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Letter to the Editor

Ageusia, gastrointestinal symptoms and marked asthenia in late December. A single case report with positive SARS-Cov2 IgG in Italy



In Italy the first imported cases were two Chinese people, and the first Italian patient of demonstrated severe acute respiratory syndrome (SARS-Cov2) was dated February 21 st 2020, while in France it started in December (Deslandes et al., 2020). Here we present a personal case report of CP, whose hypothetical clinical presentation dated in December 2019. CP is a 68-year-old male academic neurologist, vaccinated against seasonal influenza, mostly vegetarian, with a clinical history of glaucoma, reflux esophagitis and kidney stones, for which he takes daily brimozide-timolol-brimodinine eye drops and rabeprazol 10 mg. On December 19th, cold and sore throat started followed by vomiting and diarrhoea, which lasted 36 h. Fever (38.5 °C) without headache began on December 21 st and normalized in about 48 h. At the same time, the patient developed severe arthralgia with moderate movement limitation that disappeared about after 3 days, during which he took paracetamol 1000 once a day. Marked asthenia began on December 21 st and lasted 4 to 5 days. Ageusia without anosmia started on December 26th, lasting about 15 days. Taste was completely lost and all food seemed bitter. According to the wide clinical spectrum of Covid-19, CP was referred by MM to the antibody blood test which was available on April 18th. The test, provided by SC, was positive for IgG (Figure 1) which was present in a lesser extent also on June 7 h. From December until the lockdown (March 10th), CP had no contacts with people coming from China or subjects with infective respiratory disease.

Although a possible infection cannot be excluded from January to the lockdown, sudden ageusia is uncommon in seasonal influenza and in the present case not related to neurological and systemic diseases or medication, but highly suggestive of SARS-Cov-2 (Lechien et al., 2020; Russell et al., 2020). For the qualitative detection of IgG and IgM antibodies, we used screen Test Covid-19IgG/IgM2019-nCoV rapid test cassette (Trade name Screen; Whole Blood/Serum/Plasma), a flow chromatographic immunoassay lateral. IgG Relative Sensitivity was 100%, with a specificity of 98.0%. The IgM result had a relative sensitivity of 85.0%, specificity of 96.0%. The aim of this letter is to foster clinicians to submit patients with a history of respiratory diseases or isolated ageusia and/or anosmia between November and December 2019 to serologic examination. This case seems to suggest that infection in Italy started earlier than it was supposed and IgG positivity could add new information to the epidemiological models of SARS-Cov2 diffusion.

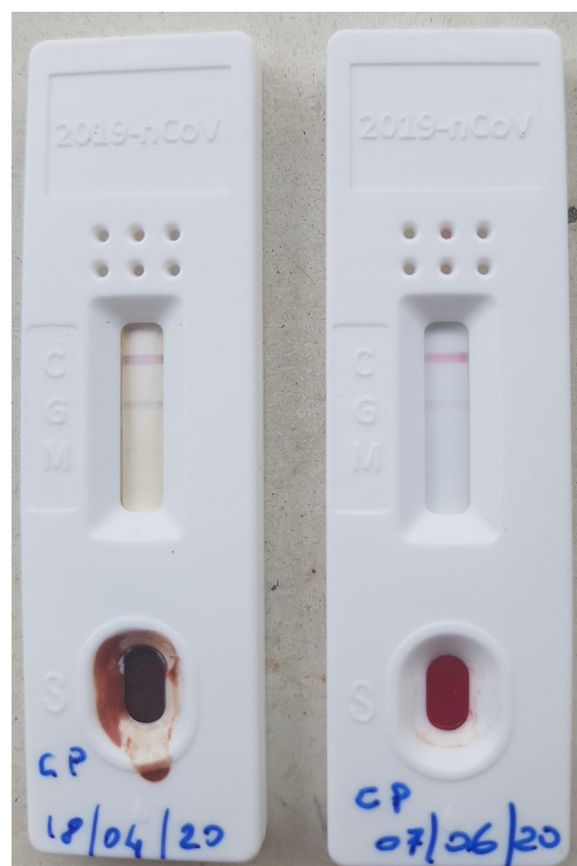


Figure 1. Screen Test Covid-19IgG/IgM2019-nCoV rapid test cassette clearly showing the IgG of patient CP. On the left, the test performed on April 18th; on the right, the test performed on June 7th, clearly showing the reduced intensity of IgG band.

Conflicts of interest

None to declare.

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Author contributions

Conception: CP. Data collection: CP, MM and SC. Writing of the first draft: CP.

Ethical approval

This letter regards the personal case of CP, who is one of the authors. CP agrees to describe and share his personal experience among the scientific community and for this reason he decided not to involve the Ethics Committee.

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