TREATMENT OF PTSD FOLLOWING TRAUMATIC COVID-19 ICU EXPERIENCES – A CASE SERIES

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Background

The COVID-19 pandemic created a large demand for psychiatric follow-up following hospital treatment for the disease, particularly following discharge from intensive-care units. This was evidenced by the large number of patients who were referred to newly established post-COVID-19 Liaison Psychiatry clinics around the country. “Post intensive-care syndrome”, has been documented in the literature mimicking post-traumatic stress disorder. PTSD has also been documented in patients suffering hyperactive delirium following discharge from intensive care. Anecdotally there has been an observed increase in the numbers of patients suffering with PTSD symptoms following hospital treatment for COVID-19.

Objectives/Aims

We aimed to show that antidepressant therapy with effects suited to the symptoms of post-traumatic stress syndrome would be helpful in this cohort of patients.

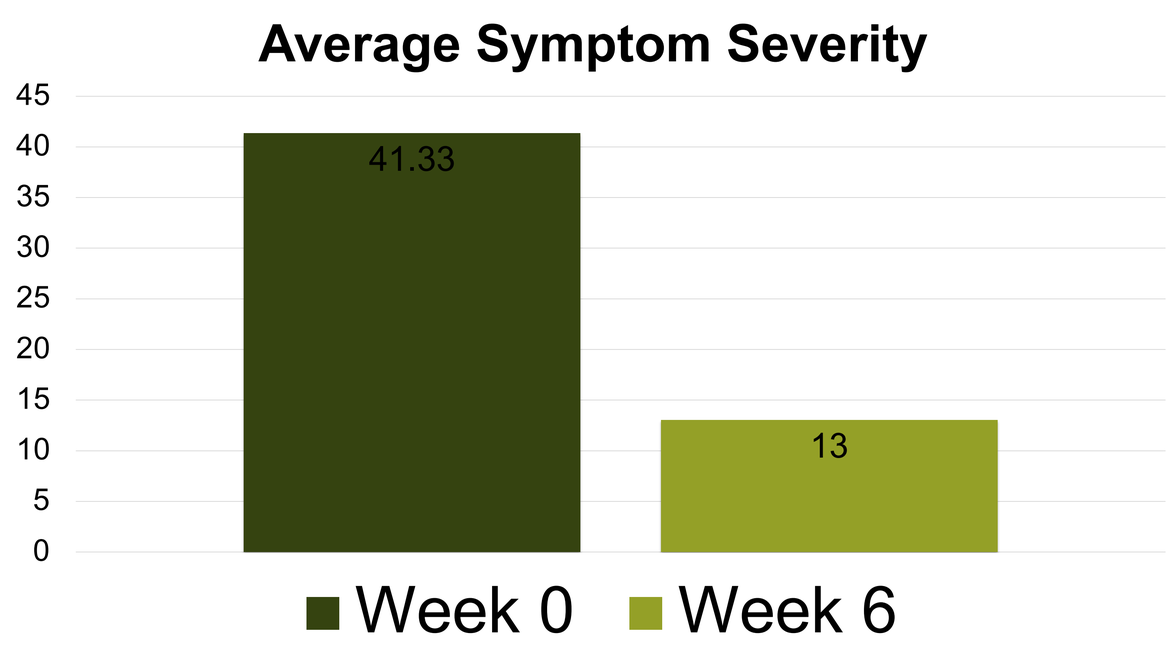
Methods

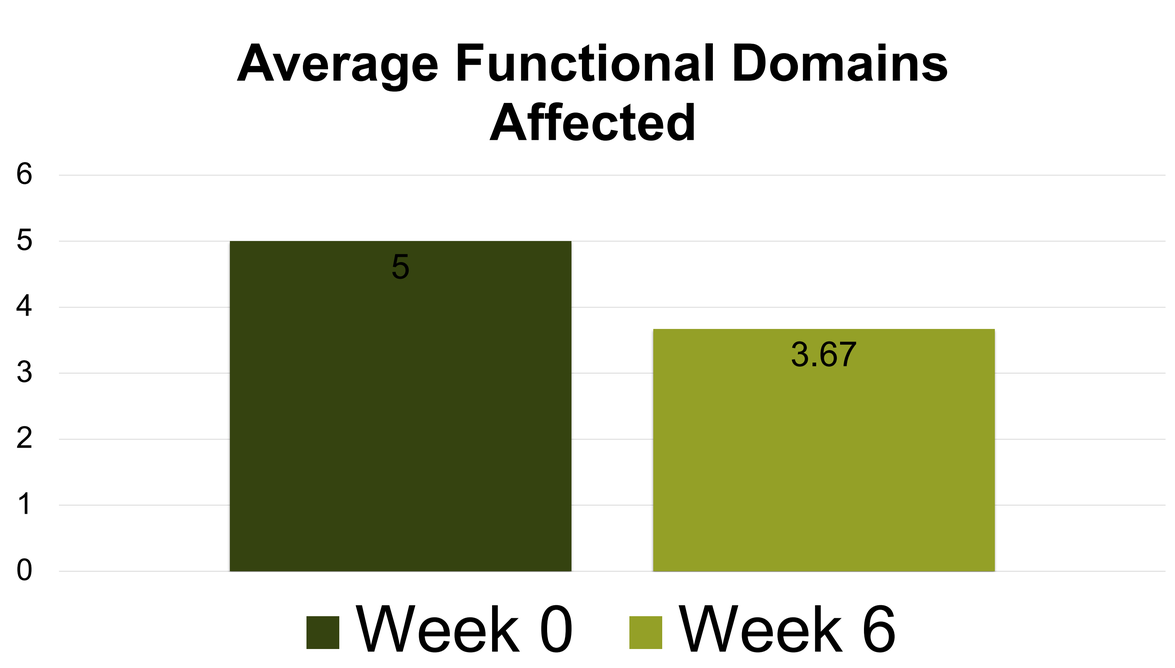
3 patients who attended the post-COVID Liaison Psychiatry Clinic with symptoms suspicious for PTSD were referred by the Respiratory team. Each one was diagnosed with Post-Traumatic Stress Disorder and their symptom severity rated using the PTSD Symptom Scale (PSS). All three were started on Mirtazapine, which was chosen for its beneficial effect in terms of anxiolytic efficacy and for patients’ insomnia. Each patient was followed up after 6 weeks and their symptom severity re-evaluated using the PSS.

*All patients gave written informed consent for their data to be used for this case series.

Results

All three patients showed a significant improvement in PTSD symptoms following initiation of Mirtazapine. Each one experienced an improvement from 36/51 to 20/51, 48/51 to 2/51 and 40/51 to 17/51 respectively, 51 being the maximum symptom score on the PSS. This represents improvement of 44%, 95% and 58% respectively and a total of 69% improvement of symptom severity across the three patients. There was also an improvement in the functional domains, with each patient having 4, 5 and 6 functional domains affected by their symptoms before treatment and 4,2 and 5 functional domains affected after treatment respectively. The medication was well tolerated with no patient complaining of any negative side-effects or adverse events.





Conclusions

Mirtazapine has been previously shown to be effective in PTSD. It was administered in the absence of any other treatment and showed good efficacy in reducing the symptoms of PTSD which these COVID-19 patients experienced following traumatic ICU experiences. While this a case series and not a trial, it provides further evidence that Mirtazapine is a useful medication in this cohort of patients and may be of particular benefit to those suffering longer-term psychiatric sequelae of COVID-19.