Dear Editor,

Ebola virus disease (EVD) has become an important public health threat after its outbreak in Africa. This viral infection is considered deadly and has a high mortality rate. Generally, the disease is considered an acute febrile illness. Hemorrhagic complications are common (1, 2). However, uncommon clinical problems are also seen. Neurological problems in ebola are of interest but are not well documented (3). The involvement of the neurological system by the virus is proposed to be a possible explanation for neurological manifestation in ebola (3). There are few reports focusing on neuropsychiatric manifestation in ebola; this topic is for consideration (4, 5). As an acute infection, psychiatric manifestation is rarely mentioned. The concern is usually on the survivors of ebola infection (6, 7). Mohammed et al. noted, “Survivors and contacts of EVD and their relatives develop psychological distress” (6). Mohammed et al. studied survivors of ebola and reported that an inability to concentrate and a loss of sleep were common problems (6). Mohammed et al. recently reported an interesting case study of a post-ebola mental disorder (8). The indexed case presents with confusion and disruptive behavior (8). Psychotherapy and anxiolytic drugs were used in this case (8). Mohammed et al. mentioned that brain sequela is the cause of the mental illness (8). The brain pathology and clinical correlation in ebola is an area for further research in neuropsychiatry (3, 9). Boscarino and Adams noted, “Psychologists, physicians, and others in the healthcare field need to be aware of these developments and involved with preparations related to mitigating the psychological impact of ebola disease outbreaks among different populations, as well as other potential public health threats in the future” (10).

Keywords: Neuropsychological, Manifestation, Ebola

Footnote

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References