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a lifetime depression frequency among people with FM was 65% (J.S. Ægge-Hagena et al., 2019). Additionally, fibromyalgia is more common in women (4.2%) than men (0.2%) (Mas, Carmona, Valverde, Ribas, & Group, 2008). This study aimed to investigate the prevalence of depression in patients with FM treated at the Neuro-Psychiatric Center in Riem (NPZR).

Methods

A total of 96 FM patients (19.8%, n = 19 male and 80.2%, n = 77 female) diagnosed with FM were selected from patient files between 2015 and 2021. Clinical interviews and the Beck Depression Inventory (BDI) had been conducted in FM patients to measure the level of depression.

Results

The sample showed a significant gender difference with 80.2% female patients, 49% of participants were between 51 and 60 years old. The study sample showed a high prevalence of severe depression (85.4%). Tinnitus, and migraine were the most common comorbidities (both 12.5%). 57.3% of patients enrolled in 2015 still continue their treatment.

Conclusions

The ongoing research is in line with previous studies: FM patients are mainly female and older than 50 and demonstrate high levels of depression and comorbidities such as Tinnitus and Migraine.

doi:10.1016/j.jns.2021.119749

119750

A ‘shoulder tap’ test for functional gait disorders: A sign of abnormal anticipatory behaviour

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Background and aims

Functional gait disorders (FGDs) involve gait abnormalities that are internally inconsistent and incongruent with other neurological disease. The clinical pull (or retropulsion) test is widely considered the gold standard in evaluating postural instability in patients with neurological gait disorders. Here, we describe the range of postural responses to the pull test in patients with functional gait disorders (FGDs) and explore the utility of the ‘shoulder tap test’ in these patients.

Methods

Patients with a diagnosis of FGD were identified from movement disorders clinics at Ashford St Peter’s and St George’s University Hospitals NHS trusts. Reactions to being ‘tapped’ at the shoulders or pulled were retrospectively analysed using clinical records. For the shoulder tap test, patients were instructed that “on the count of three please try to keep upright if you are moved backwards” and that they were allowed to take as many steps as needed to avoid falling.

Results

Thirty-one patients with FGDs in whom responses were documented to either shoulder tap, pull test, or both were included in the analysis. All patients in whom a shoulder tap was performed (n = 25) had an abnormal response, including taking multiple steps (n = 9), significant body sway or a startle response (n = 4), falling into the examiner’s arms (n = 7), or anticipatory body movement before being tapped (n = 4). Abnormal responses to pull were documented in 14/17 patients (82.35%).

Conclusions

The ‘shoulder tap test’ was abnormal in all patients with FGD, even in those with a normal pull test, and may reflect postural hypervigilance and abnormal expectation in these individuals.

doi:10.1016/j.jns.2021.119750

119751

Impact of COVID-19 pandemic on the acute confusional syndrome by the liaison psychiatry service of hospital Del Mar

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Background and aims

Coronavirus Disease 19 (COVID-19) pandemic has had a profound worldwide impact on health. Since the outbreak the most common neuropsychiatric complication has been Acute Confusional Syndrome (ACS). Aim: To describe characteristics of the admitted patients attended by the liaison psychiatry service for ACS during the COVID-19 pandemic. Clinical and sociodemographic variables were described.

Material and methods

We conducted an observational, descriptive study. All patients attended by the liaison psychiatry service of Hospital del Mar, between February and April 2020, with ACS diagnosis were included. Results are described in terms of mean, standard deviation and proportion, depending on each variable.

Results

We included 62 patients with acute confusional syndrome; 35 were men (56.5%), with a mean age of 71.71 years (standard deviation [SD]:11.3). The mean stay of hospital admission was 41.19 days [SD: 38.039]. The mean number of consultations carried out was 6.5 [SD: 5.422]. Half of our sample (52.5%) had confusional symptoms for 8 days. 50 patients presented complications during admission (80.6%), of which 43 patients developed infectious complications (69.4%). Almost the entire sample (59 patients) had a history of chronic diseases (95.2%). 54 patients (88.5%) had potential risk factors associated with acute confusional syndrome including: active infection in 46 (74.2%), hypoxemia in 25 (40.3%), isolation in 24 (39.3%) and previous cognitive impairment in 15 (24.6%).

Conclusions

During the first pandemic crisis of COVID-19 confusional patients had many complications and many risk factors associated such as active infection, hypoxemia and isolation (which in turn are symptoms of COVID-19).

doi:10.1016/j.jns.2021.119751