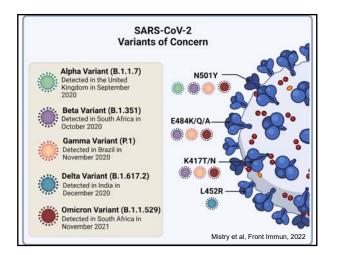
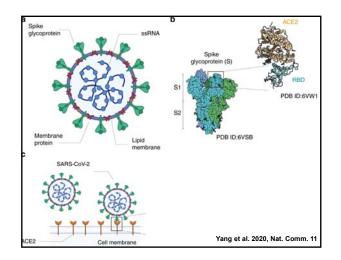
Cognitive Impacts of COVID-19 KEVIN N. HASCUP, PHD ASSISTANT PROFESSOR SOUTHERN ILLINOIS UNIVERSITY SCHOOL OF MEDICINE • EUROSCIENCE INSTITUTE • DALE AND DEBORAH SMITH CENTER FOR ALZHEIMER'S RESEARCH AND TREATMENT (CARE). • DEPARTMENTS OF NEUROLOGY, PHARMACOLOGY, & MMICB Image: Content Streamed Strea

Learning Objectives

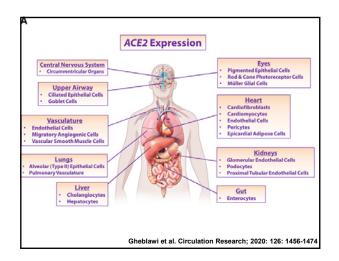
- Know the mechanisms associated with SARS-CoV-2 neuroinfection.
- Understand the resulting biological and anatomical CNS changes associated with neuroinfection.
- Recognize that mental impairments persist months after infection recovery and may accelerate cognitive decline.



