

## Neuroréanimation (HSA,AVC)

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### Teleconsultation implementation for anxiety and depression screening after aneurysmal subarachnoid hemorrhage

M. Lastennet\*(1), O.Garnier(1), M.Darde(1), C.Jourdan(2), P.Perrigault(1), K.Chalard(1)

(1) DAR Gui de Chauliac, CHU de Montpellier, Montpellier, France, (2) Service de Médecine Physique et de Réadaptation, CHU de Montpellier, Montpellier, France

*\*Auteur présenté comme orateur*

#### Position du problème et objectif(s) de l'étude:

Aneurysmal subarachnoid hemorrhage (SAH) has an elevated death rate and leads to severe disability (1). Moreover, anxiety and depression symptoms are often reported among patients and prevent them to resume their professional and social activities (2). We created systematic teleconsultation at 6 months to identify disability or dependence in daily life, isolated psychological and cognitive difficulties and to determine the anxiety and depression prevalence.

#### Matériel et méthodes:

This retrospective observational study relates patients admitted for aneurysmal SAH in the year 2021 at Montpellier University Hospital. We analyzed each semi-structured medical interview to evaluate the neurologic functional outcome thanks to the modified Rankin score (mRS), screen every neuropsychological disorder and report self-assessments sent usually by mail. Our local Institutional Review Board approved this study. Information notes were sent to every patient, and they were allowed to refuse the use of their data. We identified anxiety and depression according to Hospital Anxiety and Depression Scale (HADS) and considered scores upper to 11 as certain symptomatology. Prevalence of anxiety and depression symptoms was provided with its 95% confidence interval (95% CI).

#### Résultats & Discussion:

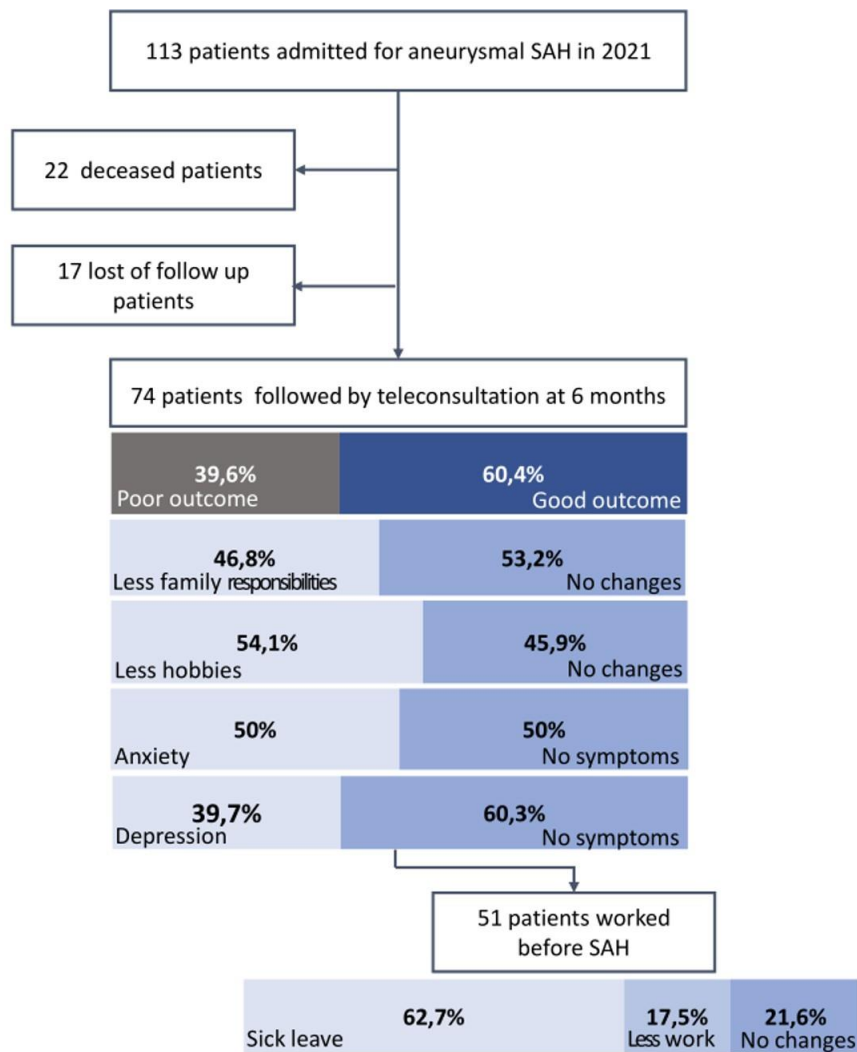
We carried out 74 teleconsultations. Despite a good functional outcome (60.4% mRS<3) patients reported neuropsychological symptoms at 6 months. The most frequent were fatigue (66.2%), memory disorder (51.4%) and concentration disorder (47.3%). The prevalence of anxiety and depression symptoms reported during interviews was respectively 50% (95% CI 39-62%) and 39.7% (95% CI 31-49%). According to the HADS, 24% (95% CI 18-30%) of patients suffer from anxiety and 13% (95% CI 10-16%) from depression. Even though patients present a favorable physical evolution, half of them reports anxiety and depression symptoms with daily living consequences. A lower proportion of them were considered as anxious or depressive according to the HADS. These disorders gather several pathological entities such as generalized anxiety disorder, social phobia or anxiety disorder due to a medical condition and suggests different treatments according to patients' history.

#### Conclusion:

Neurological impairments such as sensitive-motor deficits, coordination disorders or sphincter dysfunction have a considerable impact on the activity of daily living, but most patients suffer from less obvious troubles affecting the neuro-cognitive functions. Semi-structured medical interview using teleconsultation associated with self-assessment scales are good screening tools to identify physical and psychological impairments after SAH. However, the complexity and the frequency of these syndromes associated with the personal characteristics of each patient demonstrates the importance to address them to specialists who can specify the diagnosis and adapt personalized treatment.

#### Références bibliographiques:

(1) Suarez JL. Aneurysmal Subarachnoid Hemorrhage. NEJM. 2006 (2) Morris PG. Anxiety and Depression after Spontaneous Subarachnoid Hemorrhage. Neurosurgery. 2004



**Figure 1. Six-month patients' follow-up. Poor outcome defined as mRS $\geq$ 3 and good outcome as mRS<3.**

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