ORIGINAL ARTICLE

Mental Health Issues in Covid 19 Recovered Patients of Lahore, Pakistan

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ABSTRACT

Background: Corona virus belongs to the coronaviridea family. Its variant, the severe acute respiratory coronavirus-2 (SARS-COV-2) is a beta coronavirus causing the current Covid-19 outbreak in humans. This virus not only has pathological effects, but it also affects psychologically. Our study aims to find out the mental changes affecting the COVID recovered patients.

Methodology: A cross-sectional study was carried at Central Park Medical College from July 2021- August 2021 to assess the psychological stress and anxiety among COVID-19 recovered patients. Data was collected from 96 COVID-19 recovered patients through a self-designed questionnaire using convenient sampling design.

Results: The mean age of the participants was 28.07 + 12.45 SD in years. About 44.8% of the participants were female. Approximately 79% participants were graduated or above. About 52.4% of the participants who were infected from COVID-19 mentioned that they lost their appetite during illness. Nearly 71.4% of the participants mentioned that they were more anxious during the illness.

Conclusion: Nearly two third participants had sad feelings. A high percentage of respondents had some level of anxiety. Most of the participants reported sudden and panic attacks after COVID. Many respondents said that they were trying to overcome these mental after affects of COVID. **Keywords:**

INTRODUCTION The first case of Corona virus appeared in 2019, and it was named Covid-19 aptly. Corona virus belongs to the coronaviridea family. Several related viruses which include SARS-COV-1, (a beta corona virus) caused the 2002 outbreak in China, and MERS, (also a beta corona virus) caused Middle East Respiratory Syndrome outbreak in Jordan in 2012.¹

SARS-COV-2 mainly affects the respiratory system as Interstitial Pneumonia and Acute Respiratory Distress Syndrome (ARDS). Although lungs are the primary organs which are affected by this disease but, there is some evidence which suggests that it can spread to other organs including heart, blood vessels, kidneys, gut, and brain.²

The novel coronavirus (2019-nCoV) outbreak can cause severe respiratory illnesses, such as severe acute respiratory syndrome (SARS-COV).³ This virus not only has pathological effects, but it also affects psychologically. The outbreak of SARS-COV in 2002 and 2003 in Guangdong Province China, was regarded as a "Mental Health Catastrophe".⁴

Research has shown public health disasters can cause an onset of emotional disorders. Hence, it is essential to pay attention to psychological well-being and mental stress during the COVID-19 pandemic.⁵

COVID 19 led to innumerable deaths causing feelings of helplessness, social isolation, anxiety, depression, sleep disturbances and aggression among the people.⁶ Moreover, the infection symptoms such as fever, hypoxia, and cough can precipitate the above mental health problems.⁶

The psychological and psychiatric factors play an essential role in adherence to public health measures and in how people cope with the threat of infection and their resulting outcomes⁷. People with pre-existing mental illness are more prone to develop psychological issues of COVID 19 disease, and have a low expectancy of life as compared to rest of the population.⁷

The incidence of mental challenges faced by the patients of COVID -19 showed 19.4% pooled incidence for depression and 26.4% pooled incidence of post-traumatic stress disorder (PTSD).⁸ These results were brought about by a systematic search on psychological problems from PubMed to 10 October 2020, and conducting a meta-analysis using Comprehensive Meta-Analysis V.3 software.⁸

Prevalence is defined as the total number of all individuals who have an attribute or disease at a particular time divided by population at risk of having attribute or disease at this point.⁹ There was 31.4% pooled prevalence of depression, 31.9% pooled prevalence of anxiety, 41.1% pooled prevalence of distress and 37.9% pooled prevalence of insomnia.⁹ The aim of this study is to find out the common mental changes affecting COVID recovered patients and observe the prevalence of stress and anxiety among COVID recovered patients.

METHODOLOGY

A cross-sectional study was carried out at Central Park Medical College and Teaching Hospital, Lahore. The data was collected from 110 participants using non-probability convenience sampling design. All those participants who had COVID PCR positive were included in the study. Those participants who were suffering from COVID but their COVID PCR test was negative were excluded. The data was collected from July 2021 to August 202.

The data was collected using self-designed questionnaire with reliability tested using Cronbach alpha. Consent form was given prior to data collection from each participant. Socioeconomic and demographic information was also collected. Information on multiple factors such as level of anxiety, restless feelings, panic attacks was collected to observe the mental health challenges and Post-COVID trauma.

RESULTS

The data was collected from 115 participants. The reliability of the data was 60.4%. The mean age of the participants was 28.07 + 12.45 SD in years. Nearly 55.2% of the participants were male and remaining 44.8% were female.

