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119864**Assessment of level of awareness regarding COVID-19 illness**

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Background and aims

In March 2020, WHO declared Novel Coronavirus Disease (COVID-19) outbreak to be a pandemic. All countries were given the call to take prompt actions to reduce spread of infection and save lives. The prevalence of the disease rose exponentially worldwide. When it comes to the new SARS COVID 19, the understanding of the disease was poor, especially among the non-medical folk. Social media was flooded with information and several of them were not tested for authenticity. Accurate information is the key to protect oneself, one's family as well as one's society and break the chain in the spread of the misinformation and the disease.

Methods

In June 2020, we conducted a study among the students of an engineering college to assess the knowledge about COVID-19. An online questionnaire with 29 open ended questions was mailed to 700 students and faculty. The questionnaire included demographics, fund of information, risk factors, prophylaxis, protection and mode of transmission of SARS-CoV-2.

Results

416 subjects ages ranging from 18–53 years participated in the study. 22.8% believed that COVID-19 is caused by bacteria. 12.5% believed that it affects the elderly only. 41.1% believed it is airborne. 37.7% considered it unsafe to go to hospitals for medical attention though 80.5% believed that if they have cough or fever, they should get tested. 46.6% believed a vaccine for COVID-19 has already been launched.

Conclusions

Our study results showed several lacunae in the levels of knowledge regarding COVID-19 except for the co-morbidities being risk factors for COVID-19.

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119865**Myositis associated to COVID-19 mimics an acute exacerbation in myasthenia gravis patient**

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Background and aims

Coronavirus disease 2019 (COVID-19) is an acute infection of the respiratory tract spread into a global pandemic. Emerging case reports have described neurological manifestations in patients with COVID-19 infection including headache, seizure, Guillian-Barrè syndrome and encephalitis. Here we report a case of a patient affected by myasthenia gravis (MG) who developed a severe myositis post COVID-19.

Methods

A 45 years-old woman affected by MG since she was 30, presented to our Neurological Department reporting severe weakness prevalent in upper limbs, diffuse myalgia, dysphagia and dyspnea started two months after COVID-19 infection.

Results

We administered intravenous immunoglobulin (IVIG) in suspecting of MG aggravation, however without clinical improvement. A full blood panel showed elevated Creatine-Phosphokinase (CPK) and Lactate-dehydrogenase (LDH) levels. Autoimmune screening revealed low level of complement C3, positive antibodies anti-Nuclear (ANA) and anti-Phospholipide (aPL), included anti-Cardiolipin (aCL) and anti-β2-glycoprotein I (aβ2GPI). Electromyographic (EMG) examination showed: diffuse spontaneous activity with positive sharp wave (PSW), fibrillation potential, small and short motor unit action potentials (MUAPs) in quantitative analysis, suggesting acute myopathic pattern. We performed therapy with intravenous Methylprednisolone for five days with full clinical recovery. One month later, EMG features were significantly improved.

Conclusions

Viral infection is a well-known cause of myositis described also in patients with COVID-19, probably due to the expression of ACE-2 on the muscle cells. To our knowledge, this is the first case in literature of myositis associated to COVID-19 infection in MG patients. We want to underline how myositis symptoms could mimic an acute exacerbation of MG leading to harmful misdiagnosis.

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119866**Impact of COVID-19 pandemic on acute stroke care-data analysis from the RES-Q registry 2020 in N. Macedonia**

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Background and aims

Since 2017, the Department of Urgent Neurology at the University Clinic of Neurology in N. Macedonia has implemented the Angels Initiative and the RES-Q Registry, in order to evaluate and optimize the quality of care of acute stroke patients. The aim was to analyze acute stroke data in 2020 and evaluate the impact of COVID-19 pandemic on acute stroke care.

Methods

Database categories entered in 2020 in the RES-Q registry were compared in 4 consecutive quarterly periods. We used a statistical analysis to estimate the NIHSS reporting, CT-time and the number of IVT procedures; carotid artery imaging, prescription of antithrombotic and statins, median discharge mRS and median hospital stay.

Results

Quarterly analysis showed significantly reduced number of acute stroke admissions by 34% and 85%, decreased number of IVT procedures by 40% and 100% in the 3rd and 4th quarter, respectively ($p < 0.05$). DTN time was prolonged by 30.5% in the 3rd quarter ($p < 0.05$). Carotid artery imaging was reduced by 100% in the 4th quarter ($p < 0.05$). Median hospital stay was prolonged for 8 days in the 4th quarter ($p < 0.05$). These findings were consistent with the increased number of COVID-19 patients and implemented epidemiologic measured in the country in the second half of 2020. Other analysed parameters of quality of stroke care were not affected ($p > 0.05$).

Conclusions

COVID-19 pandemic has had significant impact on acute stroke care with reduced number of admissions and decreased number of IVT treatment with prolonged DNT and longer hospital stay.

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