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“MRI findings in a child with Neuromelioidosis”

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Manuscript

A 10-year-old boy presented with a 2-week history of fever, headache and altered mentation. Bulbar palsy, 2/5 right hemiparesis, meningeal signs were evident. CSF was notable for lymphocytosis, high protein, normal glucose and negative tuberculosis workup. MRI demonstrated hyperintensity along the white matter tracts suggestive of Neuromelioidosis (Figure 1) and was confirmed by antibody positivity to Indirect haemagglutination for *Burkholderia pseudomallei*. Child responded to six weeks induction therapy with Meropenem and is currently on eradication treatment with doxycycline. Propensity for spread along the white matter tract and brainstem neurotropism is the hallmark of Neuromelioidosis, especially the encephalomyelitis type¹.

ACCEPTED

Appendix 1: Authors

Name	Location	Contribution
Kaushik Maulik	Department of Pediatrics, JIPMER, Puducherry, India	Patient management, literature review and initial draft manuscript preparation
Gulrej Nisar Shaikh	Department of Pediatrics, JIPMER, Puducherry, India	Patient management, literature review and initial draft manuscript preparation
Ananthanarayanan Kasinathan	Department of Pediatrics, JIPMER, Puducherry, India	Concept and design of the study, critical review of manuscript, and final approval of the version to be published
Venkatesh Chandrasekaran	Department of Pediatrics, JIPMER, Puducherry, India	Concept and design of the study, critical review of manuscript, and final approval of the version to be published
Narayanan Parameswaran	Department of Pediatrics, JIPMER, Puducherry, India	Concept and design of the study, critical review of manuscript, and final approval of the version to be published
Niranjan Biswal	Department of Pediatrics, JIPMER, Puducherry, India	Clinician-in-charge, concept and design of the study, critical review of manuscript, and final approval of the version to be published.

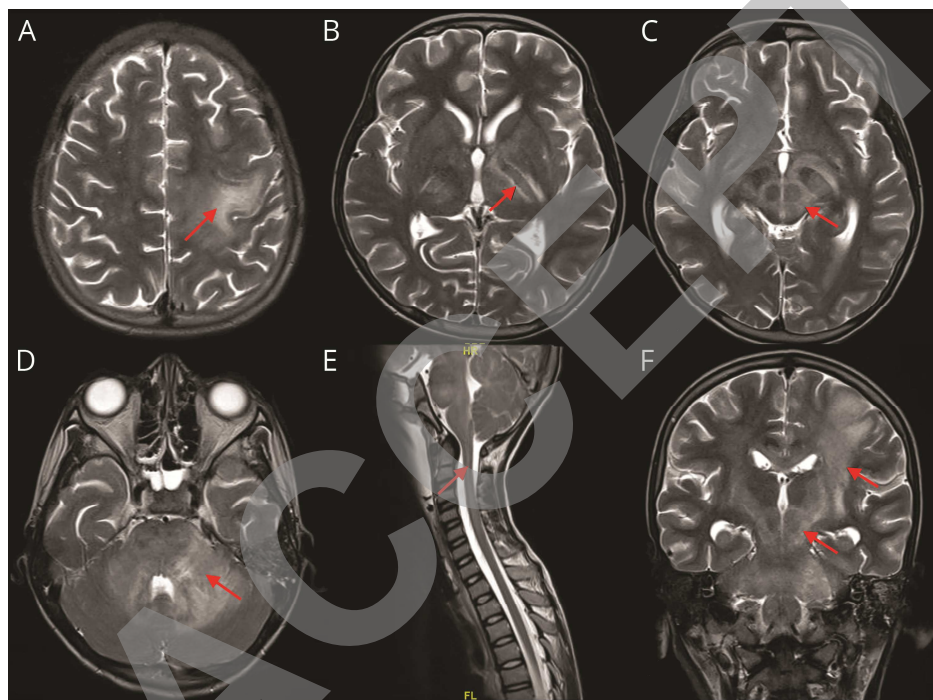
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Figure title: MRI brain images of index child with neuromyeloidosis

Figure legends

Axial T2 weighted Brain MRI reveals hyperintensities in the left post central gyrus and centrum semiovale [a], left posterior limb of internal capsule [b], midbrain tegmentum [c], pons, middle cerebellar peduncle and dentate nucleus of cerebellum[d]. Sagittal T2 spine reveals brainstem and cervical spine hyperintensities. Spread along the white matter tracts across longitudinal and commissural fibers is noted in T2 coronal view[f]



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