

## **HB 2510 STAFF MEASURE SUMMARY**

### **House Committee On Health Care**

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**Prepared By:** Oliver Droppers, LPRO Analyst

**Meeting Dates:** 1/29, 3/7

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#### **WHAT THE MEASURE DOES:**

Creates PANDAS/PANS awareness day in Oregon on October 9 of each year.

*REVENUE: No revenue impact.*

*FISCAL: No fiscal impact.*

#### **ISSUES DISCUSSED:**

- Families and children adversely impacted by PANDAS; acute and long-term health implications for children diagnosed with medical condition
- Acute onset and severity of symptoms among children diagnosed with PANDAS
- Importance of early diagnosis by clinician and immediate treatment
- Denial of testing and treatment modalities by insurers

#### **EFFECT OF AMENDMENT:**

No amendment.

#### **BACKGROUND:**

The National Institute of Mental Health defines pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections (PANDAS) and pediatric acute-onset neuropsychiatric syndrome (PANS) as pediatric disorders that often appear in childhood from age 3 to 12. The diagnosis of PANDAS is a clinical diagnosis based on diagnostic criteria by a health care professional. Symptoms may include motor or vocal tics, obsessions, compulsions, or a combination of these. PANDAS is a diagnosis given to children who experience a sudden and dramatic onset or worsening of Obsessive Compulsive Disorder (OCD) and/or tic disorders following a streptococcal infection. Children diagnosed with PANDAS may also experience anxiety, inattention, trouble sleeping, and changes in motor skills, among other symptoms.

A distinction between PANDAS and PANS is that children diagnosed with PANS have no association with an underlying streptococcal infection. Both PANDAS and PANS are described in the medical literature as episodic conditions, and individuals diagnosed with PANDAS or PANS are expected to experience periods of symptom reduction or remission with the disorders.

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