youngsters, solely thirty fourth were having positive history of contact with sick folks. Out of all contact, solely five patients were having sick contact within the hospital ( $\sim 13\%$ ).

Clinical assessment of those kids showed neck stiffness was positive in fifty three, Kering's sign is positive in forty second vs fifty fifth were negative and not documented in three-D. Brudnizki's sign is positive solely in pure gold, negative in seventy four and a couple of not documented. Bulging porta solely gift in 100 percent (children but 2 years). Initial presentation to the hospital was of delicate to moderate in severity for all admitted kids and failed to get to severe unhealthiness throughout keep generally ward. Table one shows careful clinical assessment of the admitted kids.

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# Laboratory Findings and Neurologic Imaging

On admission, complete septic works up was done as well as, CBC, CRP, body waste culture, blood cultures, CSF analysis and metabolic process infectious agent panel. body fluid aldohexose level and platelets count were inside traditional vary, just one kid was having low blood sugar on presentation. Few cases were having slightly elevated living substance counts < a pair of the overall cohort. Details of all blood works up and CSF results square measure shown in tables down.

CRP in most of patients was virtually ~79% inside traditional target initial presentation to the hospital (CRP < 5mg/dl), however around twenty first were slightly higher than traditional vary. Serial CRP throughout admission, showed twelve-tone music raised of CRP levels that normalized before discharge. Blood cultures were sent all told patients. 100 percent of them were negative cultures for microorganism growth. metabolic process infectious agent panel was done on eighty-seven among the cohort. Out of total thirty-three samples of RVP, seventeen samples were positive ( $\sim$ 45%), fifteen samples were negative ( $\sim 40\%$ ) and vi samples ( $\sim 15\%$ ) weren't processed thanks to samples leak whereas transporting them to the research laboratory for analysis. body waste culture was done, and everyone negative all told thirty-eight patients.

Lumbar puncture was performed on thirty-five patients (92%) compared to three patients (8%) as family refused the procedure. This share of centesis performed during this cohort was thought-about important in sight of wrong belief of the families concerning disk and high refusal rate generally. we tend to detect that in seventy-four.3% of disk samples, CSF fluid was clear compared to 11.4% of bloody CSF and 5.7% of slightly murky CS. In ninety-two of the patients wherever disk was done; CSF cultures were negative vs V-E Day while not results as disk wasn't done.

CSF infectious agent PCR was drained thirty second of CSF samples. Around nineteen were positive of picornavirus vs nineteen were negative with CSF picornavirus. In sixtytwo CSF medicine PCR weren't done thanks to technical problems in medicine research laboratory.

CT scan was drained around  $\sim 16$  PF of patients in the main in those with prolonged recovery time > three days, trying to find any CNS complications. All CT scans were drained older kids. All CT scans were traditional except one kid (3%) with leptomeningeal sweetening. No brain

## **Therapies and Outcome**

53% of the patient received antibiotics treatment for total of ten days vs thirty second for 7days. solely a pair of received treatment over ten days. Median length of hospital stays was calculated as nine days., Empirical antibiotics were continued once the results of the CSF infectious agent PCR result as picornavirus infection was thought to be coinfection with alternative microorganism infection. sixty-six of the kids received solely empirical Mefoxin from the time of admission. 16 PF received each Mefoxin and medication. And virtually Martinmas received Mefoxin and antibiotic. None of them needed anti-epileptic medications. No admission in medical care unit throughout keep generally wards. All patients had full recovery with no sequels. Average recovery amount between 3-5 days once admission.

#### **DISCUSSION**

This study provides details concerning clinical presentation and laboratory findings of picornavirus infectious disease among thirty-eight kids admitted at tertiary care center. most of the patients given to our center at just once throughout winter season 2015, that isn't normally according throughout the winter season time wherever alternative studies showed peak of picornavirus infection throughout summer. However, we tend to couldn't study seasonal variation of the illness as solely few cases given when winter season.

