Traumatic Stress Disorder - Primary Care PTSD Screen for DSM-5 (PC-PTSD-5) was administered via clinical interview and the patients were asked about subjective cognitive complaints related to concentration, memory, and word finding.

Results: All three women reported persisting cognitive problems, including difficulties with concentration, problems with memory, and word finding difficulties. They also endorsed symptoms of post-traumatic stress, such as avoidance of thoughts and events, as well as recurrent nightmares related to the course of their illness.

Conclusions: The CDC notes that there are no tests that specifically evaluate the multitude of post-COVID conditions. Regardless, this case series suggests that emotional and cognitive screeners may assist in treatment planning and support recovery in this population. Future research should examine the exact nature of the relationship between hospitalization, emotional symptoms, and cognitive functioning in post-COVID patients.

Categories: Infectious Disease (HIV/COVID/Hepatitis/Viruses)
Keyword 1: infectious disease

Keyword 2: neuropsychological assessment **Keyword 3:** post-traumatic stress disorder **Correspondence:** Lori DiBlasi, M.A.,

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62 Cognitive Functioning and Non-Cognitive Symptoms in Post-Acute COVID-19 Syndrome

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Objective: Patients with Post-Acute COVID Syndrome (PACS) are reported to commonly experience a variety of cognitive, physical, and neuropsychiatric symptoms well beyond the acute phase of the illness. Notably, concerns involving mood, fatigue, and physical symptoms (e.g., pain, headaches) following COVID-19 appears to be especially prevalent. It is unclear, however, the extent to which such symptoms

are associated with cognitive problems in patients with PACS. In the present study, we examined the prevalence of cognitive impairment in a sample of patients with PACS, as well as the relationship between cognitive functioning and several non-cognitive symptoms.

Participants and Methods: Participants were 38 patients with PACS [71.1% female; mean age = 48.03 years (SD = 11.60) and years of education = 15.26 years (SD = 2.60)] seen for a neuropsychological evaluation at a large Northeastern medical center at least three months from the time of COVID-19 diagnosis (per PCR test). As part of a larger battery, patients completed the Hopkins Verbal Learning Test- Revised (HVLT, learning and delayed recall), Trail Making Test (TMT; time to complete parts A and B), Controlled Oral Word Association Test (COWAT total correct), and Animals (total correct). They also were administered the Chalder Fatigue Scale-11 (CFS-11), Beck Depression Inventory-II (BDI-II), Beck Anxiety Inventory (BAI), and Patient Health Questionnaire (PHQ-15). The percentage of patients with scores in the impaired range (z < -1.5) on cognitive tests was determined. Correlations between cognitive and noncognitive measures were also examined. **Results:** The most frequent impairment was seen for COWAT (21.2%), followed by TMT-A and TMT-B (both 13.9%), then category fluency (9.1%). No patients were impaired on HVLT-R

seen for COWAT (21.2%), followed by TMT-A and TMT-B (both 13.9%), then category fluency (9.1%). No patients were impaired on HVLT-R Learning and only one (4%) for HVLT-R Delayed Recall. Overall, the sample endorsed considerable depression, anxiety, fatigue, as well as physical symptoms. Greater fatigue was associated with worse verbal learning, processing speed, cognitive flexibility, and verbal fluency (letter and category). Worse physical symptom severity was related to poorer verbal delayed recall and cognitive flexibility. Greater anxiety was also associated with worse cognitive flexibility, while more severe depression was related to poorer category fluency.

Conclusions: In our sample of patients with PACS, seen for evaluation several months since contracting COVID-19, phonemic fluency was the most common cognitive impairment, though less than a quarter were impaired on any given cognitive test. Importantly, several associations were observed between cognitive test performance and non-cognitive symptoms commonly endorsed by patients with PACS. These findings highlight the importance of

assessing multiple factors potentially contributing to cognitive impairment in these patients. Interventions designed to address such symptoms may be helpful in ameliorating cognitive functioning in those with PACS.

Categories: Infectious Disease (HIV/COVID/Hepatitis/Viruses)

Keyword 1: neuropsychological assessment

Keyword 2: attention **Keyword 3:** fatigue

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63 Select Dietary Components are Associated with Better Global Cognition in Adults with HIV

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Objective: People with HIV (PWH) are at an increased risk for cognitive impairment as they age compared to their HIV-negative counterparts. Lifestyle factors can have protective effects on cognitive outcomes among PWH. However, little work has examined diet quality and cognitive function in PWH. Examining the association between diet quality and cognitive function among PWH is particularly important given this population's increased risk for both poor diet quality and cognitive impairment. The purpose of this study was to examine the relationship between diet and cognitive function in aging PWH.

Participants and Methods: This cross-sectional study was conducted in Birmingham, Alabama and Cleveland, Ohio. Eighty-six PWH (mean age 56 years) completed standard triplepass 24-hour diet recalls and a neurocognitive assessment. Partial Pearson's correlations were conducted between diet variables and global neurocognitive function T scores, adjusting for total calories, sex, and education level.

Results: Overall diet quality of the sample was poor. The overall sample presented with low

Healthy Eating Index (HEI)-2015 scores, high alveemic index, twice the goal amount for saturated fatty acids (SFAs), and inadequate consumption of several nutrients typically associated with cognitive health including omega-3 fatty acids, dietary protein, fiber, Vitamin D, Zinc, and several B-vitamins. Greater total calories per day (r=0.28, p<0.05), greater percentage of total calories of SFAs (r=0.26, p<0.01), and lower glycemic index (r=-0.24, p<0.05) were associated with better cognition. Higher intake of several individual fatty acids, particularly SFAs, were associated with better cognition (correlations ranging from 0.23 to 0.31). Higher intakes of phosphorus (r=0.29, p<0.01), magnesium (r=0.25, p<0.05), and potassium (r=0.22, p<0.05) were associated with better cognition. Higher grams/day of several amino acids were associated with better cognition (correlations ranging from 0.22 to 0.27).

Conclusions: In a sample with overall poor diet quality not meeting recommended guidelines, findings suggest that being nourished in itself is associated with better cognitive function. Associations with several individual nutrients may inform potential intervention targets to protect brain health in PWH. Further, targeting food insecurity in interventions may have downstream effects on cognition in PWH.

Categories: Infectious Disease (HIV/COVID/Hepatitis/Viruses)
Keyword 1: cognitive functioning

Keyword 2: HIV/AIDS Keyword 3: aging (normal)

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64 Sluggish Cognitive Tempo in Pediatric Patients with Post-Acute Sequelae of COVID-19: Moderating Role of Depression on Functional Impairment

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