

<i>Diagnosis</i>	<i>Features of this case support <span style="color: #00AEEF;">■</span> / not support <span style="color: #C00000;">■</span> the diagnosis</i>
Reye syndrome	antecedent infections, elevated serum aminotransferase
	elevated CSF protein, no hypoglycemia, no hyperammonemia, multifocal/symmetric brain lesions affecting the bilateral thalami and pons
Leigh syndrome	lesions affecting the bilateral thalami and pons
	acute onset, monophasic course, no lesions affecting the periaqueductal gray matter of the midbrain/substantia nigra/inferior olivary nucleus/optic nerves/spinal cord
Deep cerebral venous thrombosis	acute onset, lesions affecting the bilateral thalami
	no evidence for occlusion of deep cerebral venous (vein of Galen or straight sinus)

Figure e-1. Differential diagnoses of adult patients with presentations suggestive of ANE <sup>1 2</sup>

## References

1. Mizuguchi M, Abe J, Mikkaichi K, Noma S, Yoshida K, Yamanaka T, Kamoshita S. Acute necrotising encephalopathy of childhood: a new syndrome presenting with multifocal, symmetric brain lesions. J Neurol Neurosurg Psychiatry. 1995;58:555-61.
2. Mizuguchi M. Acute necrotizing encephalopathy of childhood: a novel form of acute encephalopathy prevalent in Japan and Taiwan. Brain Dev. 1997;19:81-92.