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Title: EARLY LANCE-ADAMS SYNDROME AFTER CARDIAC ARREST: PREVALENCE, TIME TO RETURN TO AWARENESS, AND OUTCOME IN A LARGE COHORT

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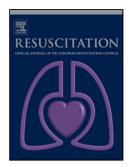
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ACCEPTED MANUSCRIPT

1 2 3	EARLY LANCE-ADAMS SYNDROME AFTER CARDIAC ARREST: PREVALENCE, TIME TO RETURN TO AWARENESS , AND OUTCOME IN A LARGE COHORT
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11 12 13 14 15 16	* Corresponding author. Service de Neurologie, CHUV-BH07, CH-1011 Lausanne, Switzerland. Tel.: +41 21 314 1220; fax: +41 21 314 1290
17	Abstract
18	Introduction Early myoclonus after Cardiac Arrest (CA) is traditionally viewed as a poor
19	prognostic sign (status myoclonus). However, some patients may present early Lance-Adams
20	syndrome (LAS): under appropriate treatment, they can reach a satisfactory functional outcome.
21	Our aim was to describe their profile, focusing on pharmacologic management in the ICU, time
22	to return of awareness, and long-term prognosis.
23	Methods Adults with early LAS (defined as generalized myoclonus within 96 hours, with
24	epileptiform EEG within 48 hours after CA) were retrospectively identified in our CA registry
25	between 2006 and 2016. Functional outcome was assessed through Cerebral Performance
26	Categories (CPC) at three months, CPC 1-2 defined good outcome.
27	Results: Among 458 consecutive patients, 7 (1.5%) developed early LAS (4 women, median age
28	59 years). Within 72 hours after CA, in normothemia and off sedation, all showed preserved
29	brainstem reflexes and localized pain. All patients were initially treated with valproate,
30	levetiracetam and clonazepam; additional agents, including propofol and midazolam, were
31	prescribed in the majority. First signs of awareness occurred after 3-23 days (median 11.8); 3/7
32	reached a good outcome at three months.
33	Conclusion: Early after CA, myoclonus together with a reactive, epileptiform EEG, preserved
34	evoked potentials and brainstem reflexes suggests LAS. This condition was managed with a
35	combination of highly dosed, large spectrum antiepileptic agents including propofol and
36	midazolam. Even if awakening was at times delayed, good outcome occurred in a substantial
37	proportion of patients.

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