

**P121.****Kinsbourne syndrome as complication of a *Mycoplasma pneumoniae* infection**

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Introduction

Kinsbourne syndrome also known as opsoclonus-myooclonus-ataxia syndrome or more commonly dancing-eye and feet syndrome is a rare neurological disorder affecting infants and toddlers previously healthy averagely aged from 6 to 36 months. The pathophysiology is not perfectly understood but seems to involve a dysimmune process; its etiology is either paraneoplastic or parainfectious.

Case report

We describe the case of a five-year old boy without relevant medical history, who presented a left bronchopneumonia complicated by a major pleural effusion. Acute *Mycoplasma pneumoniae* infection was confirmed by blood serology and by PCR performed on pleural fluid. Significant clinical improvement was observed after starting antibiotic therapy with Clarithromycin and then Moxifloxacin administered for a total of 15 days. From day 10, he abruptly presented rapid, irregular and multidirectional eye movements associated with myoclonias of the extremities of the upper limbs and the face, and orthostatic ataxia. He also demonstrated low frustration tolerance and recurrent nocturnal awakenings that were previously absent. Complementary explorations including abdominal echography, chest x-ray, Neuron-Specific Enolase (NSE) blood and urinary catecholamine tests, and brain MRI excluded a neoplastic etiology such as neuroblastoma. A diagnosis of Kinsbourne syndrome was made. The child quickly showed a spontaneous favorable evolution with a total recovery after 6 weeks.

Conclusion

Few cases of Kinsbourne syndrome secondary to *Mycoplasma pneumoniae* infection are described in present literature. Here, we present the rare case of a young boy who spontaneously demonstrated a favorable evolution without immunomodulatory treatment.

Key words

*Mycoplasma pneumoniae*, Kinsbourne syndrome, abnormal movements