A 20-year-old woman presented with 3 days’ history of fever and deteriorating consciousness. Physical examination showed positive Kerning sign. Brain MRI revealed hyperintensity involving bilateral thalamus and substantia nigra (figure). Although CSF tests...
for white blood cells, protein, glucose, chlorine, and TORCH antibodies were normal; Japanese encephalitis (JE) virus immunoglobulin M antibody was positive. Therefore, a diagnosis of JE was made. The patient recovered from coma, and brain lesions were disappearing after 3 months supportive care (figure). As a common human viral encephalitis in the world, JE is usually very severe with high case-fatality rate.1 Symmetric thalami and substantia nigra involvement are characteristic in JE.2

Author contributions
B. Zhang: study concept and design, acquisition and analysis of data, preparation of manuscript including figures. S. Liao: data analysis and interpretation. Y. Yang: acquisition and preparation of data. Z. Lu: study concept and design, data acquisition and interpretation, critical revision.

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Disclosure
The authors report no disclosures relevant to the manuscript. Go to Neurology.org/N for full disclosures.

References
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