

ORIGINAL ARTICLE

The feelings & perceptions of a Medical doctor after recovery from Corona infection

SIDRAH RIAZ¹, SABRINA TARIQ², UMAIR TARIQ MIRZA³, MUHAMMAD TARIQ KHAN⁴, SHABANA CHAUDHARY⁵, MUHAMMAD ARSHAD⁶

¹Associate Professor of Ophthalmology, Akhtar Saeed Medical and Dental College, Lahore

²House Officer, Department of Dentistry, Combined Military Hospital (CMH) Lahore

³Assistant Professor Ophthalmology, Muhiuddin Islamic Medical college, Mirpur AJK

⁴Professor of Ophthalmology, Akhtar Saeed Medical and Dental College, Lahore

⁵Assistant Professor Ophthalmology, Mayo Hospital, Lahore

⁶Assistant Professor Ophthalmology, BVH, Bahawalpur

Correspondence to Dr. Sidrah Riaz, Email. sidrah893@yahoo.com, +92-0322-4367303

ABSTRACT

Aim: To know the core feelings and perception of a medical doctor after recovery from corona infection

Study Design: A descriptive cross-sectional qualitative survey

Place and duration of study: Akhtar Saeed medical and dental college Lahore. Duration of study was two months from 1st January 2021 to 31st March 2021.

Methods: A survey questionnaire is formed and sent to different doctors of different specialties both in the public and private sectors. Non-probability conventional sampling technique was used. Qualitative data was analyzed by the SPSS 20.

Results: The online survey was sent to three hundred and fifty (350) doctors who were fellows, consultants, assistant consultants and professors. The voluntary response is submitted by 26 doctors who suffered and recovered from corona infection.

Conclusion: Coronapandemic has physical, psychological, social and economic effects. Everyone who suffered from it has his own insight about disease but unlike other infections, anxiety and uncertainty about future were major psychological effects which added to physical suffering of patients. All recovered patients strongly recommended following of SOPs. Vaccination with following SOPs is unanimously only optimistic approach against corona to decrease incidence and severity of infection. There is a need for doctor counselling sessions to cope with stress and anxiety issues.

Keywords: Corona infection, anxiety, consultant.

INTRODUCTION

Corona has emerged as new health hazard worldwide associated with immense loss of lives, exhaustion of money resources and mental strains. It is a viral disease which appeared initially in Hubei province of China in November 2019 and first reported to WHO as pneumonia of unknown cause in December 2019¹⁻³. Later it was confirmed in other regions outside china as well like in Thailand, Taiwan, Italy and Europe. According to reports 213 countries of the world have been knocked down with this dilemma with 430,000 deaths and 7.76 million active cases^{4,5}.

Pakistan is adversely affected with the pandemic because of number of factors including poor infrastructure of health, limited resources, illiteracy, deeply rooted myths and non-serious attitudes towards following of SOPs advised by health advisors⁶.

The Health care providers are at greater risk of contracting infections. About 14,627 doctors, nurses, and other health workers in Pakistan have been infected with the coronavirus. Out of which 143 have succumbed to the disease so far. The highest number of health professionals are infected with coronavirus is from Sindh. According to a document provided by the Ministry of National Health Services, a total of 14,627 health workers in Pakistan have

been infected by COVID-19 so far, including 8,588 doctors, 2,177 nurses, and 3,862 other health workers⁷.

Till date in Pakistan nearly 152 Doctors have lost their lives, excluding paramedical staff. As aerosol, through the respiratory route, is main route of transmission of infection, doctors from certain specialties like Dentists, ENT surgeons, Ophthalmologists, Dermatologists are more prone to exposure of infection^{8,9}.

MATERIAL AND METHODS

A questionnaire was formed and sent to doctors who were specialists, fellows, professors, consultants and assistant consultants working actively as physician or surgeons. It consisted of fifteen (15) questions that were sent to consultants by post, email and on social media. It was conducted nearly one year after first case declaration in Pakistan. Online survey methodology was used. Online google survey was generated and sent to those eye specialists who had computer literacy. Non-probability conventional sampling method was used. The doctors who didn't had fellowship degree, qualified but not doing private practice were excluded from study. The interview-based data collection technique was also formulated for those who were not very well versed in computer use. The data collected was cleaned, coded and entered in SPSS version 20. The frequency tables were generated, and qualitative variables were presented in form of pie charts and bar charts.