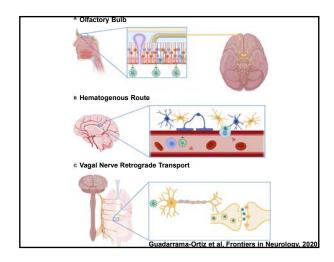




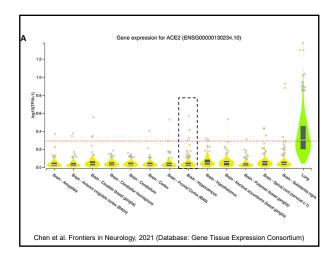




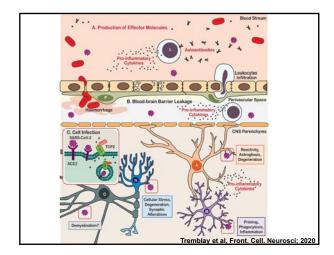




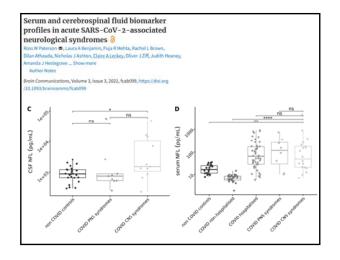




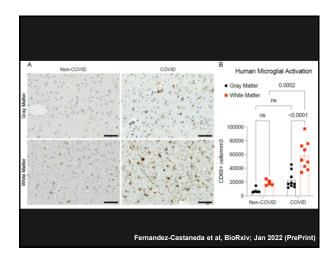




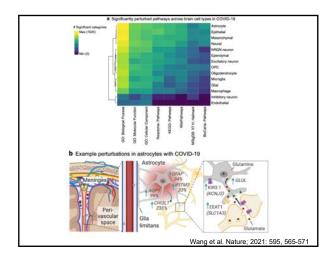








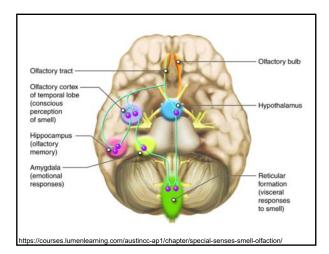






| Neurological symptom | Affected region (reference) | Percentage (reference) | |
|--|---|--------------------------------|--|
| Acute cerebrovascular disease | Cerebral vessels ^{58,60} | 2.8% ³⁴ | |
| Meningitis/encephalitis | C5F ^{23.14} | Case report ²⁶⁷ | |
| Acute hemorrhagic necrotizing encephalopathy | Temporal lobe ²⁰⁰ | Case report288289 | |
| Posterior reversible encephalopathy syndrome | Cortex ^{81,290,291} | Case report#1290.291 | |
| Demyelinating lesion | Spinal cord ²⁵² | Case report ²⁵² | |
| Seizure | Left temporoparietal lobe233235285 | 0.5%34 | |
| Ischemic stroke | Cortex ³⁴ | 2.8% ³⁴ | |
| Dizziness | Whole brain ²⁹⁶ | 9.4%297 16.8%34 | |
| Headache | Whole brain ^{34,298,299} | 3.4%300 6.5%297 13.1%3 | |
| Ataxia | Whole brain ²⁴ | 0.5%34 | |
| Impaired consciousness | Whole brain ³⁴ | 7.5% ³⁴ | |
| Brain edema | Brainstem ³⁰³ | Case report ³²¹ | |
| Anosmia | Olfactory neurons ¹²⁶ | 5.1% ³⁴ | |
| Ageusia | Tongue nerves ^{106,107,302,303} | 5.6%34 | |
| Dysopia | Optic nerves ³⁴ | 1,4%34 | |
| Guillain-Barré syndrome | Peripheral nerve demyelination ^{314,305,305,307,308,309,310} | Case report310.311 | |
| Miller Fisher syndrome | Whole brain ^{312,313} | Casa report ^{212,313} | |
| Myalgia-muscle pain | Neuromuscular junction518.335 | Case report | |
| Rhabdomyolysis | Muscle ²¹⁶ | Case report215 | |

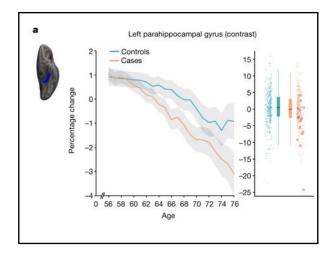




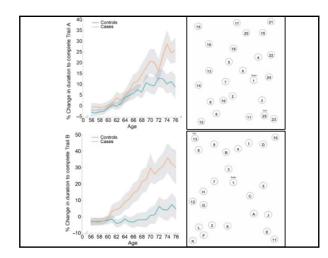


| Gwenaelle Douaud 🖻, Soojin Lee, Fidel Alfaro-Almagni. | | | | | | | |
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| McCanthy, Frederik Lange, Jesper L. R. Andersson, Ludov | | | | | | | |
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| Inomes E. Rechois & Stephen M. Smith | | | | | | | |
| Namere (2022) Cite this article | | | | | | | |
| | SARS-CoV-2 | Control | Puncor | | | | |
| Number of participants | 401 | 384 | - | | | | |
| Age at scan 1 (mean ± s.d. (range)) | 58.9 ± 7.0 (46.9-80.2) | 60.2 ± 7.4 (47.1-79.8) | 0.15 | | | | |
| Age at scan 2 (mean ± s.d. (range)) | 62.1 ± 6.7 (51.3-81.4) | 63.3 ± 7.1 (51.3-81.3) | 0.08 | | | | |
| Sex (male/female) | 172 (42.9%)/229 (57.1%) | 164 (42.7%)/220 (57.3%) | 0.96 | | | | |
| Ethnicity (white/non-white*) | 388 (96.8%)/13 (3.2%) | 373 (97.1%)/11 (2.9%) | 0.76 | | | | |
| Years between scans 1 and 2 (mean ± s.d. (range)) | 3.2 ± 1.6 (1.0-7.0) | 3.2 ± 1.6 (1.0-6.9) | 0.98 | | | | |
| Systolic blood pressure (mmHg) | 130.3 ± 17.3 | 132.1 ± 17.6 | 0.16 | | | | |
| Diastolic blood pressure (mmHg) | 78.7 ± 10.6 | 79.0 ± 10.2 | 0.63 | | | | |
| Diagnosed diabetes | 18 (4.5%) | 16 (4.2%) | 0.82 | | | | |
| Weight (kg) | 76.4 ± 15.8 | 75.2 ± 14.4 | 0.65 | | | | |
| Waist/hip ratio | 0.87 ± 0.09 | 0.86 ± 0.09 | 0.37 | | | | |
| BMI (kg m ⁻²) | 26.7 ± 4.4 | 26.6 ± 4.3 | 0.61 | | | | |
| Alcohol-intake frequency (a.u.) | 3.1 ± 1.3 | 3.0 ± 1.4 | 1.00 | | | | |
| Tobacco smoking | 0.61 ± 0.92 | 0.65 ± 0.89 | 0.87 | | | | |
| Townsend deprivation index | -15+29 | -16 = 2.9 | 0.65 | | | | |





