

Neuropathic Pain in Long-COVID Syndrome: a Single Center Small Report

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Background: the term “long COVID” is commonly used to describe signs and symptoms that continue or develop after acute COVID-19. There is now strong evidence that pain can be an important symptom, both in acute phase and later stages of infection.

Objectives: follow up of the patients with persistent neuropathic pain after more than 6 months after COVID 19 infection.

Methods: we included all the patients older than 18 years with a previous history of SARS-COV2 disease diagnosed more than 6 months before at Esine’s Hospital (Department of Emergency, Medicine, Neurology, Pneumology), who developed during or after infection neuropathic pain/trigeminal neuralgia.

Results: we included three patient with persistent neuropathic pain.

The first one, 47 years-old man from Pakistan, was diagnosed with SARS-COV2 pneumonia at March 2020. He was in-hospitalized for 18 days and, perhaps due to persistent prone position, developed bilateral meralgia paresthetica (>right leg), still persisting.

The second one, a 51 years-old man, was diagnosed with SARS-COV2 at March 2020 and treated at home. After 20 days from healing he developed a painful neuropathy at both upper and lower limbs, partially responsive to pregabalin

The third one, an 80 years-old woman, developed bilateral carpal tunnel syndrome and left trigeminal neuralgia after SARS COV2 infection at May 2020.

Conclusion: various studies reported how the extensive, systemic hyperinflammation seen in severe COVID-19 has the potential to contribute to nociceptor sensitization. We think that these insights can inform that neuropathic pain can be considered a remarkable neurological aspect of long-COVID 19.

References:

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