Received on 02-04-2021

Accepted on 18-05-2021

RESULTS

Out of 350 specialist doctors belonging to different fields of surgery and medicine, 26 submitted their response who recovered from corona by their own will to share their views. The age range of affected doctors was 35 to 63 years with an average age 50.8 years. These doctors belong to different specialties like medicine, surgery, ophthalmology, gynecology, community medicine, dentistry, neurology, orthopedic and pathology. 23.80% consultants were vaccinated already with corona vaccine at time of diagnosis where as 76.20% were not vaccinated when got infection (Fig 1). The time duration between vaccination and getting corona infection symptoms ranged from 2 to 21 days after first dose where as in one person it was 10 days after 2nd dose of vaccine. The different vaccines used were Chinese vaccine sinopharm for majority of doctors (83.20%) and 5.6% had sputnik, 5.6% had Pfizer and 5.6% has vaccination with AstraZeneca (Fig2). All doctors were using protective measures specially face masks (100%). Close family member living under same roof were also positive in 68.20% cases where as only doctor was corona positive in 31.80% cases and family was spared (Fig 3). Hospitalization was required for disease complication in 9.10% cases whereas 90.90% were treated at their homes under physician guidance (Fig4). The duration of hospitalization was 10 days to two weeks. Regarding day offs from a work place was minimally 7 days to maximum 45 days but on an average most doctors had 2 weeks off from work places. Antiviral drugs with steroids were part of treatment regime for 59.10% and 40.90% recovered without antiviral therapy (Fig 5). Top four reactions after getting positive corona test were anxiety (40.60%), sense of insecurity (14.20%), fear (13.60%) and depression in 9.10% (Fig 6. Bar chart). Isolation (54.50%) was one thing which bothered most of consultants during illness; others were economic strain 13.60% and mental health 9.10%. Other bothersome aspects were anxiety, severe myalgia, weakness, children jobs and marriages and depressive thoughts, 4.5% for each (Fig 7. Bar chart).

