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Introduction

Functional neurological disorder (FND) is a common and potentially disabling neuropsychiatric condition, whereby there is a functional, rather than structural deficit of the nervous system.

While presentation can be extremely diverse, from aphonia to seizure activity, one of the most common symptoms is weakness of one or more limbs, with an estimated incident rate of 3.9/100,000 per year.¹

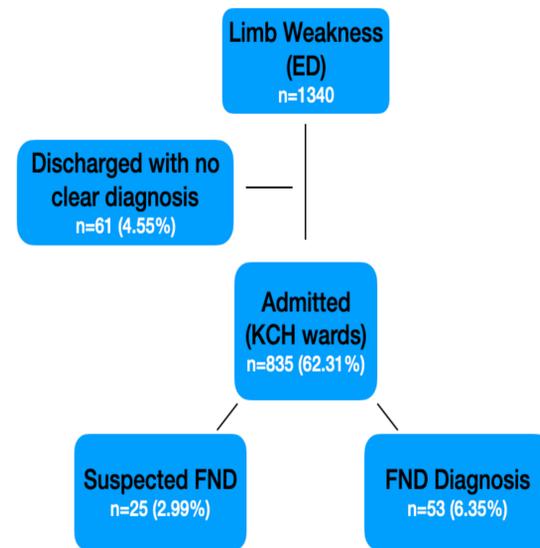
Despite functional weakness being one of the most common presentations seen in neurological practice, little is known about its prevalence in an Emergency Department (ED) setting.²

Aim

Describe the demographic and clinical characteristics of patients attending the Emergency Department (ED) with limb weakness of an unknown and potentially functional aetiology.

Method

- *Type:* retrospective electronic records review
- *Location:* ED, King's College Hospital, London
- *Duration:* 15 months
- *Main Data included:* age, gender, mode of arrival, psychiatric history, clinical diagnosis on discharge, discharge destination



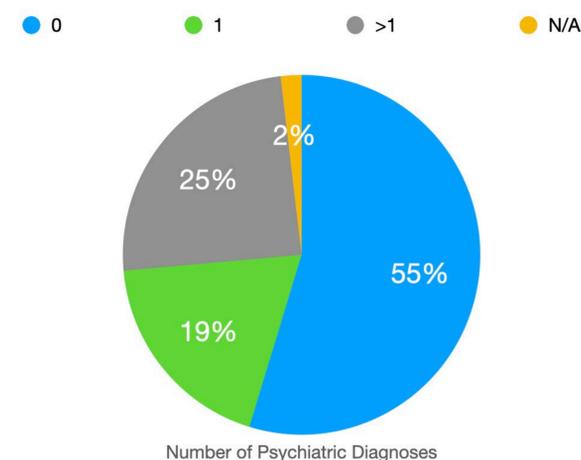
Results

Patients with FND diagnosis (n = 53)

Median Age (years): 45

Sex: F 62.96% (m = 54) M 37.04% (m = 42)

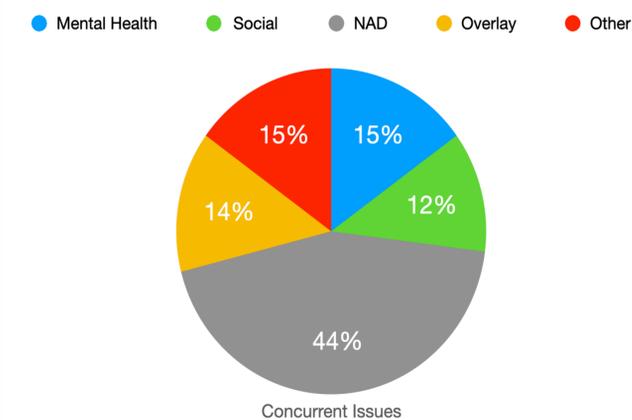
Female patients were younger (p = 0.003)



Patients with Suspected FND (n= 86) (A+B)

Median Age (years): 54

Sex: Female 45 (52.32%) & Male 41 (47.68%)



A. Admitted to KCH (n=25)

Median Age (years): 61

Sex: 13 Male (52%) & 12 Female (48%)

B. Discharged from ED (n = 61)

Median Age (years): 52

Sex: Male 28 (45.9%) & Female 35 (54.1%)

Arrival mode: Ambulance 29 (47.54%)

Triage code: every patient receives an ED triage code from 1-5, depending on severity of presentation with 1 being the most severe

| Triage Code | 1 | 2 | 3 | 4 | 5 | N/A |
|-------------|---|----------|------------|------------|---|-----------|
| | 0 | 3 (4.9%) | 33 (54.1%) | 16 (26.2%) | 0 | 9 (14.8%) |

Discussion

- Functional leg weakness as primary diagnosis represents nearly 4% (53/1340) of the total ED presentations of patients with leg weakness as the chief complaint
- A further 6.4% (86/1340) was discharged from the hospital with an unclear diagnosis (suspected FND)
- In 14% of the above, functional overlay was suspected
- A diagnosis of FND was only given to patients admitted on the wards and none in patients discharged directly from the ED
- *Limitations:* single-centre study, retrospective, no diagnosis assumed as "suspected FND"

Conclusion

There is a clear need for optimisation of the classification and coding system of the Emergency Department. Increased awareness and education around FND has the potential to raise diagnostic confidence and significantly improve patient experience and care.

References:

1. Stone, J., Warlow, C., & Sharpe, M. (2010). The symptom of functional weakness: a controlled study of 107 patients. *Brain*, 133(Pt 5), 1537-1551
2. David J. Dula, Louis DeNaples (1995). Emergency Department Presentations of Patients with Conversion Disorder. *Acad. Emerg. Med.* 1995; 2:120-123.