About 47.6% of the participants who were infected from COVID-19 mentioned that they did not lose their appetite during illness. Nearly 20% of the participants said that they were not sad during the illness while approximately 58% said that they were sad or non-enthusiastic during the illness. Nearly 71.4% of the participants mentioned that they were more anxious during the illness. Approximately 41% said that it wasn't difficult to take initiative for something after recovering from COVID-19 infection. Most of the participant have some sort of frightened feeling when something awful happens.

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Table 1: Demographic Characteristics of the participants

Factors	Frequency	Percentage
Educational Level		
Illiterate	00	0%
Matric or less	02	1.9%
Intermediate or equivalent	20	19.0%
Graduation	58	55.2%
Post-graduation or above	25	23.8%
Father's Educational Level		
Illiterate	04	3.8%
Matric or less	15	14.3%
Intermediate or equivalent	14	13.3%
Graduation	43	41.0%
Post-graduation or above	29	27.6%
Mother's Educational Level		
Illiterate	09	8.6%
Matric or less	21	20.0%
Intermediate or equivalent	22	21.0%
Graduation	33	31.4%
Post-graduation or above	20	19.0%
Occupation		
Jobless/ housewife	20	19.0%
Student	22	21.0%
Private Job	28	26.7%
Government Job	22	21.0%
Businessman	10	9.5%
Daily wager	01	1.0%
Retired Pensioner	02	1.9%
Total	105	100%



Figure 1: Distribution of mental issues

Nearly 7% of the participants find it difficult to laugh and see funny side of the things. Approximately 41% of the participants sometimes feel cheerful after the illness. Nearly 90% of the participants enjoy tv program or book reading. Only 11% find seldom interest in enjoying book reading or TV. Most of the participants did not find any difference in taking interest and care of their appearance after the COVID-19 illness.



Figure 2: Distribution of various levels of different behaviors to overcome bad effects of disease

DISCUSSION

The mental and emotional health assessed in early 2020 in China reported that there was considerable increase in the number of cases reported of depression , negative feelings, insomnia and fear of death among both affected and non-affected people.¹⁰ This ill feeling and anxiousness was more pronounced among COVID recorved patients who went through isolation, feeling of infecting others and dejection.¹⁰

In a study conducted in China 53.8% of the people suffered from moderate to severe negative feelings related to COVID.¹⁰ In our present research 65.4% of the participants said that they suffer from worrying thoughts.

The perceived psychological stress among COVID infected people cannot be neglected. Social stigma, fear of infecting others, fear of death and illness pushed them into depression.¹¹ A study reported 23.2% as the prevalance of anxiety which was comparatively low to our findings.¹²

The prevalance of depression was nearly 40.1% among the people.¹³ The prevalence of tense feeling was found to be 65.7% which was comparatively very high. Another study reported the range of depression as 4% to 31%, stress disorder was 12% to 46.9% whereas it was 6.5% to 63% for anxiety¹⁴. The quality of life was seen up to 3 months post COVID. This was somewhat similar to our findings where the prevalance of anxiety was quite high. The common mental health issues faced by COVID recovered patients were depression, anxiety, pain and fatigue.¹⁴ In our study the common mental issues were restlessness and tense feelings, frightening feelings, worrying thoughts and panic attacks.

The pooled prevalence of depression was 22.8%. A study reported that depression due to COVID was more common among female¹³. Most research into psychological illness and distress indicates that women report higher rates of mental illness. Indeed, this is the case of the recent survey of the levels of depression in undergraduate students in Pakistan in response to coronavirus.¹⁵ The unusual finding from another study was that men have higher rates of anxiety and obsessions related to coronavirus possibly due to several factors.¹⁶ According to the researcher, in Pakistan, men are required to enter society more frequently and interact outside the home.¹⁶

Another possible clarification is that Pakistan is a developing nation, where diseases, such as dengue fever and malaria, are seasonal realities, where polio is still not eliminated, and where huge political confusion is historically recent.¹⁶ Conceivably, in such an environment, COVID-19 is just another change to adjust to or risk to manage as people go about their day-to-day lives. Pakistan is also a collectivistic society. In such societies, cases and reporting of mental illness is often lower, due to many factors. Perhaps, these rates of psychological distress are in fact higher than reported or expressed in a different way.¹⁶

CONCLUSION

More than 50% of the respondents are professional and have a source of income. Nearly two third participants have sad feeling. A high percentage of respondents have some level of anxiety. Most of the participants reported sudden and panic attacks after COVID. More than half of the participants said that they oftenly feel frightened, tense, restless and worrying thoughts cross over their minds. Many respondents said that they are trying to overcome these mental after effects of COVID. Most of them said that they try to laugh, see funny side of things and engage themselves in book reading or watching TV.

Recommendations: There is an instant need to detect the longterm mental well-being concerns of the COVID-19 Pandemic. Due to the negative effects of depression and fatigue on daily functioning, early detection and timely interventions should be provided to this neglected population.

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