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Letter to the Editor

Impact of COVID-19 Pandemic on Rate of Cognitive Impairment Screening Among the Elderly by Activity of Daily Living in Indochina: A Preliminary Report

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Dear Editor,

The coronavirus disease 2019 (COVID-19) outbreak has impacted healthcare routine service programs. Priority was given to COVID-19 infection prevention. Personnel and resources for the healthcare industry were reallocated. Effect of the COVID-19 pandemic on common screening practices in public healthcare is a fascinating subject. Prior research has amply demonstrated the value of routine cancer screening, particularly cervical cancer screening.[1] Cognitive impairment is still a fairly common medical issue in many parts of the world, particularly Southeast Asia. With routine screening and quick, targeted treatment, the endemicity of this disorder is anticipated to decrease locally.[2] An important factor that serves as a barometer for the effectiveness of a public health program is the program's coverage. In many remote places, early diagnosis and comprehensive care continue to present significant obstacles.[3] Although effects of conventional medical care are intriguing, they are rarely discussed. According to the study's authors, the COVID-19 pandemic had an effect on the elderly who experienced full cognitive impairment in areas where the disorder was a serious concern.

A preliminary study was carried out in the study province, a rural area of an Indochina country (GPS location) (15.698448, 100.128784). It is approximately 240 kilometers from the capital. This location is likely to be in an area where cognitive impairment is prevalent.[4] Per 1,000 local elderly, there were 267 cases of congenital cognitive impairment.[5] Geriatric screening is a popular strategy that is recognized as an effective way to treat a variety of illnesses, including genetic issues. Activities of Daily Living test is required at the first geriatric clinical visit according to local public health policy. All geriatric patients over the age of 60 within the primary care center's service area who could understand and attend the screening procedure met the criteria for cognitive function screening according to local public health standards.

If cognitive impairment was confirmed, standard specific rehabilitation care was provided. Primary data obtained from a public source (http://203.157.71.163/hgis03/) were used for retrospective data analysis. Each year, the rate of completion of cognitive impairment therapy for the elderly was directly compared. Data were analyzed from before COVID-19 debuted

Table 1. Data on completeness of cognitive impairment screening with Activities of Daily Living test for the elderly

Year	Screening coverage rate (%)	Change (%)
2017	74.22	N/A
2018	86.30	+12.08
2019*	85.65	−1.35
2020	83.46	−2.19
2021	61.34	−22.12

N/A: not available.
*After coronavirus disease 2019 appeared in 2010, the lockdown policy was put into place. It was not cancelled until 2021. According to the most recent data from 2021, there were 517,633 elderly people in the study area (54% females and 46% males; 77% under 75 years old and 23% over 75 years old).
Primary data source from http://203.157.71.163/kpi/uploads/20211210071254-%E0%B8%AA%E0%B8%A3%E0%B8%B8%E0%B8%9B%E0%B8%A3%E0%B8%B2%E0%B8%A2%E0%B8%87%E0%B8%B2%E0%B8%99%E0%B8%81%E0%B8%B2%E0%B8%A3%E0%B8%94%E0%B8%B3%E0%B9%80%E0%B8%99%E0%B8%B4%E0%B8%99%E0%B8%87%E0%B8%B2%E0%B8%99%E0%B8%AA%E0%B9%88%E0%B8%87%E0%B9%80%E0%B8%AA%E0%B8%A3%E0%B8%B4%E0%B8%A1%E0%B8%AA%E0%B8%B8%E0%B8%82%E0%B8%A0%E0%B8%B2%E0%B8%9E%E0%B8%9C%E0%B8%B9%E0%B9%89%E0%B8%AA%E0%B8%B9%E0%B8%87%E0%B8%AD%E0%B8%B2%E0%B8%A2%E0%B8%B8%20%E0%B9%80%E0%B8%82%E0%B8%953%20_5%E0%B9%80%E0%B8%94%E0%B8%B7%E0%B8%AD%E0%B8%99%E0%B9%81%E0%B8%A3%E0%B8%81%20%E0%B8%9B%E0%B8%B5%2065.pdf.

until 2021 when COVID-19 began to affect the study environment. Data on the overall number of senior people experiencing cognitive impairment between 2017 and 2021 are shown in **Table 1**. A constant completion that was unusual in therapy was observed prior to COVID-19. When COVID-19 and the lockout policy were adopted, therapy completion tended to decline before increasing once the lockdown policy was lifted.

In general, governmental public data on cognitive impairment screening might be available in a variety of settings. They are typically crude data lacking a thorough reappraisal. The current report was not based on raw data, but on new, specific findings about the impact of the COVID-19 outbreak. The most recent research has shown that COVID-19 has a significant impact on how well elderly people respond to conventional cognitive impairment screening programs. The proportion of screening coverage is considerably impacted by pandemic-related lockdown policy, although COVID-19 might have little impact. Progress is being made at a slower rate. The usual approach for preventing prenatal cognitive impairment was examined in this study to see how it was impacted by the COVID-19 pandemic. To the best of our knowledge, this is one of the earliest investigations of its kind. Knowledge gained from this observation can be applied to the COVID-19 pandemic continuum and other potential problems in the future.

We confirm that we have read the Journal's position on issues involved in ethical publication and affirm that this report is consistent with those guidelines.

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