

## Has the COVID-19 pandemic impacted catatonia cases in children/adolescents?

**Dr. Dhossche:**

It is a fact that during COVID, we actually saw less adolescents come into the hospital with usual things, anxiety, depression. And I think to some extent, we're dealing with the consequences of this pandemic isolation period, and difficulties just going your normal ways in terms of school and meeting family. So yeah, I think we're seeing some of the consequences of that.

Now, catatonia cases, I have to tell you, most of the cases that I see in adolescents are related to substance use — cannabis — and trans-psychedelic substances — mushrooms, LSD. I would say 7 out of 10, it's related to substance use.

There was a time that we did not know that there was — or did not acknowledge that there was catatonia in young people. I remember, I mean, this was a long time ago, but during a literature review, I said, "I know about catatonia in adults," but since I started to go into child psychiatry, I said, "How many cases are there in child psychiatry? Will I ever see one in a child or an adolescent?" And the literature was very sparse.

I think I reviewed the cases in autism — the association of autism and catatonia. I think 30 years ago, there were like five cases in the literature. So there was no literature about that. And even the acknowledgement that you could see this in young people, pre-adolescence, or early adolescence, I mean, there were just a handful of cases.

Just the recognition of the syndrome has changed a lot in the last few decades, which is positive, although it's not perfect. It's still sometimes a struggle to get the correct diagnosis, and even more difficult sometimes to get the first-line treatments: benzos and ECT, or a combination of them.

So, yeah, that hasn't changed that much. Between Mississippi and Washington, you see the same problems of diagnosis and accessing treatments.