



Brain [^{18}F]FDG-PET as a marker of disease activity in a case of CASPR2 limbic encephalitis

Sara Cornacchini^{1,2} · Alice Monaci^{3,4} · Mattia Schiavolin^{1,2} · Eleonora Rosati² · Luca Massacesi^{1,2} · Valentina Berti^{3,4} · Valentina Damato^{1,2}

Received: 1 March 2025 / Accepted: 28 March 2025 / Published online: 7 April 2025
© The Author(s), under exclusive licence to Springer-Verlag GmbH Germany, part of Springer Nature 2025

The role of brain [^{18}F]fluoro-deoxy-glucose positron emission tomography ([^{18}F]FDG-PET) in the diagnosis of autoimmune encephalitis is becoming increasingly significant, due to its higher sensitivity compared to brain magnetic resonance imaging (MRI) [1]. However, data on the clinical utility of brain [^{18}F]FDG-PET in monitoring treatment response and relapse occurrence are still limited.

A 60-year-old man developed CASPR2 limbic encephalitis characterized by focal left temporal epileptic seizures, anhedonia and severe short-term memory impairment. During the acute phase, while brain MRI was normal, brain [^{18}F]FDG-PET showed intense left mesial temporal hypermetabolism. Sequentially treatment with corticosteroids, plasmapheresis and rituximab led to a dramatic clinical improvement but drug-resistant focal epilepsy, mood and memory disturbances persisted (consistent with extensive neuropsychological tests). According to the symptoms, in the following years, follow-up brain [^{18}F]FDG-PET scans showed a progressive decrease of the left mesial temporal metabolism. Four years after disease onset, the patient experienced increased epileptic seizures and severe memory deficits. Again, while brain MRI was normal, brain [^{18}F]FDG-PET showed new bilateral mesial temporal hypermetabolism. Sequentially treatment with corticosteroids,

cyclophosphamide and tocilizumab led to a reduction of the symptoms corresponding to a decreased hypermetabolism at the [^{18}F]FDG-PET scan. The semiquantitative analysis of the metabolic activity of the temporo-mesial lobe regions was consistent with the different stages of disease, showing an increased metabolism of [^{18}F]FDG-PET during acute phase and relapses and a normalization of metabolism in association with therapy response and symptoms remission. Our experience supports the use of [^{18}F]FDG-PET as a useful tool to measure disease activity and evaluate treatment response in the management of anti-CASPR2 encephalitis, as already described in other type of autoimmune encephalitis [2].

✉ Sara Cornacchini
sara.cornacchini@unifi.it

¹ Department of Neurosciences, Psychology, Drug Research and Child Health (NEUROFARBA), University of Florence, Florence, Italy

² Department of Neurology 2, Careggi University Hospital, Florence, Italy

³ Department of Biomedical Experimental and Clinical Sciences Mario Serio, Florence, Italy

