THE IMPACT OF COVID-19 ON MENTAL HEALTH
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INTRODUCTION
Mental health refers to complete state of cognitive, behavioral and emotional wellbeing. It is also called good higher mental functioning. There are six areas in which sound mental health can be recognized. They are positive attitudes towards self, growth & development, autonomy, accurate perception of reality, environmental competence and positive interpersonal relationship. In January 2020 the World Health Organization (WHO) declared the outbreak of a new corona virus disease, COVID-19, to be a public health emergency of international concern. WHO stated that there is a high risk of COVID-19 spreading to all countries around the world. In March 2020, WHO made the assessment that COVID-19 can be characterized as a pandemic.¹

Now the world is on distress with COVID-19 pandemic which was never faced before. We can say it is a war between human being and virus. The United State and European countries are more sufferer than Asian countries though it was originated from China.² The morbidity and mortality is higher in United State and Europe than Asian countries may differ in virulence of the virus. Now the people of South Asian countries including Nepal are also fighting with COVID-19. So, this is the time for taking special precaution to prevent with COVID-19 at the same time we should not take negative thought mentally.

It is now clear that COVID-19 presents two major health problems. The first problem is the illness caused by the virus itself, which is usually self-limiting but can be fatal, especially in the vulnerable, the elderly and people with underlying health conditions. The second problem is the anxiety and panic that the virus triggers in the minds of virtually everyone who hears about it. Both problems present substantial challenges to psychiatry. For people infected with COVID-19, there can be feelings of guilt, anxiety and despair, compounded by the physical effects of infection (cough, fever, and hypoxia) and prolonged hospital stays. For the families of those affected, there can be feelings of guilt, remorse and loss. Following bereavement, grief is likely to be complex owing to limits on visiting the sick or dying in hospitals, uncertainties about the spread of infection and complication about the conduct of funerals. In this emotionally charged setting, psychological support is vital both at the time of death and into the future. The best strategy is to give people the time and space to rely on their informal networks to cope, but also ensure they know that the door is open to mental health services if they need them at any point, now or in the future.³

The causes of mental illness associated with COVID 19 are as follow:
1. Stress regarding transmission of virus.
2. Lockdown and job loss.
3. Fever followed by changes on neurotransmitter level.
4. Negative effect of social media like face book, you tube etc.
5. Financial difficulty and poverty.
6. Stress due to loss of family members.
7. Far from family members and difficulty to go different places.
8. The crisis to get food, shelter, clothes and medicine.

Recently, the United Nations has warned corona virus could cause a global mental health crisis. The U.N. report highlighted those vulnerable to mental distress, including children and young people, and healthcare workers who see patients dying from COVID-19. A mental illness crisis is looming as millions of people worldwide are surrounded by death and disease and forced into isolation, poverty and anxiety by the pandemic of COVID-19. United Nations health experts say. “The isolation, the fear, the uncertainty, the economic turmoil - they all cause or could cause psychological distress,” said Devora Kestel, director of the World Health Organization’s (WHO). For people infected with COVID-19, there can be feelings of guilt, anxiety and despair, compounded by the physical effects of infection (cough, fever, and hypoxia) and prolonged hospital stays.⁴ For the families of those affected, there can be feelings of guilt, remorse and loss. Following bereavement, grief is likely to be complex owing to limits on visiting the sick or dying in hospitals, uncertainties about the spread of infection and complications about the conduct of funerals. In this emotionally charged setting, psychological support is vital both at the time of death and into the future. The best strategy is to give people the time and space to rely on their informal networks to cope, but also ensure they know that the door is open to mental health services if they need them at any point, now or in the future.

The common psychiatric disorders associated with COVID-19 are:
1. Anxiety disorder which is characterized with fearfulness, palpitation, fear of dying, fear with going something wrong etc.
2. Depressive disorder which is characterized by sadness,
negative thought, decreased confidence, suicidal thought, decreased sleep at least 2 weeks.
3. Sleep disorder which is characterized by difficulty falling asleep, frequent wake up in the night, fearful dream etc.
4. Post traumatic stress disorder which is characterized by exposure to life threatening event, fearfulness, hyper arousal, flashbacks, avoidance, irritability, insomnia etc.
5. Somatic symptoms disorder which is characterized by headache, tingling sensation, feel something in throat, hypochondrial features etc.
6. Psychosis which is characterized by abnormal behavior, suspiciousness, hearing voices, disturbed sleep.
7. Alcohol and other psychoactive substance misuse to cope with stress by COVID-19 etc.

How can we be mentally healthy?

1. Always think positively.
2. Don’t believe traditional false things like witch, ghost, etc.
3. Try to be happy as possible, don’t forget to do hard work.
4. Take as a good way for your friend’s success.
5. Don’t misuse alcohol or drugs.
6. Do healthy competition on your daily life.
7. Don’t be too moral and don’t expect it from other also.
8. Express your problems to other (ventilations).

Finally, one of the challenges with providing psychiatric care during the pandemic is the high risk of infection among psychiatrists and other health workers. Careful awareness of risk and judicious rostering work can help reduce this risk. For psychiatrists, the solidarity with our patients, solidarity with their families, solidarity with our multidisciplinary colleagues and, perhaps most of all, solidarity with each other. We need each other now. COVID-19 is the greatest public health challenge that most of us have ever encountered and, hopefully, it will be the worst that we ever encounter in the future. How psychiatry responds to this situation will play a large part in defining the nature and role of psychiatry in the years to come.

REFERENCES: