GUILLAINE-BARRÉ SYNDROME IN CHILDREN (ABSTRACT)*. DISSERTATION. SÃO PAULO, 2003.

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Subject: The aim of the study was to trace the epidemiologic, clinical, laboratory and evolution profile of Guillain-Barré syndrome (GBS) casuistics at the Instituto da Criança of Hospital das Clínicas of Faculty of Medicine of the University of Sao Paulo (FMUSP) between 1989 and 2000.

Method: Patients were studied retrospectively and casuistic was defined by consulting Instituto da Criança data base and data was collect through a structured protocol.

Results: From the 61 patients that fulfilled the selection criteria, aged between 7 months to 13 years old, no sexual or seasonal variation was observed. A clinical event prior to neurological symptoms (with a medium gap of time of 20.7 days) was observed in 62.3%, 55% had cranial nerve disturbs, 27.9% dysautonomic symptoms, and 27.9% respiratory dysfunction. The progression time varied from 2-40 days, Plato from 0-28 days and recuperation from 30-480 days; 94% had a complete clinical recuperation. ENMG in 20 patients disclosed a demyelinating pattern in 15, exclusively motor axonal pattern in 4 and a mixed pattern in 1 patient.

Conclusion: The results obtained did not differ from those in literature but it was observed that boys and older children had a recuperation time longer. It was not possible to ascertain ENMG with clinics and evolution due to the reduced number of patients submitted to this evaluation.

KEY WORDS: Guillain-Barré syndrome, acute flacid palsy, children, epidemiology, prognosis.


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Visual handicap children have many difficulties in discovering and knowledge about their own body, all the objects around and the indispensable concept of space necessary to realise correct locomotor movements and to get independent mobility.

Objective: The purpose of this study is to evaluate and compare the neuropsychomotor development of seven-year-old children who have normal vision and blind children, through the evolutionary neurological examination.

Method: The evolutionary neurological examination (ENE), standardized by Lefèvre et al. in 1976, comprises a battery of tests aiming at the semiology of the seven-year-old child neurological functions.

Results: We observed, according to the Lefèvre neuropsychomotor development evaluation scale, difference between the two groups it were found in the tests which evaluate the static balance (p < 0.02) and appendicular coordination (p < 0.001).
The children were submitted to an instability, due to the absence of two of their mechanisms to keep balance: the visual information and proprioception, remaining only the vestibular system, statistically corroborating that the vision interferes in the blind child balance.

Conclusion: The blind children have a neuropsychomotor development deficit in comparison to the ones with normal vision (p < 0.001).

KEY WORDS: visual deficiency, blindness, neurological development, evolutive neurological examination.

NARCOLEPSY: WAY BEYOND SLEEP - EGO’S ADAPTIVE EFFICIENCY, PSYCHOLOGICAL EQUILIBRIUM AND UNCONSCIOUS DESTINATIONS. (ABSTRACT)*

Narcolepsy is a chronic brain disorder characterized by excessive daytime sleepiness and sleep attacks. It affects up to one in a thousand people. Rapid eye movement (REM) sleep phenomena such as cataplexy, sleep paralysis and hypnagogic hallucinations can also occur. The condition impinges on every aspect of life, and can make it difficult for sufferers to keep their jobs as well as personal relationships. There can be accident risks caused by the excessive sleepiness and cataplexy. It is believed to be caused by an interplay between genetic and environmental factors. The risk of first-degree relatives is estimated at 1-2%. Patients with narcolepsy have recently been shown to be deficient in hypocretin, also called orexin, in the cerebrospinal fluid and have a reduction in hypocretin cell in the lateral hypothalamus.

The present study characterizes a sample of 23 patients suffering from narcolepsy, of which 15 female and 8 male patients, 44 years-old in average. They had their adaptive efficiency evaluated by R. Simon’s Adaptive and Operationalised Diagnostic Scale (AODS). Major sleep disorders and their effects on patient’s life quality were surveyed by Giglio’s Sleep Questionnaire. Intensity of sleepiness was evaluated through Epworth Sleepiness Scale. Mind functioning dynamics was assessed by Phillipson Test obeying psychoanalytic theoretical presuppositions.

Up to the moment, results show that: 1) narcolepsy is associated to serious damage to adaptive efficiency, with moderate and severe inefficient adaptation, prevailing in most patients; 2) severe excessive daytime sleepiness, sleep attacks and fractioned nocturnal sleep are frequent in most of patients even when medicated with stimulants; 3) the analysis through the Object Relations Test showed that these patients presented responses that for most of the time, impede their progress. Paranoid-schizoid position defense mechanisms were frequent, with fears of being rejected and abandoned. The Object Relations Test revealed interpersonal links impairment, mainly in group and triangular situations.

KEY WORDS: narcolepsy, sleep, sleep disorders, psychology.