Letter to the Editor: Neurohospitalist and COVID-19

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To the Editor:

We are reading the paper by S. Caproni et al. with great interest [1]. We are in agreement that COVID-19 should not have reduced the incidence or prevalence of stroke as well as other neurological diseases and emergencies. Yet, the observation in the drop in number of consultations is similar. Not just that the number of neurological cases should not have been affected, COVID-19 has many known neurological manifestation [2] which would have caused a surge in admissions.

We are reporting our observations as neurohospitalists in Los Angeles, California. Among the five hospitals we covered, two hospitals serve as certified primary stroke centers in Downtown Los Angeles. The number of neurological consultations as well as stroke alert activations has decreased by 50% during the past three months, April, May and June of this year, 2020 compared with the same time period in 2019. In these three months, there were 88 patient consultations who tested positive for COVID-19. Majority of them were diagnosed with altered mental status of various degrees. The second most common incidents from those patient consultations were stroke. There was a total of 17 strokes. 11 of them presented to hospital with stroke. Six patients, however, presented to hospital with normal neurological status only to develop strokes while hospitalized. None of the patients were candidates for alteplase or thrombectomy. Six patients have suffered seizures. We have one of each with the following diagnoses: existing multiple sclerosis, existing myasthenia gravis, new intracranial hemorrhage, isolated meningoencephalitis [3], isolated meningitis,

neuroleptic malignant syndrome [4], fatal rhabdomyolysis, and a COVID-19 related Miller Fisher Syndrome.

Similar to observation around the world, the total number of neurological consultations has dropped during the past three months while there is increasing recognition of neurological manifestation of COVID-19. One concerning fact is the significant number of strokes that developed after admission during hospitalization. Further observation and reviews are needed to understand the full neurological manifestations of this highly infectious, communicable respiratory syndrome, COVID-19.

Compliance with ethical standards

Conflict of interest The authors do not have any conflict of interest to declare.

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