⁴ Nuclear Medicine, Careggi University Hospital, Florence, Italy

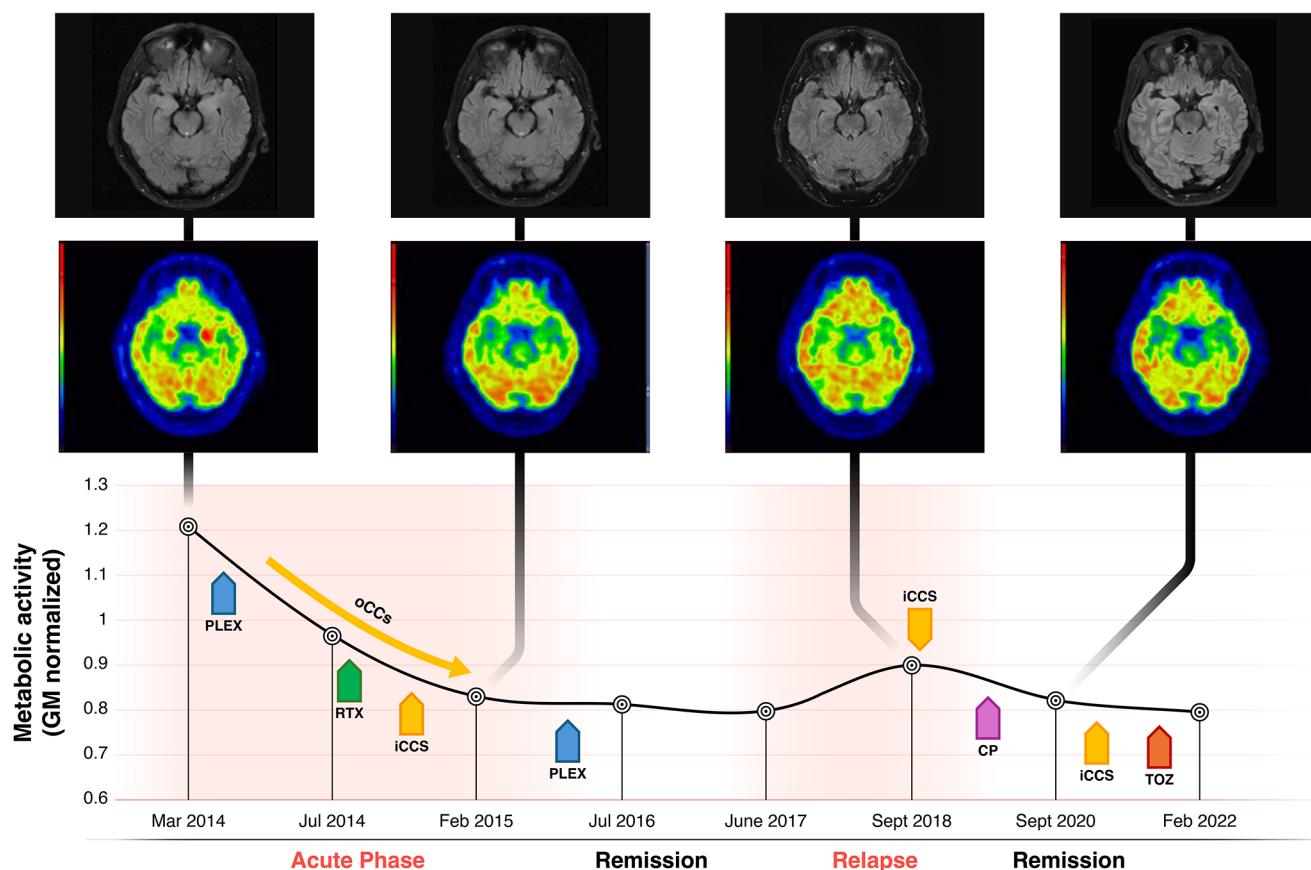


Fig. 1 Semi-quantitative analysis of the metabolic activity observed in [^{18}F]FDG-PET at consecutive disease timepoints, with relative MRI scans and immunotherapies administered. Abbreviations: [^{18}F]FDG-PET=fluorodeoxyglucose-positron emission tomography; GM=grey

Author contributions All authors contributed to the study conception and design. Material preparation, data collection and analysis were performed by Sara Cornacchini, Alice Monaci, Mattia Schiavolin, Valentina Berti and Valentina Damato. The first draft of the manuscript was written by Sara Cornacchini and all authors commented on previous versions of the manuscript. All authors read and approved the final manuscript.

Funding The authors declare that no funds, grants, or other support were received during the preparation of this manuscript.

Data availability All data generated or analysed during this study are included in this published article.

Declarations

Competing interests The authors have no relevant financial or non-financial interests to disclose.

matter; PLEX=plasmapheresis; RTX=rituximab; iCCS=intravenous corticosteroids; oCCS=oral corticosteroids; CP=cyclophosphamide; TOZ=tocilizumab

Written informed consent Written informed consent was obtained from the patient.

References

1. Bordonne M, Chawki MB, Doyen M, Kas A, Guedj E, Tyvaert L, et al. Brain 18F-FDG PET for the diagnosis of autoimmune encephalitis: a systematic review and a meta-analysis. *Eur J Nucl Med Mol Imaging*. 2021;48:3847–58.
2. Liu X, Shan W, Zhao X, Ren J, Ren G, Chen C et al. The clinical value of 18F-FDG-PET in autoimmune encephalitis associated with LGI1 antibody. *Front Neurol*. 2020;11.

Publisher's note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.