Original Research Paper



Psychiatry

WORSENING OF PSYCHOSIS IN PATIENTS PREVIOUSLY DIAGNOSED WITH PSYCHOTIC ILLNESS, NEWLY INFECTED WITH COVID 19.

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COVID 19 is the most dreaded pandemic in the present generation. Reports of psychosis in the context of this is **ABSTRACT** emerging. Neuronal inflammation mainly involving olfactory neuronal pathway is postulated. Worsening of existing psychosis is still a corner of research that has not been unearthed. Further sample based study should be formulated.

KEYWORDS: COVID 19, PSYCHOSIS

INTRODUCTION

COVID-19, similar to other coronaviruses, is a single-strand RNA virus with a distinct crown-like outer envelope [1]. It can cause a range of manifestations, from no symptoms, to mild respiratory symptoms. to fatal severe acute respiratory syndrome (SARS). Coronaviruses are neurotropic and can enter the brain through various mechanisms, including the olfactory neural pathway, and they can cause a significant inflammatory response, which can cause both peripheral and central nervous system (CNS) manifestations. The novel coronavirus i.e. the COVID-19 or SARS-CoV-2, has caused worldwide anxiety and grief because of its tremendous infectivity, lethality, and lack of curative treatment. Despite how much the virus has affected daily life, we are still ill-informed about the degree and characteristics of distress, psychopathology, and potential virusspecific neuropsychiatric manifestations.[2].

DISCUSSION

The World Health Organization (WHO) and many governments have promoted social distancing and social isolation in order to slow the spread of the virus [3]. These public health efforts while targeting the entire population, may be less effective for certain marginalized groups, notably those with schizophrenia and related disorders. Persons living with schizophrenia and related disorders have cognitive impairment and poor insight along with delusions, hallucinations and disorganized behavior. Also, sociodemographic characteristics, vis-àvis, living in congregate housing or homelessness [3], may put these individuals at higher risk of becoming infected with COVID-19 [4]. Furthermore, people living with schizophrenia are at greater risk for adverse outcomes of the infection, including death, because as compared to the general population, they typically have poorer physical health, greater socioeconomic disadvantage, are more socially disconnected, and experience pervasive stigma and discrimination. Comorbid substance use disorders, highly prevalent in schizophrenia, may compound impairments in judgment and decision-

It has also come into attention that COVID-19 infection itself may exacerbate psychotic symptoms in people with schizophrenia through either an immune-related mechanism, or psychosis secondary to steroids and other interventions used to treat the infection.

Prior reports from the SARS CoV-1 epidemic identified a range of psychiatric complications in affected patients, including adjustment related anxiety, depression, suicidal ideation, as well as organic hallucination and manic disorder. There is also prior evidence to suggest that infection with certain coronaviruses is associated with recent onset psychotic symptoms [2].

One case report of a 36-year-old, previously healthy woman, with no personal or family history of mental illness presenting with new-onset psychosis after a diagnosis of symptomatic COVID-19, represents the first description of symptomatic COVID-19-associated brief psychotic disorder. A case series in Madrid noted an unspecified number of potential cases of COVID-19-related psychosis in their hospital, but

did not detail the clinical course of affected patients. Yet another recent case series in New York described three cases of new-onset psychosis in patients with COVID-19. All these patients were incidentally found to have positive SARS-CoV-2 test and did not present with other symptoms to suggest infection [5].

The heightened stress of a COVID-19 diagnosis or medications (such as corticosteroids) may unmask an underlying primary psychotic disorder in a vulnerable individual. It may itself trigger psychosis through direct neurotoxicity or a heightened immune response [5]. And so, it is reasonable to believe that worsening of psychosis in a previously diagnosed psychotic patient can occur with a new infection of COVID 19. Also, the fact that in all the above-mentioned cases, COVID 19 was an incidental finding, makes us consider the lacunae in research with respect to worsening of psychosis in a previously diagnosed patient with new infection of COVID 19.

Researchers have already sounded the alarm on how the COVID-19 pandemic may affect the mental health of the general population, and more specifically patients with mental disorders. Depression and COVID 19 having an immunological basis has been discussed previously, as have stress anxiety and trauma. Thus, the COVID-19 pandemic has created challenges for the health professionals, especially psychiatrists. Continuity of care is critical for patients living with schizophrenia and related disorders, to prevent decompensation and its consequences, including emergency department visits and hospital admissions resulting in further strain on the health care system, mental and physical deterioration, and even deaths [4].

CONCLUSION

Thus, it is seen that psychosis seen in COVID 19 patients can be a new onset psychosis or worsening of already existing psychosis. Schizophrenia, the hallmark of psychotic spectrum disease is reported to have emergence and worsening in domains of positive, negative and cognitive symptoms in patients of COVID 19. Case reports of these new onset psychosis in such cases of the novel coronavirus infected patients are there. But there is sparsity in case reports and proper literature on worsening of already existing psychosis. Further detailed studies into this and analysis is the need of the hour.

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