

ACUTE PSYCHOLOGICAL IMPACT OF COVID-19 ON HOSPITALIZED PATIENTS

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ABSTRACT

Background: COVID-19 is associated with mental and neurological manifestations. Anxiety and depression appear to be common among people hospitalized with COVID-19. They are already exposed to all the harmful effects of COVID-19 in society and once infected with the virus they feel helpless. The negative experiences specific to individuals who are infected with the covid-19 virus cannot be neglected. The complex emotions a COVID-19 positive hospitalized patient faces are fear about the outcome of their illness, social stigma, fear of infecting others and fear of death are all of grave concern and can push them into depression and even self-harm and suicides. **Aim of study:** to assess the prevalence of psychological problems among COVID-19 patients admitted in an isolated ward in acute phase. **Materials and Methods:** A cross-sectional study was carried out at Dhari Al-Fayaad general hospital with an isolated ward for COVID-19 patients with moderate severity from 1st November 2021 to 31st January 2022. A total of 105 COVID-19 patients were participated in this study. Data were collected by direct interview of patients using structured questionnaire that included sociodemographic information and Depression, Anxiety and Stress Scale - 21 (DASS-21). The required ethical approval was obtained. Descriptive statistics of categorical data were expressed by a number of cases and percentage. **Results:** Mean age of patients was 39.48 ± 16.504 years; with male to female ratio of 1:1.5. There were 87 (82.9%) patients with psychological problems; out of them, 41.4% have extremely severe psychological problems. Extremely severe psychological impact of COVID-19 was significantly associated with patients below 40 years old, females, and patients with higher education; ($P=0.026$, $P=0.014$, and $P<0.001$ respectively). **Conclusion:** Hospitalized COVID-19 patients have shown a high rate of psychological problems in acute phase.

KEYWORDS: Acute phase, Psychological problems, COVID-19, Educational level, Mental health.

INTRODUCTION

COVID-19 outbreak was sudden and unexpected in most countries. The first known cases occurred in late December 2019 and WHO declared it a pandemic on March 11, 2020.^[1]

COVID-19 is associated with mental and neurological manifestations, including anxiety, depression, sleep problems, headache, dizziness, impaired sense of smell or taste, myalgias, delirium/encephalopathy, agitation, coma, meningo-encephalitis and Guillain-Barré syndrome.^[2,3] Anxiety and depression appear to be common among people hospitalized with COVID-19. A study from Wuhan, China reported that a third of people

had symptoms of anxiety and depression.^[4] The USA (United States of America) reported psychological problems (including anxiety disorders and insomnia) in the first 2 weeks to 3 months after COVID-19 diagnosis.^[5,6]

The mental health of hospitalized COVID-19 patients is of grave concern. They are already exposed to all the harmful effects of COVID-19 in society and once infected with the virus they feel helpless. The notion of being drawn into and isolated from their near and dear ones at a time of ill health poses a grave danger to their physical and psychological well-being. They are also isolated from visitors and seeing relatives battling illness in hospital.^[7]

Decreased happiness and feelings of insecurity have been reported among the population. This anxiety was most pronounced among COVID-19 patients resulting in self-isolation, depression and fear of infecting others even after they have recovered and completed the quarantine period.^[8]

In a study from China, it was reported that half of Chinese in general had moderate to severe negative psychological impact associated with COVID-19. Furthermore, it was highlighted that 16.5% of the study participants had symptoms of depression, and 28.8% were concerned cases and 8.1% showed moderate to severe levels of stress.^[9]

The negative experiences specific to individuals who are infected with the covid-19 virus cannot be neglected. The complex emotions a COVID-19 positive hospitalized patient faces are fear about the outcome of their illness, social stigma, fear of infecting others and fear of death are all of grave concern and can push them into depression and even self-harm and suicides.^[10]

The aim of the study was to assess the prevalence of psychological problems among COVID-19 patients admitted in an isolated ward in acute phase.

MATERIALS AND METHODS

A cross-sectional study was carried out at Dhari Al-Fayaad general hospital with an isolated ward for COVID 19 patients with moderate severity from 1st November 2021 to 31st January 2022. A total of 105 COVID-19 patients were participated in this study. Data were collected by direct interview of patients using structured questionnaire that included sociodemographic information and Depression, Anxiety and Stress Scale - 21 (DASS-21).^[11]

The required ethical approval was obtained. Descriptive statistics of categorical data were expressed by a number of cases and percentage. χ^2 test and independent t test were used. $P < 0.05$ considered to be statistically significant.

RESULTS

Mean age of COVID 19 patients was 39.48 ± 16.504 years; with male to female ratio of 1:1.5.

There were 87 (82.9%) patients with psychological problems; out of them, 41.4% have extremely severe psychological problems. Figures 1 and 2.

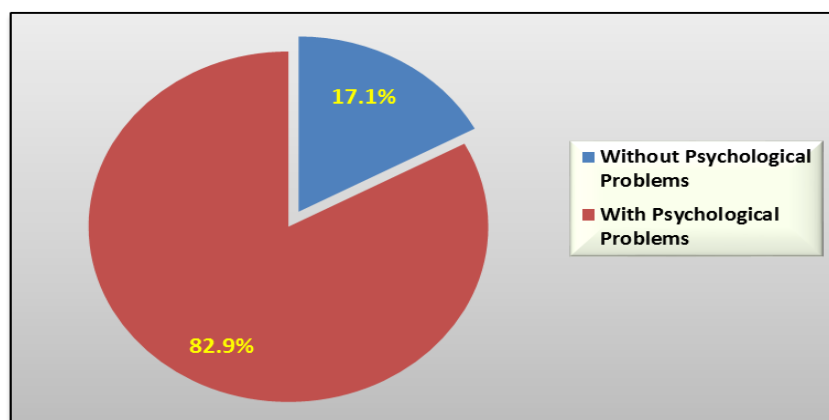


Figure 1: Prevalence of psychological problems among COVID 19 patients.

