

Severe Delirium Induced by COVID-19 in an Elderly Patient: A Case Report and Review of Management Approaches

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Abstract:

Background: Delirium is a common condition in elderly patients, often triggered by infections, metabolic imbalances, or other acute stressors. While well-established management guidelines exist for delirium due to typical causes, COVID-19 has emerged as a significant, albeit often overlooked, trigger of delirium in this demographic. This paper discusses the clinical features, management strategies, and the need for considering COVID-19 as a potential cause of delirium in elderly patients.

Case report: We present the case of a 74-year-old woman who developed severe delirium with aggression. After ruling out common causes, including urinary tract infection and other infections, she was empirically treated with antibiotics. Despite showing no symptoms other than confusion and a low-grade fever, she tested positive for COVID-19. Lumbar puncture ruled out encephalitis, and her condition was managed with Tazocin, Paxlovid (Nirmatrelvir/ritonavir), and regular sedation as per the mental health team's advice. She was hospitalized for two and a half weeks until her confusion resolved.

Conclusion: This case underscores the importance of considering COVID-19 as a potential cause of delirium in elderly patients, even in the absence of significant respiratory symptoms. While management guidelines for COVID-19-related delirium remain undefined, a multimodal treatment approach combining antibiotics, antivirals, and supportive care can lead to favorable outcomes.