### Status of Vitamin D in Children with Pediatric Acute-Onset Neuropsychiatric Syndrome (PANS)

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# RATIONALE

- Numerous studies have indicated an association between vitamin D deficiency and the immune dysregulation and the pathogenesis of autoimmunity.
- An increased prevalence of vitamin D deficiency has been demonstrated in several pediatric autoimmune diseases, including autoimmune thyroid disease and Type-1 diabetes mellitus.
- Identification of children with Vitamin D deficiency may lead to the opportunity to influence the risk factors lead to the development of autoimmune diseases by vitamin D supplementation.

### OBJECTIVE

This study was undertaken to determine the prevalence of vitamin D deficiency in children with PANS/PANDAS, an autoimmune disorder characterized by abrupt-onset neuropsychiatric symptoms, often associated with infections such as Group A Streptococcus.

## **METHODS**

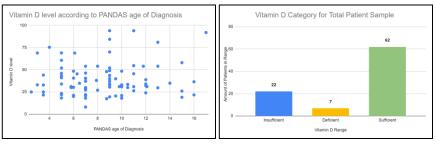
- A chart review was performed retrospectively from a single PANS/PANDAS treatment center. Data from patients who presented to the specialty clinic for evaluation of PANS/PANDAS was collected. Additional information collected included 25-hydroxy vitamin D levels, age, gender, race, and age of diagnosis.
- Vitamin D status was stratified into three groups; deficiency (0 to < 20 ng/ml), insufficiency (20 to < 30 ng/ml), and sufficiency (30-100 ng/ml) (1). Patients were also stratified into two age groups; child (< 12 years old) and adolescent (12-17 years old).

# RESULTS

 91/129 patients with the diagnosis of PANS/PANDAS were able to be evaluated.

Deficient	Insufficient	Sufficient	Total (n=91)
6 (8%)	18 (24%)	51 (68%)	75
1 (6.3%)	4 (25%)	11 (68.8%)	16
4 (8.3%)	12 (25%)	32 (66.7%)	48
3 (7%)	10 (23.3%)	30 (69.8%)	43
7 (7.7%)	22 (24.2%)	62 (68.1%)	91
	6 (8%) 1 (6.3%) 4 (8.3%) 3 (7%)	6 (8%)       18 (24%)         1 (6.3%)       4 (25%)         4 (8.3%)       12 (25%)         3 (7%)       10 (23.3%)	6 (8%)       18 (24%)       51 (68%)         1 (6.3%)       4 (25%)       11 (68.8%)         4 (8.3%)       12 (25%)       32 (66.7%)         3 (7%)       10 (23.3%)       30 (69.8%)

#### Table 1. Prevalence of vitamin D status by age and gender.



#### **Figure 1**. Age at PANS/ PANDAS diagnosis vs. 25-bydroxy vitamin D.

**Figure 2.** Vitamin D status of PANS/PANDAS pediatric population.

	PANS/PANDASCohort	US Child Cohort	
Vitamin D Deficiency	7.7%	9%	
Vitamin D Insufficiency	24.2%	61%	

#### Odds Ratio: 0.843505 95% CI (-2.91 to 4.59)

**Table 2.** Prevalence of vitamin D status is shown in the PANS/PANDAS cohortcompared with the prevalence in a recently studied in a general US pediatricpopulation.(Kumar 2009 *Pediatrics*). The Odds Ratio comparing the two cohorts isnoted, indicating a lower rate of vitamin D deficiency or insufficiency in thePANS/PANDAS cohort studied, versus the general US pediatric population.

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# **CONCLUSIONS/DISCUSSION**

- Results indicate that our patient population of children with PANS/PANDAS had a lower risk of vitamin D deficiency and insufficiency status than those of the general US pediatric population regardless of their age or gender.
- The results are inconsistent with the high prevalence of vitamin D deficiency/insufficiency status reported in children with other autoimmune diseases.
- Various factors that contribute to this negative study:
  - 97.7% of our patients are white (non-Hispanic). Children in our cohort were disproportionately skewed toward white race and a higher socioeconomic status than participants in the general US pediatric comparator study. Children with skin-of-color and lower socioeconomic status have a higher risk factor for vitamin D deficiency/insufficiency.
  - A higher rate of vitamin supplementation may have been present in our PANS/PANDAS cohort, due to earlier and more frequent medical evaluation and intervention, diagnostic delays and challenges contributing to higher nutritional interventions, and/or parental choice.
- More studies are needed to evaluate a larger, more diverse population of children with PANS/PANDAS and vitamin D status at earlier time points, prior to supplementation.
- Although our cohort population is small and from a single center, results also suggest that PANS/PANDAS may be underdiagnosed in children with skin-of-color and in those with lower socioeconomic status.

# REFERENCES

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