

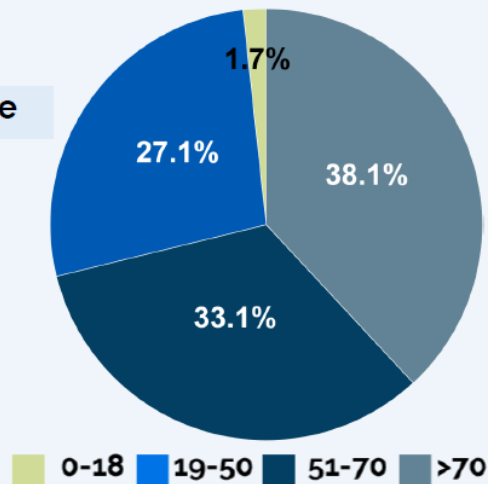
COVID-19 in Italy

169,325 cases of COVID-19*

17,997 health-care workers §

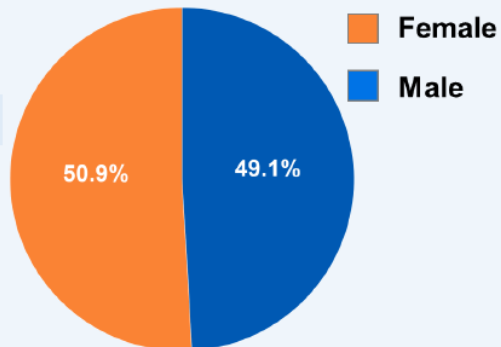
21,551 associated deaths

Age



Median age of cases; **62 years**

Sex

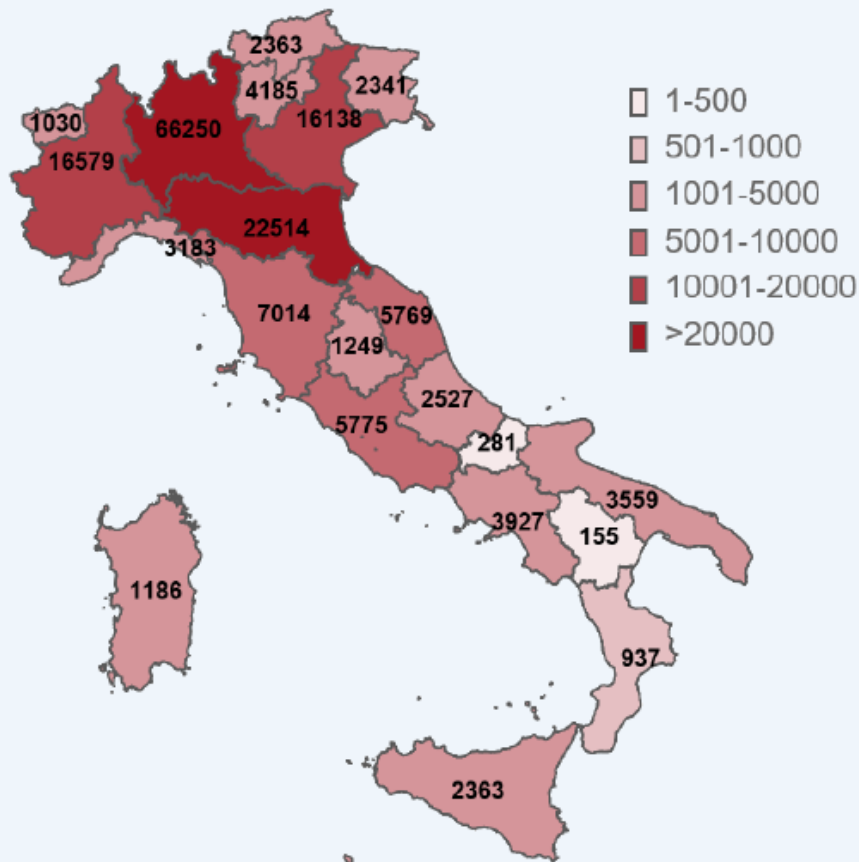


Age (years)	Deaths [n (%)]	CFR [§]
0-9	2 (0%)	0.2%
10-19	0 (0%)	0%
20-29	7 (0%)	0.1%
30-39	45 (0.2%)	0.4%
40-49	184 (0.9%)	0.8%
50-59	799 (3.7%)	2.5%
60-69	2418 (11.2%)	9.7%
70-79	6532 (30.3%)	24.4%
80-89	8750 (40.6%)	30.3%
>=90	2813 (13.1%)	25.1%
Not reported	1 (0%)	0.9%
Total	21551 (100%)	12.7%

