

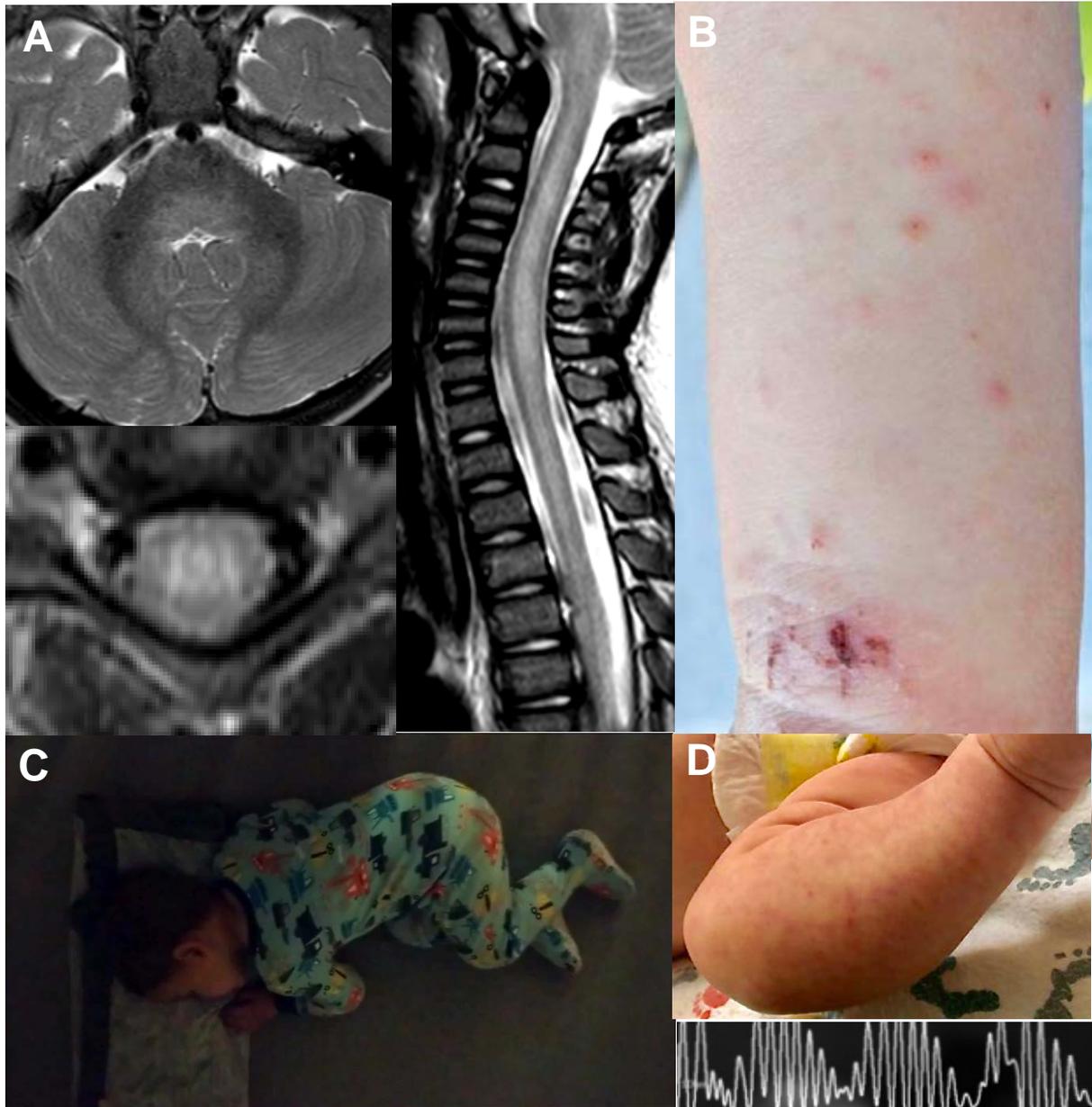
THE LANCET Infectious Diseases

Supplementary webappendix

This webappendix formed part of the original submission and has been peer reviewed. We post it as supplied by the authors.

Supplement to: Messacar K, Spence-Davison E, Osborne C, et al. Clinical characteristics of enterovirus A71 neurological disease during an outbreak in children in Colorado, USA, in 2018: an observational cohort study. *Lancet Infect Dis* 2019; published online Dec 16. [https://doi.org/10.1016/S1473-3099\(19\)30632-2](https://doi.org/10.1016/S1473-3099(19)30632-2).

Supplementary Figure: Representative Findings from Children with Enterovirus A71-Associated Neurologic Disease at Children’s Hospital Colorado August 1-October 31 2014.



Panel A: Brain and Spinal Cord Magnetic Resonance Imaging Changes. Abnormal T2 hyperintensity in the dorsal pons and dentate nuclei of the cerebellum in a child with EV-A71 brainstem encephalitis (upper left). Longitudinal T2 hyperintense lesion in the gray matter of the spinal cord in a child with EV-A71 acute flaccid myelitis (lower left, right), **Panel B: Skin Lesions.** Excoriated skin lesions on the upper extremity of a child with EV-A71 neurologic disease, **Panel C: Screenshot of Video of Myoclonus and Ataxia (available as an appendix to the Article).** Compressed video of myoclonic jerks accentuated during sleep (first half) and truncal ataxia (second half) in a child with EV-A71 brainstem encephalitis, **Panel D: Signs of Autonomic Instability.** Skin mottling (upper) and irregular breathing patterns on plethmography (lower) in children with autonomic dysfunction due to EV-A71 brainstem encephalitis.