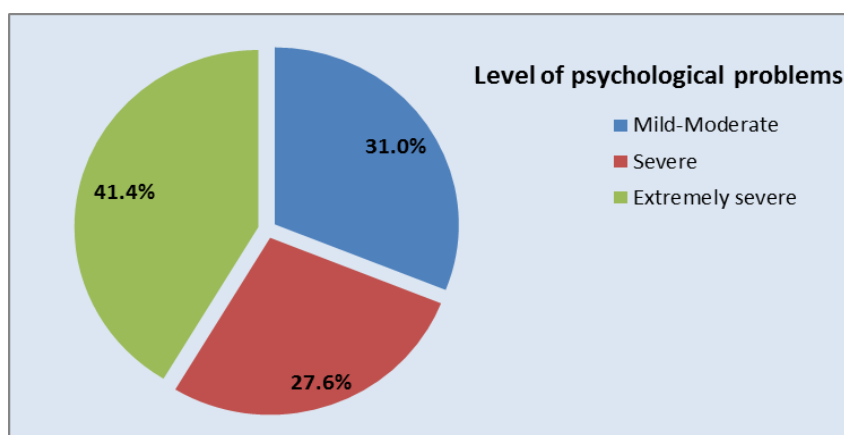


Figure 2: Level of psychological problems among patients.

Extremely severe psychological impact of COVID 19 was significantly associated with patients below 40 years

old, females, and patients with higher education; (P=0.026, P=0.014, and P<0.001 respectively). Table 1.

Table 1: Sociodemographic distribution according to the psychological problems.

		Levels of psychological problems								P
		Normal		Mild-Moderate		Severe		Extremely severe		
		No	%	No	%	No	%	No	%	
Age Group	< 40 years	9	12.0	24	32.0	15	20.0	27	36.0	0.026
	≥40 years	9	30.0	3	10.0	9	30.0	9	30.0	
Sex	Male	12	28.6	6	14.3	12	28.6	12	28.6	0.014
	Female	6	9.5	21	33.3	12	19.0	24	38.1	
Occupation	Employed	6	10.5	15	26.3	15	26.3	21	36.8	0.25
	Unemployed	12	25.0	12	25.0	9	18.8	15	31.3	
Education	≤Secondary school	15	27.8	18	33.3	12	22.2	9	16.7	<0.001
	> secondary school	3	5.9	9	17.6	12	23.5	27	52.9	
Smoker	Yes	3	17.6	5	29.4	0	0.0	9	52.9	0.078
	No	15	17.0	22	25.0	24	27.3	27	30.7	
Have chronic diseases	Yes	3	14.3	3	14.3	6	28.6	9	42.9	0.5
	No	15	17.9	24	28.6	18	21.4	27	32.1	
Hospitalized Days	<10 days	15	23.8	15	23.8	15	23.8	18	28.6	0.12
	≥10 days	3	7.1	12	28.6	9	21.4	18	42.9	

DISCUSSION

The COVID-19 pandemic is a global health crisis and a community emergency [12]. A rapid escalation of COVID-19 cases and deaths had been reported in the world. The emergence and persistence of these traumatic situations may lead to sequential psychological problems in the community, especially for patients who have been isolated due to infection.^[8,13]

Our study demonstrated that the incidence rate of psychological impact among hospitalized COVID 19 patients was 82.9%. This rate was higher than among general population. A study found that psychological problems among COVID 19 patients approximate to half that of observed study.^[14]

Psychological problems can also progress into chronic diseases. In the long run, these acute psychological problems would finally develop into chronic mental disorders, and even PTSD.^[15] These mental problems can be alleviated by cognitive behavioral therapy, which has been effective in reducing bad coping behaviors such as avoidance, confrontation, and self-blame by enhancing the patients' ability to manage stress.^[16]

Our study revealed that females associated with high rate psychological issues in agreement with another study.^[14] Also, this study revealed that higher educators associated with high rate of psychological issues, opposite to a study found a positive significant association between educational level and mental health outcomes. It is found that highly educated individuals had 58–82% lower rates of mental distress than participants with no educational backgrounds. This different might be due to their

different cultures and programs about how to managing crises.^[17-20]

In this study, younger patients were more susceptible to extreme psychological impact of the COVID-19 crisis. Similar to Swiss study that reported psychological problems of the COVID-19 was higher among young.^[18,20]

Therefore, screening for psychopathological issues and providing a mental health treatment to COVID-19 patients is critical, which may reduce the frequency of patients visiting doctors for emotional or physical symptoms after hospital discharge. This additional examination may reduce the waste of medical resources and reduce medical disputes as well.

Immediate psychological support should be adopted, and simple measures, such as physical activity and ensuring availability of personal protective equipment, should be of paramount importance to improving mental health outcomes and the quality of care provided to patients.

CONCLUSIONS

In short, COVID-19 patients have shown a high rate of psychological problems. Early identification and intervention of psychological problems in patients with COVID-19 should be embraced to avoid extreme events such as self-mutilation or suicidal impulsivity in patients.

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Conflict of Interest: The authors declare that they have no conflict of interest for this study.

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