§ Case Fatality Rate

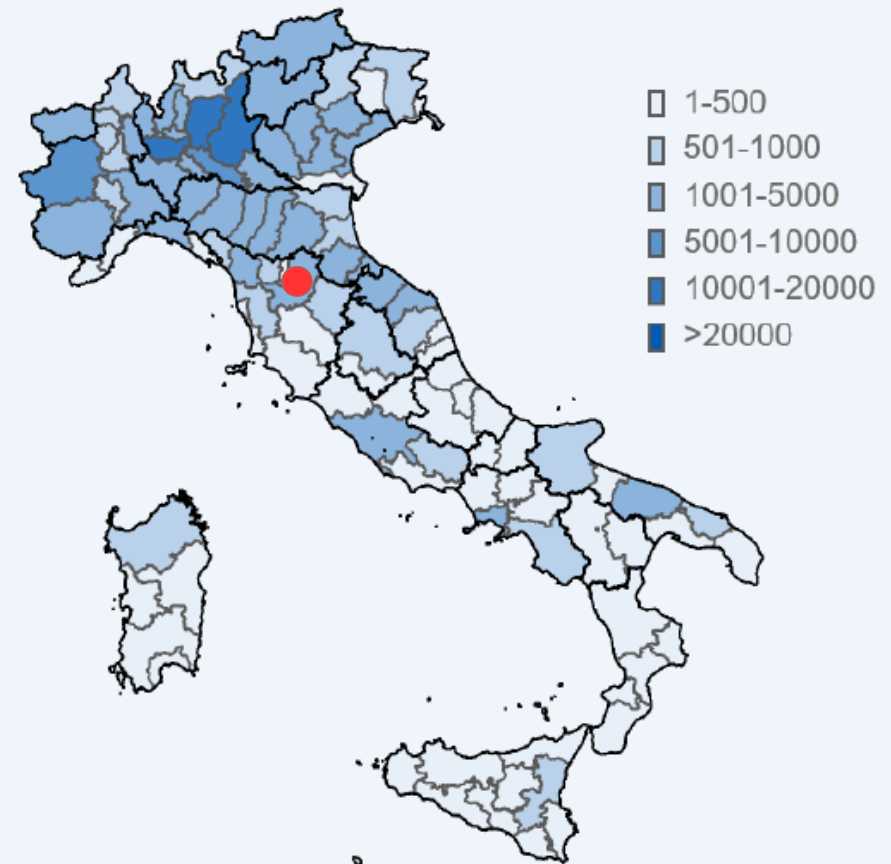
COVID-19 in Italy

Total number of COVID-19 cases diagnosed by the Italian Regional Reference Laboratories



