Acute necrotizing encephalopathy in association with COVID-19 Infection: A case report

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ABSTRACT

Summary: This case report is to highlight a case of acute necrotizing encephalopathy in association with COVID-19 infection in a previously healthy male. A healthy 31-year old man presented with acute delirium at day 10 of fever. Clinical examination revealed the patient was confused and had jaw opening dystonia with myorhythmia orofacial movement. Polymerase chain reaction test for COVID-19 was positive, with a normal plain computed tomography brain finding on day 1 of admission. In the ward, patients had episodes of fall and a contrast CT brain revealed bilateral thalamic hypodensities. Patient's condition remained static despite regular Intravenous dexamethasone, Intravenous Thiamine and Tablet Haloperidol. Magnetic Resonance Imaging done on day 17 of illness demonstrated diffuse bilateral thalamic hyperintensities with subtle hyperintensities of bilateral dentate nuclei and pons on T2W/FLAIR. The bilateral thalamic lesions showed blooming on GRE. The findings were consistent with ANEC post COVID-19 infection. Patient improved after 3 days of IV Methylprednisolone 1g once daily combined with Trihexyphenidyl and benzodiazepine. He was discharged well on Day 22. Repeated MRI Brain 6 weeks post infection showed resolving bilateral thalamic lesions which correlated with improving clinical symptoms.COVID-19 viral infection which may be linked to an acute severe encephalopathy, was thought to represent an immune-mediated phenomena which responded to steroid treatment. We presented a type of COVID-19 related neurologic presentation that improved clinically, and radiologically with treatment.

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Doing research with refugees the ethical way: Innovative way to promote refugee research ethics during COVID-19 pandemic

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ABSTRACT

Introduction: Refugee health research ethics is a relatively new field in Malaysia and most local researchers are unfamiliar with it. During the COVID-19 pandemic, physical distance has led to the cessation of research activities and health research ethics promotion. Materials and Methods: A virtual health research ethics training, "Doing Research with Refugees the Ethical Way", a collaborative effort with the United Nations High Commission for Refugees (UNHCR) and their partner for potential researchers from the local university, UNHCR's staff, and their partners were introduced then. This training aimed to create awareness as behavioral changes for refugee researchers are very important in minimizing the exploitation of this vulnerable group. This 3-hour training focused on the importance of refugee research ethics including an introduction to refugee research ethics and simulated small group discussion. Results: The experienced facilitators used real-life examples to illustrate the importance of having an ethical stand during refugee health research conduction and strategies for resolving the ethical dilemma. This virtual training had excellent interaction with participants and had 98% good feedback. Conclusion: This virtual training program is a proactive and practical way to quickly address the requirement to educate refugee researchers while dealing with the COVID-19 pandemic. Research ethics training should not be only the requirement for ethics board review but should be practiced by all researchers involved in refugee research.