

Neurologic features tied to acute respiratory distress syndrome in severe COVID-19 described

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Acute respiratory distress syndrome (ARDS) due to COVID-19 is associated with neurologic features, including encephalopathy, agitation, and confusion, according to a letter to the editor published online April 15 in the *New England Journal of Medicine*.

Julie Helms, M.D., Ph.D., from Strasbourg University Hospital in France, and colleagues reported neurologic features in an observational series of 58 of 64 consecutive patients admitted to the hospital with ARDS due to COVID-19. The neurologic findings were recorded on admission to the [intensive care unit](#) (ICU) before treatment and when sedation and a neuromuscular blocker were withheld (eight and 39 patients, respectively).

The researchers found that 40 patients (69 percent) had agitation when neuromuscular blockade was discontinued. Twenty-six of the 40 patients had confusion according to the Confusion Assessment Method for the ICU. In 39 patients (67 percent), diffuse corticospinal tract signs with enhanced tendon reflexes, ankle clonus, and bilateral extensor plantar reflexes were present. One-third of the 45 patients who had been discharged had a dysexecutive syndrome consisting of inattention, disorientation, or poorly organized movements in response to command. Thirteen patients underwent magnetic resonance imaging of the brain because of unexplained encephalopathic features. In eight patients, enhancement in leptomeningeal spaces was noted, and in 11 [patients](#) who underwent perfusion imaging, bilateral frontotemporal hypoperfusion was noted.

"Data are lacking to determine which of these features were due to critical illness-related encephalopathy, cytokines, or the effect or withdrawal of medication, and which features were specific to severe acute respiratory syndrome coronavirus 2 infection," the authors write.

One author disclosed financial ties to the pharmaceutical industry.

More information: Julie Helms et al. Neurologic Features in Severe SARS-CoV-2 Infection, *New England Journal of Medicine* (2020). [DOI: 10.1056/NEJMc2008597](https://doi.org/10.1056/NEJMc2008597)

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