By Region/Autonomous Province of diagnosis

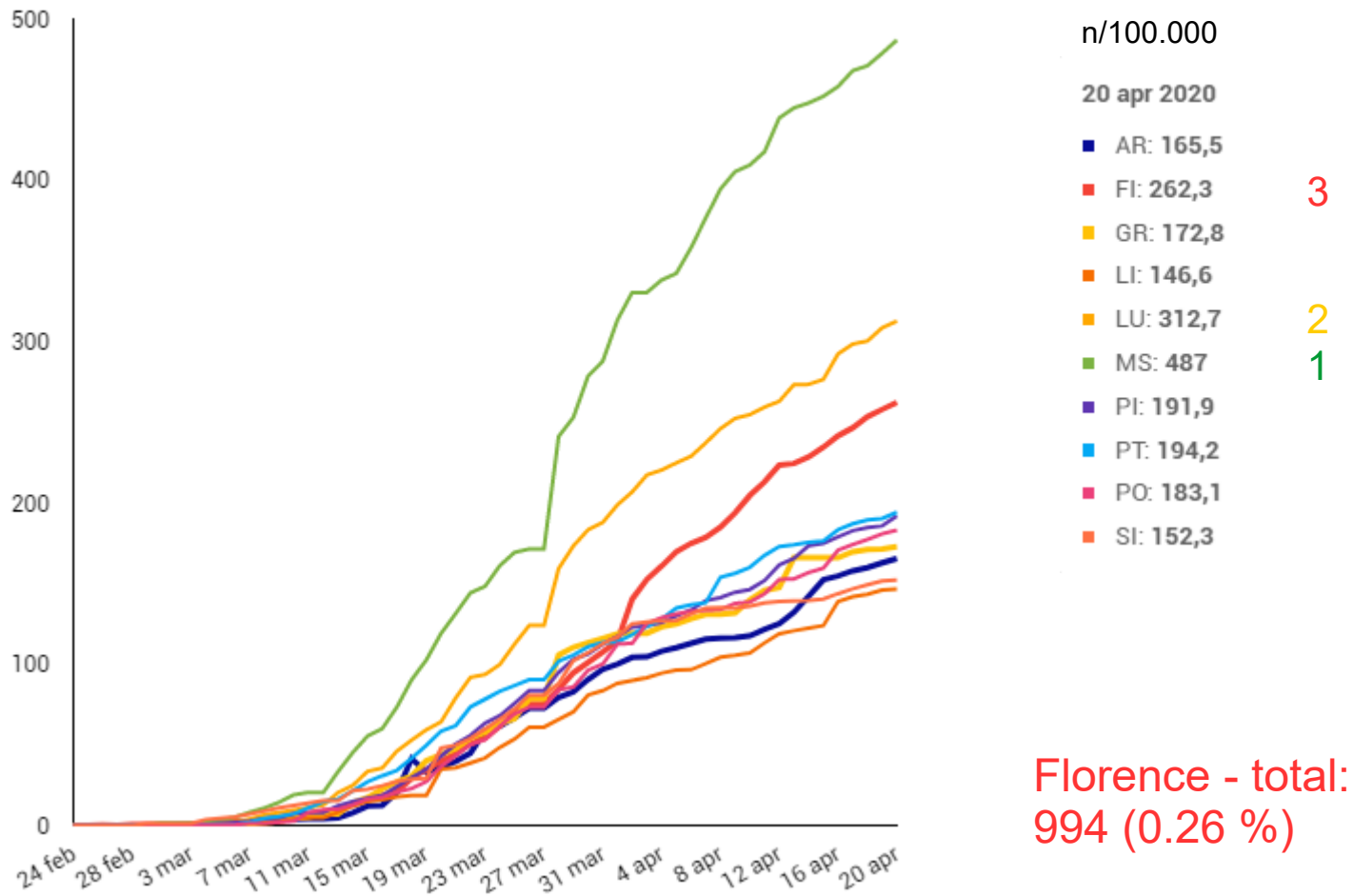
(data available for 169,325)



By province of residence

(data available for 164,220)