In literatures, picornavirus was famous to possess high morbidity and mortality in pediatrics age teams, particularly infant and infants but one year getting on [6]. however recently, these morbidities and mortalities became less. Like alternative studies, picornavirus will gift at any ages. it's common to possess severe infection in infant, chiefly but period getting on. None of our population were but two weeks, thus most of them were having delicate to moderate course of the illness. Meningoencephalitis was normally caused by picornavirus. it's being according that 3 completely different manifestations were related to higher mortality related to picornavirus infection like carditis, liver disease and coagulopathy [7]. the nice outcome of this cohort may purpose to less invasive picornavirus inflicting infectious disease. one more reason might make a case for that almost all our study's population were aged quite one year (~ 68%) and every one of them with none co-morbidities.

tomography was done throughout this study amount. None of the kids needed follow up brain imaging.

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Older kids were given with classical infectious disease like image with fever, frontal headache, instinctive reflex and a lot of photophobia compared to acoustic phobia. Lethargy were commonest in newborn {infant|newborn baby|baby|babe|infant} and infant. however, fever is that the outstanding symptoms among each groups' infant and older kids. Another attention-grabbing finding detected during this study that metabolic process symptoms were seen in just five-hitter however metabolic process microorganism panel was positive of picornavirus in forty fifth of samples. Also, most of the history of contact was of infectious disease symptoms instead of metabolic process symptoms. we tend to find that from our cohort five patients were members of the family, 2 were cousins and 3 of them were siblings.

Clinical assessment, like alternative older kids, each neck stiffness and kering's sign were seen in patient with picornavirus infectious disease. Younger kids were having broad findings on assessment starting from (lethargy, bulging fontanelle and clinical seizure). alternative general examinations were routine [8].

Even though', there was a distinct vary of total white somatic cell counts in step with age. In our study, older kids have lower or traditional blood white blood corpuscle counts (WBC) compared to kids less one year with high white corpuscle within the blood. Among differential counts, blood disease was detected in kids > 1year getting on. All patients but one year getting on, given with either traditional or high lymphocytes counts. These findings may provide a clue concerning infection. serum globulin levels were at the start traditional in initial presentation; few cases were having slightly high serum globulin > five mg/dl that improved before discharge. In literature, Enteroviruses are transiently gift within the CSF throughout acute infection, however still thereupon we tend to get nineteen positive PCR out of solely thirty second of samples were sent. CSF pleocytosis count was conjointly varied in step with age. In general, kids but one year getting on were a lot of probably have higher white corpuscle counts in CSF compared to older kids WHO have lower or simply slightly higher CSF pleocytosis. Most of CSF samples showed higher lymphocytes in CSF compared to polymorphs in each age teams that was recorded as share in CSF research. CSF macromolecule were conjointly less in each teams and CSF aldohexose were traditional in CSF.

Radiological investigations in term of imaging is barely restricted to little range of patients with infectious disease normally. In our study, CT scan was even in patients WHO needed prolong time to recover despite being on treatment. Out of half dozen patients WHO had head CT, just one kid was having tissue layer improvement.

Most of those kids had superb recovery < three days throughout admission. Fever remained solely up to fortyeight hours when admission. Most of them were came to traditional baseline of their activities. It had been determined that at initial peak of unwellness these kids were treated sharply with antibiotics and medicament as there was at the start no clear clue of picornavirus infection. later as most of RVP and CSF medicine PCR was positive to picornavirus. several them were continued on antibiotics notwithstanding the result for average of ten days awaiting the CSF and or blood culture. however later when the initial range of patients; there was a complete amendment in apply of antibiotics period and period of admission as these kids got diagnosed supported clinical presentation and raised range of cases of picornavirus infection throughout the study amount. None of our patients needed anti-epileptics medications on discharge. This cohort had wonderful outcome with 100 percent of kids had full recovery. None of our patients were re-admitted once more inside when discharge with same complains.

# **CONCLUSION**

This is the primary single center study performed to review cases of picornavirus infection in kids. All cases were given with sterile infectious disease and central nervous system symptoms that largely seen in pediatrics people. Clinical presentation will vary between age teams, however no severe cases were according in our cluster of patients compared to alternative studies. Knowing the clinical presentation, blood, metabolic process microorganism panel and CSF investigations facilitates to early identification of picornavirus infectious disease and avoid unnecessarily antibiotics use and value investigations and help in expecting the result and direction the oldsters.

#### **CONFLICT OF INTEREST**

None.

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