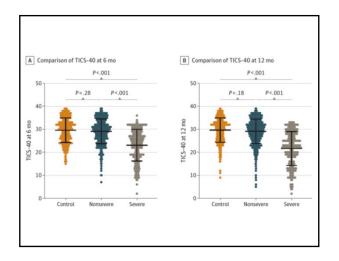




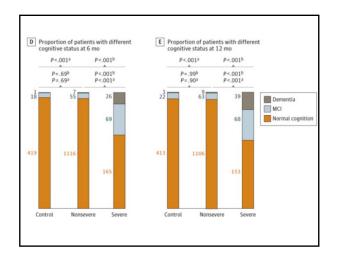


| March 8, 2022 One-Year Traje Survivors of CO A Longitudinal | OVID-19 in Cohort Stu | Wuhan, udy | - | in Older | | |
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| Yu-Hui Liu, MD, PhD ¹ ; Yang Ohm, M | | PhO ¹ ; et.al | | | | |
| > Author Affiliations Article Info | rmation | | | | | |
| JAMA Neurol. Published online Marc | h 8, 2022. doi:10.1001/ja | maneurol.2022.044 | 1 | | | |
| Table 1. Demographic and Baseli | | and the second | | | | |
| Table 1. Demographic and Baseli | ne information of Parti | cipants | | Uninfected control individuals (n = 438) | P value survivors vs control individuals | P value severe vs nonsevere cases |
| Variable | COVID-19 surviv Total group (n = 1438) | Severe cases (n = 260) | Nonsevere cases (n = 1178) | | | |
| Age, median (IQR), y | 69 (66-74) | 71 (67-79) | 68 (66-73) | 67 (66-74) | .30* | <.001* |
| Female, No. (%) | 747 (51.95) | 127 (48.85) | 621 (52.72) | 216 (49.32) | .35% | .27% |
| Male, No. (%) | 691 (48.05) | 133 (51.15) | 557 (47.28) | 222 (50.68) | .35 ^b | .275 |
| Education, median (IQR), y | 12 (9-12) | 12 (6-12) | 12 (9-12) | 12 (9-12) | >,99* | .05* |
| BMI, median (IQR) | 23.99 (22.54-25.38) | 24.38 (22.90-25.64) | 23.93 (22.44-25.33) | 24.19 (22.51-25.69) | >.99* | .009* |
| Comorbidities, No. (%) | | | | | | |
| Hypertension | 561 (39.01) | 133 (51.15) | 426 (36.16) | 151 (34.47) | .09 ^b | <.001 ^b |
| Diabetes | 274 (19.05) | 65 (25.00) | 208 (17.66) | 81 (18.49) | .84 ^b | .01* |
| Hyperlipidemia | 142 (9.87) | 31 (11.92) | 111 (9.42) | 39 (8.90) | .58 ^b | .25 ^b |
| Stroke history | 79 (5.49) | 42 (16.15) | 37 (3.14) | 30 (6.85) | .29 ^b | <.001 ^b |
| Coronary heart disease | 193 (13.42) | 71 (27.31) | 121 (10.27) | 61 (13.93) | .81 ^b | <.001 ^b |
| COPD | 142 (9.87) | 43 (16.38) | 99 (8.40) | 41 (9.36) | .78 ^b | <.001 ^b |
| ICU admission, No. (%) | 72 (5.01) | 72 (27.69) | 0 | NA | NA | <.001 ^b |

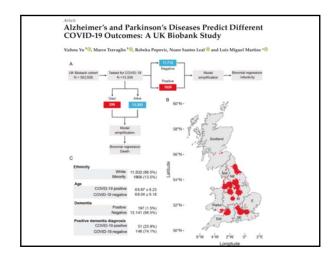




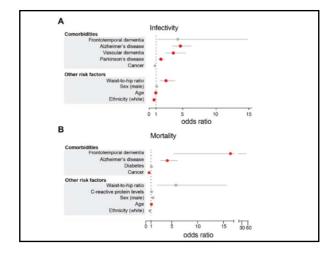




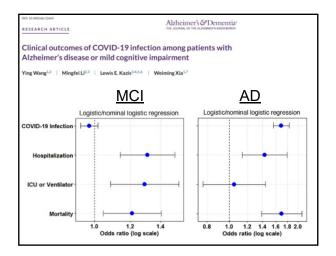














SARS-CoV-2 infection causes

- macroscopic, microscopic, and transcriptomic changes to CNS tissue.
- cognitive impairments that scale to disease severity
- worse outcome in MCI and AD patients.