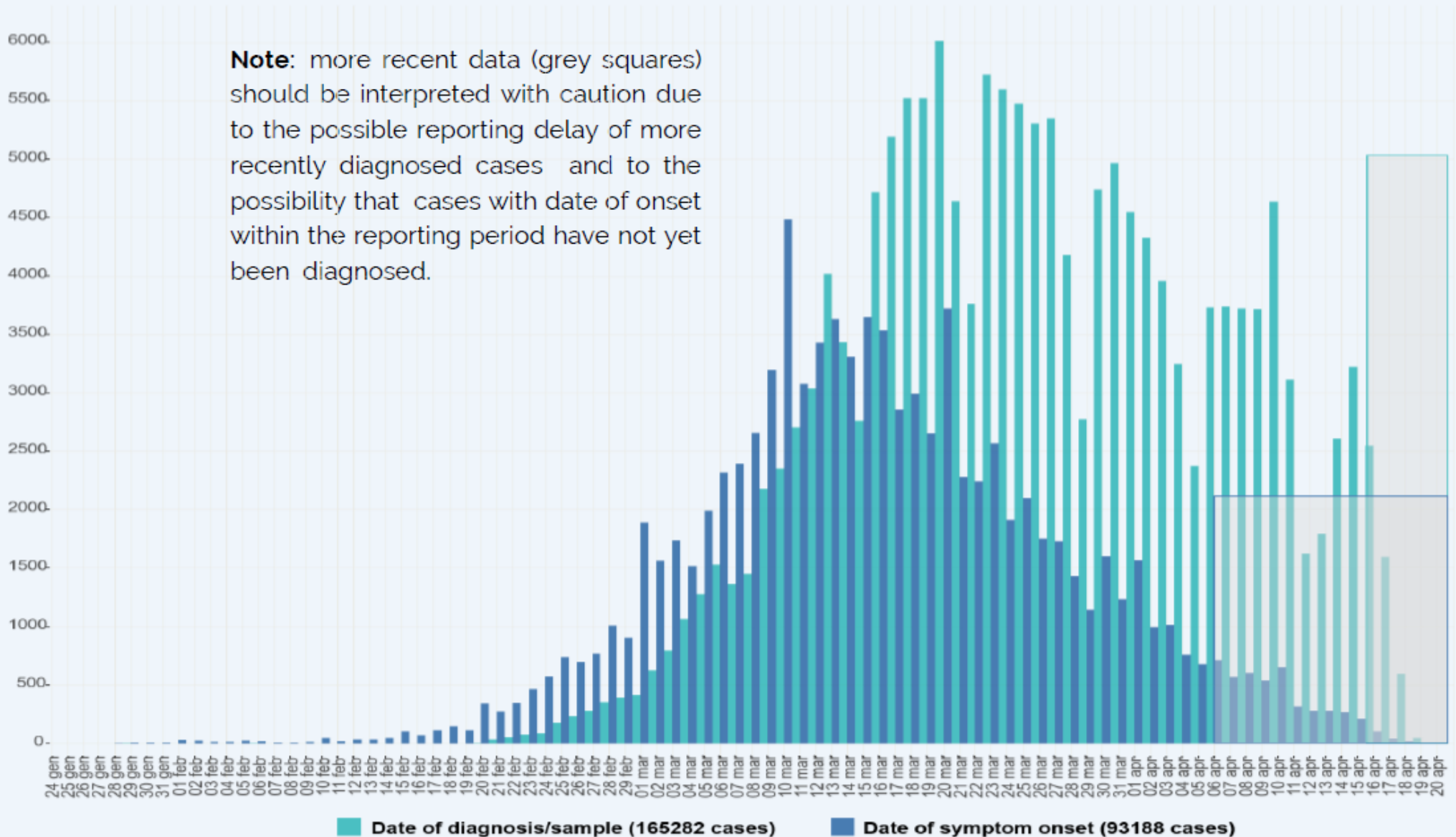
COVID-19 in Tuscany



COVID-19 in Italy

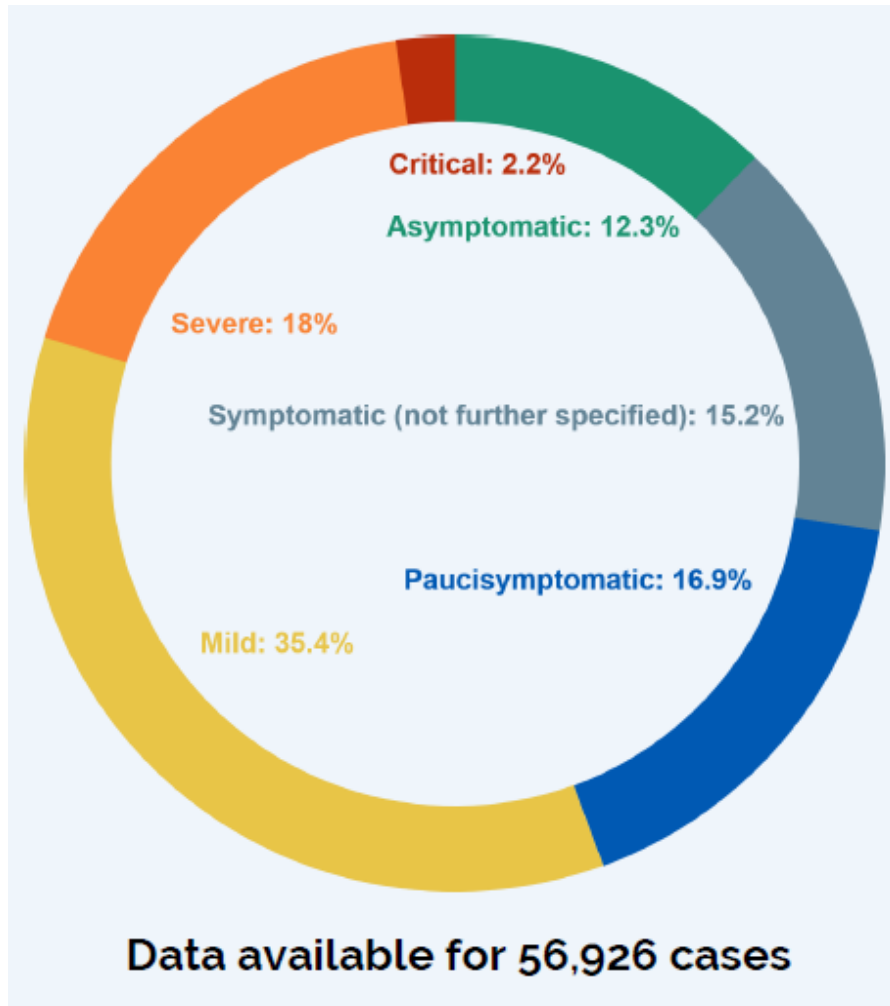
20 April 2020 UPDATE

Note: more recent data (grey squares) should be interpreted with caution due to the possible reporting delay of more recently diagnosed cases and to the possibility that cases with date of onset within the reporting period have not yet been diagnosed.



