

EVALUATION OF THE OCCURRENCE OF DEPRESSION AND ANXIETY IN PATIENTS HOSPITALIZED BY COVID-19 AT HOSPITAL SÃO FRANCISCO DE ASSIS

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Abstract: Introduction: Corona Virus Disease 2019, called coronavirus 19 (COVID-19) started in December 2019 in Wuhan, China. In addition to the medical risk, the pandemic is having huge impacts on individuals' mental health. Higher levels of stress, anxiety and depression are predicted following the stay-at-home order, as confinement can tend to produce or exacerbate such psychological problems. Individuals with chronic illnesses are also expected to have higher levels of psychological symptoms since COVID-19 tends to present more severely in individuals with multiple comorbidities. As for age group, older adults are expected to be psychologically more vulnerable to the pandemic. **Objetctive:** is to investigate the psychological impact of COVID-19 on patients who were hospitalized at the Hospital Universitário São Francisco de Assis (HUSF), in order to develop strategies for clinical intervention in the mental health of this population before it gets worse months after hospitalization for COVID-19, correlating with the patients' comorbidities and their risk factors, age and severity of hospitalization. **Methodology:** Interview by telephone contact with application of Anxiety scales, Hamilton Scale and Depression, Patient Health Questionnaire-9 (PHQ-9), after 6 to 8 months of hospitalization, which occurred between March 2020 and January 2022. **Results:** Regarding depression: 16% had mild depression, 28% had moderate depression, 21% had moderately severe depression and 9% had severe depression, with 6 suicide attempts. Regarding anxiety: 8% had mild pathological anxiety, 38% had moderate pathological anxiety and 17% had severe pathological anxiety. **Conclusion:** It is evident the need for psychological and psychiatric evaluation of patients after hospitalization for COVID-19 in the shortest possible time, in order to diagnose some

degree of psychological dysfunction and initiate their respective treatment for a better prognosis.

Keywords: Covid-19; mental health; depression; anxiety; psychiatry; pandemic.

INTRODUCTION

The Corona Virus Disease 2019, called coronavirus 19 (COVID-19) started in December 2019 in Wuhan, Hubei province, China. (CHEN; LIANG; LI; GUO; FEI; WANG, 2020). That perpetuated throughout the Chinese territory in early 2020, rapidly increasing its incidence and mortality. This scenario generated many problems, such as the stress, anxiety and depression, both in the medical team and in the general population. (LIU; YANG; ZHANG; XIANG; HU, 2020). In addition to the medical risk, the pandemic has brought enormous psychological and social impacts. Several lines of research have previously focused on understanding how societies define the origin and impact of epidemics and how they deal with these, with emotional coping as a key to the process. (IDOIAGA; DE MONTES; VALENCIA, 2017). In an unprecedented situation, it is difficult to accurately predict, therefore, estimate the psychological consequences of COVID-19. Studies from China, the first country affected, indicate that fear of the unknown and uncertainty of the future can lead to the development of mental disorders, such as the stress, anxiety, depression, somatization, and adverse behaviors, such as increased consumption of alcohol and tobacco. (SHIGEMURA; URSANO; MORGANSTEIN; KUROSAWA; BENEDEK, 2020). Fear, uncertainty and stigmatization are common in any biological disaster and therefore the implementation of adequate clinical and mental health interventions is essential. (XIANG; YANG; ZHANG; CHEUNG, 2020). It is equally

important to know the real psychological state of the groups potentially targeted by such interventions, since each group may perceive risk differently. (GIL; GONZÁLEZ; MENESES, 2010).

In short, in an international public health emergency such as that of COVID-19, it is important to investigate the psychological impact of the pandemic on populations, in order to develop strategies for reducing symptoms during the crisis. (WANG; PAN; WAN; TAN; XU; HO, 2020). Higher levels of anxiety and depression are predicted following the stay-at-home order (BROOKS; WEBSTER; SMITH; WESSELY; GREENBERG, 2020) since confinement may tend to produce or exacerbate such psychological problems. (CAVA; FAY; BEANLANDS; MCCAY; WIGNALL, 2005). Furthermore, the fear of individuals infected by the disease of its possible and uncertain consequences tends to increase psychic illnesses. It is also expected that individuals with chronic illnesses have higher levels of psychological symptoms (APPLEGATE; OUSLANDER, 2020), since COVID-19 tends to be more severe in people with multiple comorbidities. (DONG; LI; BAI; LIU; ZHOU; GAO, 2020).

OBJECTIVES

The objective of this Scientific Initiation was to investigate Depression and Anxiety in patients who were hospitalized due to the COVID-19 disease, at the Hospital Universitário São Francisco de Assis (HUSF). Furthermore, the objective was to correlate such psychiatric illnesses with age, gender and severity of hospitalization, as well as to classify the severity through proportions of patients with Anxiety and Depression. From the collected data, the intention of the project was to develop strategies for the clinical intervention of the mental health of

this population, before these mental illnesses get worse over the months of hospitalization.

METHODS

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The analysis of the collected data was carried out through the application of Anxiety scales, using the Hamilton Scale (Appendix 1); and Depression, by the Patient Health Questionnaire-9 (Appendix 1), after 6 to 8 months of hospitalization, which occurred between March 2020 and January 2022. For the purpose of comparisons, the T Test of unpaired samples or Chi Tests-square for continuous and categorical data. After tabulating the data, the analysis of the results obtained ($p \leq 0.05$) for rejection of the null hypothesis, through the following models were: descriptive statistics; measures of central tendency; normality test; analysis of variance. All analyzes were performed using SPSS software (Statistical Package for the Social Science) for Windows version 20. Values lower than 5% ($p < 0.05$) were considered statistically significant.

RESULTS AND DISCUSSIONS

A total of 120 hospitalized patients with a mean age of 48.5 years, ± 13.8 , were analyzed. 54 men were analyzed, with a mean age of 48.4 years old, ± 14.4 . Sixty-six women, aged 51.09 years, ± 14.05 , were analyzed. P values: mean age (men versus women) $P=0.567$; hospitalized days (men versus women) $P=0.291$. There was no statistical difference between days of hospitalization, sex and age. The average number of hospitalization days was $18.7; \pm 12.9$. The prevalence of depression (70%) was higher than that of anxiety (63%). Thus, 37% did not have anxiety, 8% had mild pathological anxiety, 38% had moderate pathological anxiety and 17% had severe pathological anxiety. Regarding depression, 26% of patients did not have depression,

16% had mild depression, 28% had moderate depression, 21% had moderately severe depression and 9% had severe depression, with 6 suicide attempts.

CONCLUSION

It is evident the need for psychological and psychiatric evaluation of patients after hospitalization for COVID-19 in the shortest possible time, in order to diagnose some degree of psychological dysfunction and initiate their respective treatment for a better prognosis. In addition, such an assessment is important so that patients do not develop any future disorders, preventing worse outcomes and ensuring their quality of life after the moments they have experienced.

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