Introduction:
Critical illness survivorship increases and patients and health care providers have to face its long-term sequelae. Post Intensive Care Syndrome (PICS) describes emerging or worsening physical, cognitive or mental dysfunctions, arising after severe illness and persisting for a long time following hospital discharge, interfering with patients’ quality of life.

Methods:
In this prospective study we evaluated cognitive ability and mental health status in ICU survivors one year after hospital discharge. Eligible patients were 18-70 years old, requiring mechanical ventilation for more than 3 days. Patients completed the Mini-Mental State Examination (MMSE). The maximum MMSE score is 30 points. A score of 20-24 suggests mild dysfunction, 13-20 moderate disability, and <12 severe dysfunction. Patients also completed the Centre for Epidemiological Studies-Depression Scale (CES-D). Scores ≥16 indicate the presence of depressive symptoms. Finally, the State-Trail Inventory (STAI), comprised of two separate scales for measuring state (S) or trait (T) anxiety, was also completed. A cut-off of 40 detects clinically significant symptoms. Questionnaires were completed in the presence of an experienced psychologist.

Results:
Forty-one (23 F) ICU survivors with a mean age of 43±16 years were studied. They consisted of medical (n=17), trauma (n=15), surgical (n=8), or burn (n=1) patients. Median ICU stay was 12 (IQR: 4-66) days. MMSE score was 28±3; in 5 patients (12%) MMSE score was ≤24. CES-D was 17±12; 18 patients (44%) had high scores. Mean S-anxiety scale was 50±8; 39 patients (95%) had high scores. Mean T-anxiety scale was 44±6.

Conclusion:
One year after hospital discharge, ICU survivors exhibit symptoms consistent with PICS, involving primarily mental health, with anxiety and/or depression being prominent. Cognitive ability seems to be less commonly affected. It remains yet unclear whether interventions can ameliorate functional capacity in ICU survivors.