COVID-19 in Italy: Severity

General Population



ID/LF-ASD¹

asymptomatic to mild: 81-49%

severe to critical: 19-51%

Main factors of variability

- epidemic area
- living arrangement

¹ - personal preliminary raw data

ID and Low-functioning ASD: high vulnerability to the COVID-19 outbreak and the associated factors of mental distress

- multimorbidity (physical and mental)
- low levels of health literacy
- low compliance with complex hygiene rules
- reliance on other people for care
- difficulties to understand and communicate
- strong need of routine/sameness
- low adaptive skills

ID/ASD multimorbidity

- Physical multimorbidity includes endocrine diseases, hypertension, respiratory problems, cancer and other conditions associated with a higher risk for SARS-CoV-2 Acute Respiratory Distress Syndrome and other COVID-19 complications
- Research on previous respiratory viral infections, including H1N1 and RSV, suggests that persons with genetic syndromes including ID and/or ASD (i.e. Down syndrome) are more likely to develop complications and require more hospitalisation than the general population
- Higher ACE-2 gene expression and RAAS alteration?
- Very high rate of psychiatric disorders, with an overall lifetime prevalence up to 44% or even higher when ID and ASD co-occur.
- Anxiety disorders and affective disorders are the most common mental ill-health conditions
- Unidentified psychiatric co-morbidity is also very high, with prevalence rates that have estimated to exceed 50%, even in specialized support settings.

Consigli per la gestione dell'epidemia COVID-19 e dei fattori di distress psichico associati per le persone con disabilità intellettiva e autismo con necessità elevata e molto elevata di supporto

Versione 1.5

SIDiN (Società Italiana per i Disturbi del Neurosviluppo)

in collaborazione con

CREA (Centro Ricerca e Ambulatori), Fondazione San Sebastiano
ASMED (Associazione per lo Studio dell'Assistenza Medica alla persona con Disabilità)
Federazione Italiana Prader-Willi
ANGSA (Associazione Nazionale Genitori Soggetti Autistici) Onlus
FIA (Fondazione Italiana per l'Autismo)

Marco O. Bertelli¹, Daniela Scuticchio¹, Annamaria Bianco¹, Elisabetta F. Buonaguro², Fiorenzo Laghi³, Filippo Ghelma⁴, Michele Rossi¹, Giulia Vannucchi¹, Roberto Cavagnola⁵, Giuseppe Chiodelli⁵, Serafino Corti⁵, Mauro Leoni⁵, Silvia Gusso⁶, Corrado Cappa⁷, Luca Filighera⁸, Silvia Simone⁸, Mattia Zunino⁸, Raffaella Belotti⁸, Francesca Perrone⁸, Rita Di Sarro⁹, Roberto Keller¹⁰, Maurizio Arduino¹¹, Nataschia Brondino¹², Pierluigi Politi¹², Michele Boschetto¹³, Marino Lupi¹⁴, Eluisa Lo Presti¹⁵, Pasqualina Pace¹⁶, Marco Armellini¹⁷, Jacopo Santambrogio¹⁸, Corrado Barbui¹⁹, Davide Papola¹⁹, Patrizia Ceccarani²⁰, Maria Luisa Scattoni²¹.