Fig 1: vaccination status

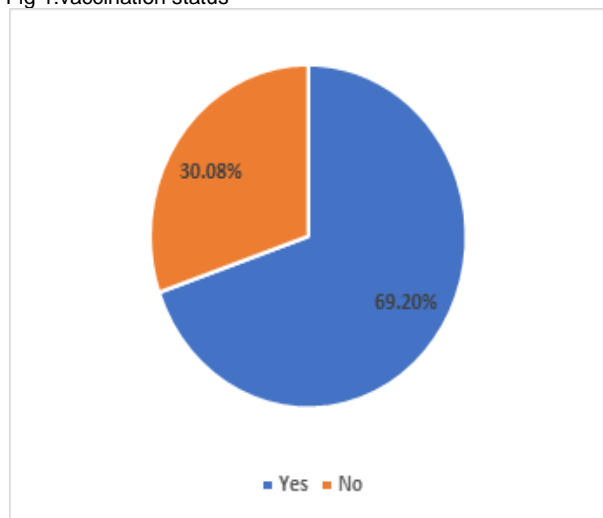


Fig 2: type of vaccine used

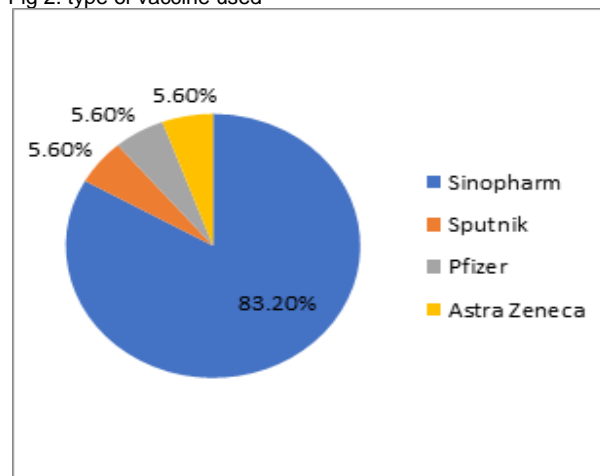


Fig 3: corona test positive in family members

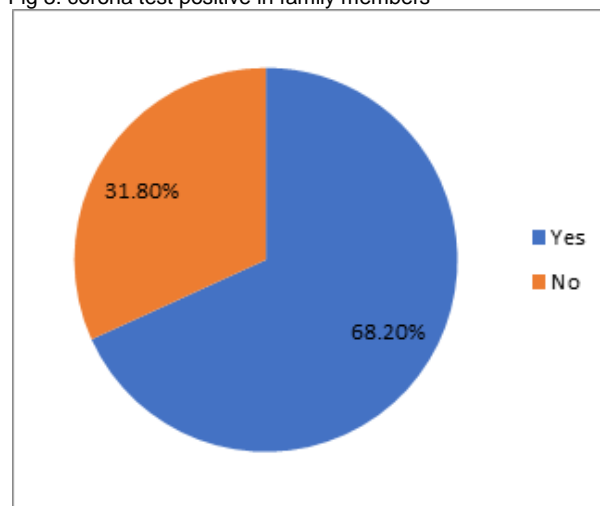


Fig 4: Hospitalization admission required or not

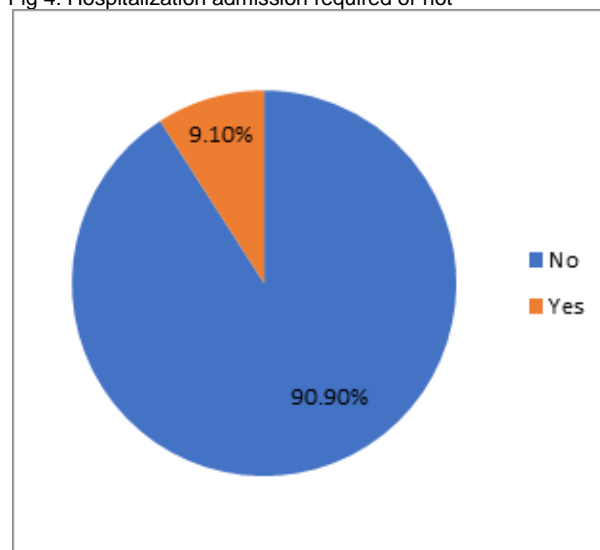


Fig 5: antiviral/steroids used or not

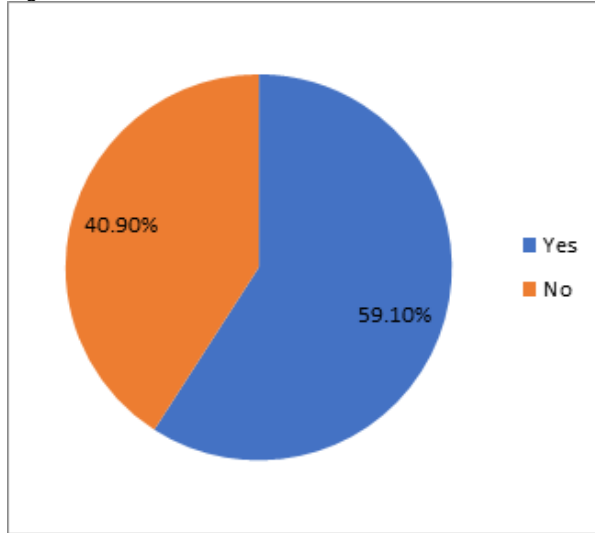


Fig 6: First thought in mind when corona test found positive

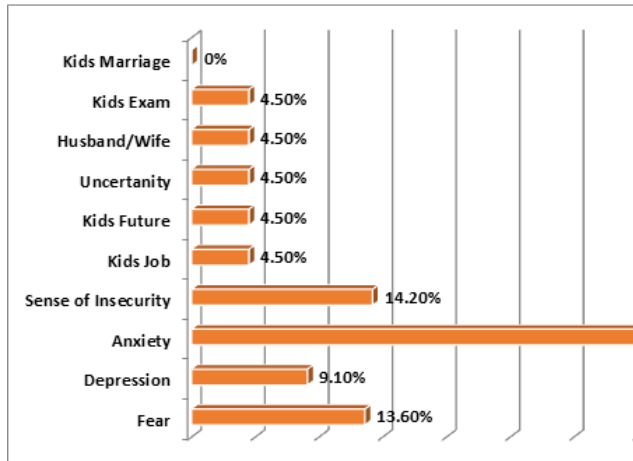
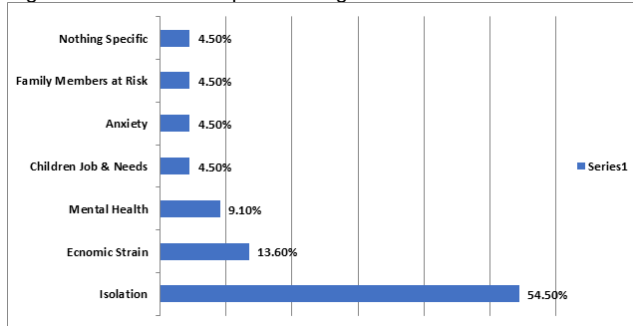


Fig 7: Most bothered aspects during illness



DISCUSSION

Corona pandemic has created lot of psychosocial issues, apprehension, unease and restlessness for the human beings and health care workers are not different. The universal approach of social distancing, self-isolation and lockdown has been adopted to control disease spread¹⁰. Closure of educational institutes, 50% attendance at

offices, avoiding elective surgeries and social gathering restrictions are implemented by higher authorities.

Pakistan is a populous country with 212 million people and here doctor to patient ratio is low 1:1300¹¹. Pakistan health system is not very strong and its capacity to deal with emergency situations like Covid-19 pandemic is not up to mark despite efforts¹². Even the developed world has not found itself to deal this pandemic efficiently. A European country, Belgium had to request its neighboring country, Germany to share the corona patients burden, as it was not able to cope the situation.

More than 15000 health care providers have been reported to be affected with corona infection in Pakistan. The doctors are usually considered as difficult "patients" because they need rationale of every drug suggested to them and usually start with self-medication if not well. In addition, they are more aware of complications of disease and treatment if they are suffering so are more curious.

