

TABLE 1: Summary of clinical findings of case reports reviewed.

Article No.	1 [10]	2 [11]	3 [12]	4 [13]	5(a) [14]	5(b) [14]	6 [15]	7 [16]	8 [17]	9 [18]	10 [19]	11 [20]	12(a) [21]	12(b) [21]	12(c) [21]	13 [22]	14 [23]
Study type	CR	CR	CR	CR	CS	CS	CR	CR	CR	CR	CR	CR	CS	CS	CS	CR	CR
Origin	UK	UK	US	UK	US	US	UK	US	UK	US	UK	UK	US	US	US	US	UK
Age	42	36	57	40	49	34	50	36	55	58	63	43	30	34	33	53	NM
Gender	M	F	M	M	M	F	M	F	F	M	M	M	M	F	M	M	M
“COVID - Psychosis” relation in title	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Chief complaints	Megalomaniac delusions	Disorganized delusion	Delusions	Delusions of death	Disorganized thought	Ideas of persecution	Auditory, visual and tactile hallucinations	Persecutory delusions	Paranoid delusions	Confusion	Nihilistic delusions	Grandiose delusions	Bizarre behavior	Disorganized behavior	Auditory hallucination	Persecutory delusions	Grandiose delusions
	Insomnia	aggressive and irritab le behaviour	Hallucinations	visual hallucinations	thought and behaviou r	disorganized behav iour	disorganized behav iour	hallucinations	insom nia	disorg anised behav iour	disorganised behav iour	irritability	Anxiety	Inattentive	paranoi c and persecu tory delusions	irritability	
	mood swings,	disorg anised thoug ht				Confusio n	panic attack			disorg anised behav iour		elevate self esteem	auditory hallucinations	Suspicio us			
	violent behav ior	insom nia				talkati venes	self-harm			aggr essiv e beha viour		bizarre somatic delusions	suicidal				

					diose delusions		disorganized behaviour		hallucinations				ideations				
Diagnosis	Relapse of severe psychosis associated with COVID 19	Psychotic relapse from Covid 19 quarantine	Late onset psychosis as a presentation of COVID 19 infection	New onset brief psychosis related to COVID 19 infection	New onset psychosis following COVID 19	New onset psychosis following COVID 19; Acute and transient psychotic disorder; Brief psychotic disorder; COVI	New onset psychosis due to COVID 19; Acute and transient psychotic disorder; Brief psychotic disorder; COVI	COVID 19 associated brief psychotic disorder; brief psychotic disorder with stressor; COVI	Persistent psychotic symptoms following COVID 19 infection	COVID 19 presenting as psychosis; COVID -19 infection	Psychotic disorder to another medical condition (COVID 19)	substance/medication induced manic episode with psychotic features	COVID 19 Psychosis	COVID 19 Psychosis	COVID 19 Psychosis	Brief Psychotic Episode	Acute Psychosis

							disord er with stress or	D 19 sequel ae										
Diagnostic criteria	NM	NM	NM	NM	NM	NM	AME RICA N PSYC HIAT RIC ASSO CIAT ION ET AL. 2013; ICD 10	NM	NM	NM	AMERI CAN PSYCH IATRI C ASSOC IATIO N ET AL. 2013	NM	NM	NM	NM	NM	NM	NM
Duration - Psychotic symptoms	8 days	NM	NM	7 days	7 days	NM	NM	7 days	52 days	NM	NM	NM	NM	NM	4 days	NM	NM	
Treatment-Psychosis	Olanzapine, lorazepam	Clozapine, risperidone	Haloperidol, lorazepam, aripiprazole -	Aripiprazole, diazepam	Halo peri dol, olan zapi ne, queti -	Risperidone	Sertraline – switch ed to risperidone, BZDs	Clonazepam, olanzapine- cross tapere	Lorazepam, haloperidol	Haloperidol, lorazepam	Risperidone	Valproic acid, paliperidone, olanzapine,	Quetiapine	Fluoxetine, melatonin, clonazepam,	Quetiapine	Haloperidol	Olanzapine	

			cross tapered to risperido ne		api ne			d to risperi done	taper ed to rispe rido ne			lorazep am		aripipraz ole			
Past history	Mania, schizoprenia	Schizoaffective disorder (3 admissions; last in 2012)	nil	nil	nil	nil	nil	nil	Polysubstance abuse (cocaine and alcohol)	nil	Opioid abuse	nil	nil	Opioid abuse	nil	Acute psychotic reaction (2yrs ago), depression, alcohol abuse	
Treatment status	Stopped treatment in 2016 (symptomatically improved)	Clozapine 250mg	nil	nil	nil	nil	nil	nil	nil	NM	nil	nil	Methadone 120 mg/day	nil	Bupropion		
Family history	NM	NM	NM	nil	nil	Nil	NM	nil	nil	NM	NM	NM	NM	NM	NM	NM	NM
Comorbidity history	NM	NM	T2 DM, HTN, CAD	nil	HTN, T2 DM, Hyp	nil	T2 DM, HTN, NAFD	Erythema multiforme	Renal calculi	CAD, chronic hepatitis C	nil	nil	nil	nil	nil	nil	nil

					erlip idae mia				(reso lved)									
Recover ry	NM	Not reco red	Recov ered in 6 weeks	Maint ained on Aripip razole	Rec overed in 2.5 wee ks	NM	Partial recov ery (resid ual anxiet y and insom nia)	Recov ered in 2 weeks	Reco vere d in 52 days	Recov ered in 1 week	NM	Recove red	Recove red	Recov ered	Recov ered	Recov ered	Recov ered	Recov ered
Duratio n B/w COVID positive status and onset of psychos is {RT- PCR}	9 days	COVI D confir med & sympt oms 7 days before psych osis	“Early in his ED course ”	COVI D not confir med (2 weeks betwe en COVI D sympt oms and psych osis)	CO VID not conf irme d (2 wee ks betw een CO VID sym pto ms and psyc hos is)	2.5 weeks before testin g positi ve for SARS CoV- 2	NM	4 days	3 days	COVI D confir med 3 days follow ing psych osis	NM (“durin g hospital isation”)	NM (psycho sis onset-8 days post admissi on for infectio n and 4 days after start of corticos teroid therapy)	NM	NM	NM	5 weeks	COVID confirme d & symptom s 6 days before psychosi s	

Severity of infection	NM	NM	NM	NM	NM	NM	NM	NM	NM	Elevated D-dimer, CT angiogram, thromboembolism	NM	Elevated Acute Phase Reactants	WBC decreased; CRP increased	CRP increased	NM	NM
Treatment- COVID infection	Antibiotic	NM	NM	nil	azithromycin	nil	C-PAP, antibiotics, acyclovir, steroids	nil	IVF, oxygen	hydroxychloroquine	NM	NM	nil	NM	NM	NM
Delirium	NM	NM	nil	nil	Yes	nil	NM	nil	Yes	NM	Yes	NM	nil	nil	NM	NM

KEY FOR TABLE

- 1. CR- Case report
- 2. CS- Case series
- 3. HTN- Hypertension
- 4. NM- Not mentioned
- 5. T2DM- Type 2 Diabetes Mellitus
- 6. M- Male
- 7. F- Female
- 8. CAD- Coronary Artery Disease
- 9. UK- United Kingdom
- 10. US- United States
- 11. IVF- Intravenous Fluids