1. CREA (Centro Ricerca e Ambulatori), Fondazione San Sebastiano, Firenze
2. Centro Don Orione, Ercolano; Università degli Studi di Napoli "Federico II", Napoli
3. Dipartimento di Psicologia dei Processi di Sviluppo e Socializzazione, Sapienza Università di Roma, Roma
4. DAMA (Disabled Advanced Medical Assistance), Milano
5. Fondazione Istituto Ospedaliero Sospiro, Cremona
6. Azienda Sanitaria Friuli Occidentale
7. Unità Operativa Psichiatria di Collegamento e Inclusione Sociale AUSL PC, Piacenza
8. Federazione Italiana Prader-Willi
9. Programma Integrato Disabilità e Salute, DSM-DP AUSL di Bologna, Bologna
10. Centro Regionale Esperto per i Disturbi dello Spettro Autistico in età adulta, DSM ASL Città di Torino
11. Centro Autismo e Sindrome di Asperger - SSD Psicologia e psicopatologia dello sviluppo ASL CN1, Cuneo
12. Università degli Studi di Pavia e ASST Pavia, Dipartimento di Salute Mentale e Dipendenze
13. Fondazione F. Turati - Agrabah Onlus, Pistoia; PAMAPI, Firenze
14. Associazione Autismo Toscana
15. ASMED (Associazione per lo Studio dell'Assistenza Medica alla persona con Disabilità)
16. Fondazione Marino per l'autismo Onlus
17. Direzione Salute mentale Infanzia e Adolescenza Usl Toscana Centro
18. Fondazione AS.FRA. Vedano al Lambro, Monza e Brianza; Presidio Corberi, Limbiate
19. Centro OMS di Ricerca in Salute Mentale, Università di Verona
20. Lega del Filo d'Oro
21. Osservatorio Nazionale Autismo, Istituto Superiore di Sanità



FONDAZIONE
SAN SEBASTIANO
DIREZIONE DELLA MISERICORDIA DI FIRENZE
Onlus - Impresa Sociale



PRADER WILLI
FEDERAZIONE ITALIANA DELLE ASSOCIAZIONI



FIA
FONDAZIONE ITALIANA
PER L'AUTISMO onlus

Advices for managing the COVID-19 outbreak and the associated factors of mental distress for people with intellectual disability and autism spectrum disorder with high and very high support needs

Version 1.5

SIDiN (Italian Society for Neurodevelopmental Disorders)

in collaboration with

CREA (Research and Clinical Centre), San Sebastiano Foundation
ASMED (Association for the Study of Medical Assistance for People with Disabilities)

Italian Federation for Prader-Willi syndrome

ANGSA (National Association of Parents of Persons with Autism)

Onlus

FIA (Italian Foundation for Autism)

and the Working Groups on Intellectual Disability and Autism Spectrum Disorder of the World Psychiatric Association Action Plan 2021-23



Italian version 1.5 (22/3/2020)

English translation (26/3/2020)

**Advisory Board World Psychiatric Association
Action Plan 2021-23 Working Groups on
Intellectual Developmental Disorder and
Autism Spectrum Disorder**

Marco O. Bertelli, Maria Luisa Scattoni, Afzal Javed, Muhammad Waqar Azeem, Luis Salvador-Carulla, Kerim M. Munir, and Ashok Roy

Already translated in

- German
- Dutch
- Russian
- Arabic
- Hindi
- Chinese
- Taiwanese
- Urdu

To be translated in

- Spanish
- French

Advices for managing the COVID-19 outbreak and the associated factors of mental distress for people with intellectual disability and autism spectrum disorder with high and very high support needs

Index

- The COVID-19 outbreak	5
- Accessible hygiene rules	5
- Stress and worry	6
- Anxiety crisis management	7
- Barriers	7
- Overcoming barriers	8
- Mental vulnerability	8
- Risks associated with isolation	8
- Counteracting the risks of isolation	9
- Risks associated with drastic changes in everyday living places and lifestyles	10
- Counteracting the risks associated with drastic changes in everyday living places and lifestyles	10
- Protective environments	11
- Recommendations for caregivers	11
- References	12

Counteracting the risks of isolation and drastic changes of everyday life

- maintain usual physiological rhythms
- expose yourself to sunlight
- continue to follow routines for your own hygiene and self-care
- exercise at home (use visual timers and take a diary)
- maintain contact, by telephone or computer, with teachers / rehabilitation staff and important persons
- use social networks, like Facebook or Instagram, with moderation
- carry out occupational, recreational and sports activities at home trying to maintain some commonality with the ways in which they were carried out before the lockdown
- repeat at least once a day the reasons why it is important to respect the lockdown and hygiene rules
- ask your doctor for a certificate on need to go out (specify diagnosis and reasons)
- space and time for privacy
- make a daily schedule (visual) that incorporates activities that can be carried out at home, including occupational, motor, and recreational activities
- maintain daily routine
- Take time for self-expression
- be involved in planning your day
- be reassured and informed on people that are important for you (use video calls to reinforce these messages)
- be aware of an increased risk of problem behaviour and prepare to manage