The only vaccination available in Pakistan, till February 2021, was Sinopharm so most health workers received this type of vaccination after pre-registration. It was unfortunate that 30% of consultants suffered from COVID-19 infection when they had either complete vaccination (two doses) or few weeks after first or 2nd dose of vaccination. As vaccines are still under trial and different companies claim around 70-80% efficacy so getting disease after vaccine is not something surprising. Another controversial issue is need of anti-viral drugs with steroids as a first drug against infection. There are variable views on need of antiviral drugs as first line therapy and issues are still debatable. Nearly 59% were recovered with use of antiviral plus steroids whereas 41% didn't need that and recovered with intravenous antibiotics and supportive treatment.

Anxiety is not a new "term" for a consultant because he/she has entered in the tension circle since days of medical college. It is a common response to stressful conditions. During the illness anxiety was most pronounced feature stated almost by all the consultants. It is not the issue of developing countries like Pakistan but developed world doctors are also suffering from similar issues¹³⁻¹⁵. There are different factors like high workload, long working hours, stress at work place and uncertain nature of job which can result in low immunity and higher level of stress in doctors¹⁶⁻²⁰. It can result in dreadful consequences like committing suicide²¹ so this issue needs to be addressed carefully. Both suspected and confirmed cases of corona infection are observed to suffer from anxiety, loneliness, depression, denial, fear and insomnia.

Being a sole earning member of family, risk of infection due to exposure from patients, family members at risk, lack of insurance policies for health care worker from government and death of a colleague from corona, all has resulted in anxiety, worry, depression and tension specially for a doctor²²⁻²⁴. About 60% doctors in our survey were sole earning member of family with three or more dependents. Studies have showed that doctors from neighboring countries like China, India and Iran are also dealing with anxiety issues²⁵⁻²⁷. The increased positivity rate in our neighbor country India, with death toll touching around 3000 per day is worrisome and heart breaking.

