

Practice Current

Clinical Question: "How do you treat anti-NMDA receptor encephalitis?"

In the absence of data from clinical trials, anecdotal experience and expert opinion become the main source of knowledge on which medical decisions are made. Clinical approaches and decision-making are apt to change over time and may differ between institutions, regions, and countries.

"Practice Current: An interactive exchange on controversial topics" allows neurologists to share their own best practices and see real-time survey results. Once preliminary data are collected, you will have access to a summary of the latest information on the topic and the opportunity to hear from an expert in the field.

Please keep in mind that there are no "right" answers. We want to know *your* practice, not what you predict others or the invited expert will say.

Once enough data are collected, results will be displayed on a world map. This dynamic network will give the readers a unique perspective on how neurologists at different stages of their careers and in different areas of the world approach the same clinical scenario.

Online participation will remain active and readers will have the option to participate again if their practice changes over time.

This broad exposure to different opinions is meant to help the reader learn from peers and to formulate or even modify his/her own point of view.

We look forward to your participation!

Sincerely,

Luca Bartolini, MD
Section Editor, *Neurology: Clinical Practice*

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Practice Current: How do you treat anti-NMDA receptor encephalitis?

Please note: These questions apply to newly diagnosed patients and NOT to relapses. Please choose the answers that best reflect your practice and limit free text to therapies that are not included. It is implicit that tumor removal, when present, is part of the 1st line treatment for all the following options.

* 1. What do you use for first line treatment?

- IVIG
- IVIG and high dose steroids
- Plasma exchange
- Plasma exchange, IVIG, and high dose steroids
- Plasma exchange, IVIG, high dose steroids, and rituximab
- Other (please specify)

* 2. What is the indication for second line treatment in your practice?

- Lack of improvement or worsening 1 week after 1st line treatment
- Lack of improvement or worsening 2 weeks after 1st line treatment
- Lack of improvement or worsening 3 weeks after 1st line treatment
- Lack of improvement or worsening 4 weeks after 1st line treatment
- Other (please specify)

* 3. What do you use for second line treatment?

- Repeat first line treatment
- Rituximab
- Rituximab + cyclophosphamide
- Mycophenolate
- Azathioprine
- Other (please specify)

* 4. What patient population do you treat?

- Adults (18 years and older) as a neurologist
- Children (0 - 18 years) as a neurologist
- Both (adults and children) as a neurologist
- Children (0 - 18 years) as a pediatric rheumatologist

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5. How many years have you been in practice?

- 1-4
- 5
- 5-10
- Over 10

6. What is your primary work setting?

- Academic Based
- Government Based
- Hospital Based
- Multispecialty Group
- Neurology Group
- Other Public or Private Hospital or Clinic
- Solo Practice

7. What is your current level of training?

- Faculty/Board certified physician
- Resident/Fellow
- Advanced Practice Provider
- None (Member of public)

*** 8. Do you currently reside in the United States?**

- Yes
- No

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Practice Current: Demographic Information

9. In what state is your practice located?

- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Florida
- Georgia
- Hawaii
- Idaho
- Illinois
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- Nebraska
- Nevada

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Practice Current: Demographic Information

* 9. In what country do you currently reside?

- Afghanistan
- Åland Islands
- Albania
- Algeria
- American Samoa
- Andorra
- Angola
- Anguilla
- Antarctica
- Antigua and Barbuda
- Argentina
- Armenia
- Aruba
- Australia
- Austria
- Azerbaijan
- Bahamas
- Bahrain
- Bangladesh
- Barbados
- Belarus
- Belgium
- Belize
- Benin
- Bermuda
- Bhutan
- Bolivia
- Bonaire, Sint Eustatius and Saba
- Bosnia and Herzegovina

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