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Conclusions

In our study, there was a high mortality rate between patients with dementia and COVID-19, although a considerable percentage of them did not have access to palliative care before dying.

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Palliative stroke care among COVID-19 pandemic

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Background and aims

During the COVID-19 pandemic, many patients with stroke face delayed access to acute care. Also, they delayed getting in chronic stroke-related problems or complication management due to avoiding hospital visits and decreasing the number of service healthcare providers and service units from adaptation to the pandemic. Therefore, relative poor prognosis cases are higher in some areas and some periods. The aim is to guide palliative healthcare teams to manage end-of-life care in stroke during the COVID-19 crisis.

Methods

This study is a narrative review of palliative stroke care among the COVID-19 pandemic.

Results

The National Institutes of Health Stroke Scale (NIHSS) is the essential tool for evaluation. The scores 20 or higher should access palliative care consultation early because high scores can predict poor outcomes in both the short and long term. The palliative care approach for stroke is multidisciplinary collaboration. The goal and core of palliative care will be set based on individual formal or informal advanced care plans. The intensive safety awareness for a rehabilitation program, follow-up plan, complication monitoring for healthcare teams, caregivers, family members, close contact persons, and the patient himself should be developed and appropriately improved.

Conclusions

Active multidisciplinary teams cooperate with assisted telemedicine, and virtual evaluation by specialists play significant roles in palliative care among COVID-19 situations.

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The impact of COVID-19 pandemic on disease severity and quality of life in Parkinson's disease

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Background and aims

The challenges being faced during the lockdown period may worsen motor or non-motor symptoms in Parkinson's disease (PD). This study was undertaken in order to investigate the impact of lockdown on the disease activity, caregiver perceptions and the quality of life of Parkinson's disease patients.

Methods materials and methods

This cross-sectional study was conducted from June till September 2020. Sixty four PD patients and caregivers were interviewed telephonically after obtaining consent. The responses were recorded by means of a structured questionnaire. Non-motor symptoms scale (NMSS) and the Parkinson Disease Questionnaire-8 (PDQ-8) were applied. PDQ-8 severity index (PDQ-8 SI) scores were expressed as percentage of the raw PDQ-8 score out of the total score. SPSS 20.0 was used for statistical analysis.

Results

Out of 64 patients, 39 (60.9%) were males and 25 (39.1%) were females. The overall median age was 65 (55.25–69.75) years. The median duration was 48 (30–84) months. Twenty six (40.6%) patients reported symptomatic worsening during the lockdown period. Slowness in activities of daily living and walking worsened in 15 (57.7%) and 14 (53.8%) patients respectively while tremors increased in 12 (46.2%) patients. Mood and sleep disturbances were the most common non-motor symptoms to worsen. Increase in non-motor symptoms and the NMSS total score were independent predictors of PDQ-8 scores. Increase in non-motor symptoms during the lockdown was an independent predictor of the highest quartile of PDQ-8 SI scores.

Conclusions

Motor and non-motor symptoms have worsened in PD patients during the lockdown. The increase in non-motor symptoms was independently associated with poorer quality of life among PD patients during the lockdown.

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Emergency department attendances for seizures: The SARS-CoV-2 pandemic impact

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Background and aims

The spreading of SARS-CoV-2 pandemic had an impact both on the healthcare organization and both on how people with COVID-unrelated acute and chronic conditions sought for medical assistance, in particular for condition requiring admission to Emergency Departments (EDs).

Methods

We performed a retrospective study evaluating the frequency and features of ED attendances for seizures, in the University Hospital of Trieste, Italy, during the first lockdown period (March 10th–April 30th 2020). To define the possible pandemic impact, we compared the lockdown period to a matched period in 2019 and to a period of identical length preceding the lockdown (January 18th–March 9th 2020). Data were retrospectively collected: age, sex, triage code, admission by ambulance, required hospitalization, first seizure, seizure semiology and diagnostic tests performed (EEG or CT) of each patient.