Living in isolation is not easy and living alone with fever is more difficult that's why isolation was one aspect, the recovered doctors were very concerned. In our study it was bothersome by 54.50% consultants. Either mandatory or self-imposed quarantine, isolation have very strong impact on person life²⁰. All recovered doctors strongly recommended that following of SOPs and vaccination because "Prevention is better than cure" and importance of family support was recognized by all recovered doctors.

In Pakistan although very few studies have been conducted to know about anxiety and fear among health care providers, but recent study has proved that more than 50% doctors report symptoms of anxiety and depressive illness due to multiple factors²⁸⁻³⁰.

CONCLUSION

Corona pandemic has physical, psychological, social and economic effects. Everyone who suffered from it has his own insight about disease but unlike other infections, anxiety and uncertainty about future was major psychological effect which added to physical suffering of patients. Following of SOPs as precaution and developing strong family ties can provide a better support system during illness. Vaccination with following of SOPs is only hope to decrease incidence and severity of corona infection unanimously. There is a need for doctor counselling sessions to cope with stress and anxiety issues and there should be an economical support system for families of doctors who died during their duties.

REFERENCES

- Shereen MA, Khan S, Kazmi A, Bashir N, Siddique R. COVID-19 infection: origin, transmission, and characteristics of human coronaviruses. *Journal of Advanced Research*. 2020.
- Singhal T. A review of coronavirus disease-2019 (COVID-19). *The Indian Journal of Pediatrics*. 2020;1-6.
- Zhan M, Qin Y, Xue X, Zhu S. Death from Covid-19 of 23 Health Care Workers in China. *N Engl J Med*. 2020;382(23):2267–2268.
- Organization WH. Coronavirus disease 2019 (COVID-19): situation report, 72.
- Petersen E, Hui D, Hamer D.H., Blumberg L., Madoff L.C., Pollack M. Li Wenliang, a face to the frontline healthcare worker. The first doctor to notify the emergence of the SARS-CoV-2, (COVID-19), outbreak. *Int J Infect Dis*. 2020;93(February):205–207.
- Saleem Z, Majeed MM, Sara Rafique S et al. COVID-19 pandemic fear and anxiety among healthcare professionals in Pakistan, 23 July 2020. doi.org/10.21203/rs.3.rs-37608/v2]
- Corona updated, 22 April 2021: Latest news on cCOVID-19 pandemic from Pakistan and around the world. www.geo.tv
- Amber Ather B, Nikita B. Coronavirus Disease 19 (COVID-19): Implications for Clinical Dental Care. *Journal of Endodontics*. 2020;46(5).
- Uddin KB. Work from home: New routines, unexplored territories, and unexpected shortcomings: Geo.tv; 2020 [updated 18th April 2020]. Work from home was not a common concept for Pakistanis, but now everyone has moved towards this trend].
- Shanafelt T, Ripp J, Trockel M. Understanding and addressing sources of anxiety among health care professionals during the COVID-19 pandemic. *JAMA*. 2020;323(21):213–4.
- Nizar H, Chagani P. Analysis of health care delivery system in Pakistan and Singapore. *Int J Nurs Educ*. 2016;8(2):21–6.
- Arshad S, Iqbal J, Waris H, Ismail M, Naseer A. Health care system in Pakistan: A review. *Res Pharm Health Sci*. 2016;2(3):211–6.
- Mrklaas K, Shalaby R, Hrabok M, Gusnowski A, Vuong W, Surood S, Ulrichuk L, Li D, Li X-M, Greenshaw AJ, Agyapong VIO. Prevalence of Perceived Stress, Anxiety, Depression, and Obsessive-Compulsive Symptoms in Health Care Workers and Other Workers in Alberta During the COVID-19 Pandemic: Cross-Sectional Survey. *JMIR Mental Health*. 2020;7(9):e22408.
