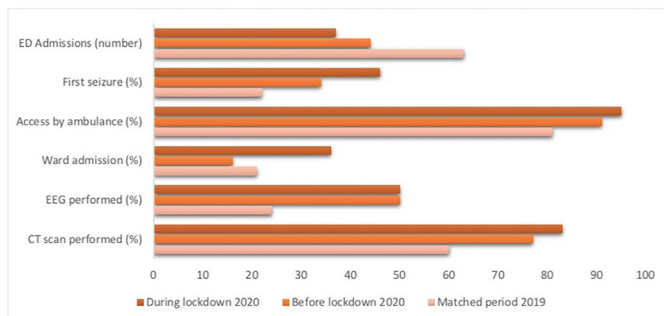




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Results

We found, during lockdown, a significant decrease in total ED attendances (4664) when compared to the matched control (10424) and to the pre-lockdown (9522) periods. Similarly, a reduction was detected for seizure attendances: 37 during lockdown and 63 and 44 respectively during the two other time periods. Interesting we found that more patients attended the ED with first seizures ($p = 0.013$), and a higher number of EEGs ($p = 0.008$) and CT brain scans ($p = 0.018$) were performed during lockdown; a trend favouring a more frequent transport to the ED by ambulance ($p = 0.061$) was also noted during lockdown period.

Conclusions

The pandemic had a relevant impact on how patients with seizures accessed the ED.

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The paradoxical impact of COVID-19 on people with poststroke aphasia

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Background and aims

The coronavirus pandemic (COVID-19) is affecting people's health with severe psychological consequences. One of the leading causes of long-term post-stroke disability worldwide is Aphasia. The language deficits of person with aphasia (PWA) cause a long-lasting negative impact on social communication and psychosocial wellbeing. The aim of the current study was to analyze the impact of the COVID-19 outbreak in PWA.

Methods

73 post-stroke PWA and 81 matched controls were enrolled in this study. All patients were in the chronic phase and they were already discharged from rehabilitation services before the COVID-19 emergency with different degrees of linguistic impairments. All participants were administered the Hospital Anxiety and Depression Scale (HADS). PWA also completed the Stroke and Aphasia Quality of Life Scale-39 (SAQOL-39).

Results

In all participants, results showed a significant increase of depression and anxiety between pre and during COVID-19. Surprisingly, we found lower levels of depression and anxiety in

PWA than in the healthy group. Moreover, a significant deterioration was also present in PWA in the communication and psychosocial scales of the SAQOL-39. Interestingly, these findings were independent of the degree of aphasia severity.

Conclusions

This evidence masks a dramatic situation which affects post-stroke PWA. Given that language deficits severely impact on social communication and psychosocial wellbeing in this population, these conditions had paradoxically limited the effects of the coronavirus. Thus, our findings point to the urgency of implementing new tools, including tele rehabilitation, which would allow PWA to practice their communication skills avoiding further deterioration.

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Unraveling the neuropsychological disorders in the post-Covid 19 syndrome: Dysexecutive syndrome and subjective cognitive complaint

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Background and aims

A considerable amount of recovered COVID-19 patients complain of long-term cognitive sequelae mainly in attention and memory. However, most of the few previous studies failed to clarify these cognitive syndromes, and their etiopathogenesis is much debated. The aim of this report is to contribute to the identification of the neuropsychological disorders in the post COVID-19 syndrome, and hypothesize a putative underlining etiopathological mechanism.

Methods

Two male adult patients underwent standard and computerized neuropsychological assessment two months after recovery from COVID-19 interstitial pneumonia. Case 1 suffered a severe SARS, requiring CPAP and helmet NIV, and reported episodes of heart failures. Case 2 instead reported a mild SARS that was treated with oxygen therapy.

Results

Both patients complained of mental fatigue, slowness, decreased concentration, and memory failures. Case 1 cognitive evaluation showed mild impairments in working memory, processing speed, short-term and episodic memory, while it was normal in Case 2. Both patients had mild mood abnormalities. No neuroimaging examinations were conducted yet at that time.

Conclusions

The cognitive profiles of our patients were compatible with a mild dorsolateral dysexecutive syndrome in Case 1, and a subjective cognitive disorder in Case 2. The results suggest impairments of the dorsolateral prefrontal cortex and subcortical circuitry in both cases. The severity of the cognitive outcomes seems to be associated with the severity of SARS but not with mood disorders. We cautiously hypothesize that both patients might have suffered cognitive failure as a consequence of subclinical hypoxic insult to the brain.

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