- Elhadi M, Msherghi A, Elgzairi M, Alhashimi A, Bouhuwaish A, Biala M, et al. Psychological status of healthcare workers during the civil war and COVID-19 pandemic: A cross-sectional study. *J Psychosom Res*. 2020;137:110221.
- Amin F, Sharif S, Saeed R, Durrani N, Jilani D. COVID-19 Pandemic Knowledge, Perception, Anxiety and Depression Among Frontline Doctors of Pakistan. *BMC Psychiatry*. 2020;20:459.
- U.S. Department of Health and Human Services – Office of Inspector General. Hospital Experiences Responding to the COVID-19 Pandemic: Results of a National Pulse Survey March 23–27, 2020 (2020). Available online: <https://oig.hhs.gov/oei/reports/oei-06-20-00300.asp>. (Accessed on 4 June 2020).
- Croxxon CH, Ashdown HF, Hobbs FR. GPs' perceptions of workload in England: A qualitative interview study. *Br J Gen Pract*. 2017;67(655):e138–47.
- Goulia P, Mantas C, Dimitroula D, Mantis D, Hyphantis T. General hospital staff worries, perceived sufficiency of information and associated psychological distress during the A/H1N1 influenza pandemic. *BMC Infect Dis*. 2010;10:322.
- Hayes B, Prihodova L, Walsh G, Doyle F, Doherty S. What's up doc? A national cross-sectional study of psychological wellbeing of hospital doctors in Ireland. *BMJ Open*. 2017;7(10):e018023.
- Qiu J, Shen B, Zhao M, Wang Z, Xie B, Xu Y. A nationwide survey of psychological distress among Chinese people in the COVID-19 epidemic: implications and policy recommendations. *General psychiatry*. 2020;33(2).
- Goyal K, Chauhan P, Chhikara K, Gupta P, Singh MP. Fear of COVID 2019: First suicidal case in India! *Asian journal of psychiatry*. 2020;49:101989.
- Ahmed MA, Jouhar R, Ahmed N, Adnan S, Aftab M, Zafar MS, et al. Fear and Practice Modifications among Dentists to Combat Novel Coronavirus Disease (COVID-19) Outbreak. *Int J Environ Res Public Health*. 2020;17(8): 2821.
- Huang L, Lei W, Xu F, Liu H, Yu L. Emotional responses and coping strategies in nurses and nursing students during COVID-19 outbreak: A comparative study. *PLoS One*. 2020;15(8):0237303.
- ERSOY A. The frontline of the COVID-19 pandemic: Healthcare workers. *Turkish Journal of Internal Medicine*. 2(2):31–2.
- Taghizadeh F, Hassannia L, Moosazadeh M, Zarghami M, Taghizadeh H, Dooki AF, et al. Anxiety and Depression in Health Workers and General Population During COVID-19 Epidemic in IRAN: A Web-Based Cross-Sectional Study. medRxiv.
- Xiao H, Zhang Y, Kong D, Li S, Yang T. The effects of social support on sleep quality of medical staff treating patients with coronavirus disease 2019 (COVID-19) in January and February 2020 in China. *Medical science monitor: international medical journal of experimental clinical research*. 2020;26:e923549-1.
- Cai H, Tu B, Ma J, Chen L, Fu L, Jiang Y, et al. Psychological Impact and Coping Strategies of Frontline Medical Staff in Hunan Between January and March 2020 During the Outbreak of Coronavirus Disease 2019 (COVID-19) in Hubei, China. *Medical science monitor: international medical journal of experimental clinical research*. 2020;26:e924171-1.
- Bo H-X, Li W, Yang Y, Wang Y, Zhang Q, Cheung T, et al. Posttraumatic stress symptoms and attitude toward crisis mental health services among clinically stable patients with COVID-19 in China. *Psychological medicine*. 2020;1-2.
- Urooj U, Ansari A, Siraj A, Khan S, Tariq H. Expectations, Fears and Perceptions of doctors during Covid19 Pakistan *Journal of Medical Sciences*. 2020;36(COVID19- S4).
- Mukhtar, Sonia. 2020. Pakistanis' mental health during the COVID-19. *Asian Journal of Psychiatry*, published online 23 April 2020. <https://doi.org/10.1016/j.ajp.2020.102127>