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Short Communication

# Covid-19 and Mental Health of Health Professionals in India

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Uncertainty generates anxiety and the advent of Covid-19 has taken uncertainty to another level for the human race. This disease caused by the SARS-CoV-2 virus was identified as a public health emergency by the World Health Organization and declared a pandemic on 11<sup>th</sup> March 2020 [1]. History has been re-written since then, with up to two-thirds of the world's population under 'lock-down' and an exorbitant economical crisis, contracting the world's GDP and causing unemployment world-wide. The entire healthcare sector has been shaken with the increasing number of infected people and a major proportion losing their lives to the same. Not only general population, but doctors and healthcare professionals in particular have succumbed to this grave adversity.

Till date, more than 3.5 lac people in the world have died from Covid-19. With a huge population of 138 crores, India has faced the daunting task of controlling community spread of the virus and saving lives. The total number of cases in India in September 2020 has reached the mark of above 47 lacs, with nearly 70000 deaths and 31 lacs in recovery. As per the Indian Medical Association, more than 87,000 healthcare workers have been infected with Covid-19, and about 600 have died due to the infection so far and the numbers are only rising [2].

A doctor on Covid-19 duty is faced with a plethora of questions: will I survive or not, how I will take care of my kids if I am quarantined, what will happen to my old parents, what if I am a carrier of Covid-19 and spread it to my loved ones? As frontline healthcare workers, these 'corona warriors' remain the most vulnerable to this infection. Moreover, the unpredictable nature of the virus, high transmissibility, limited resources and fear of recession which is also causing frequent changes in policies, making it difficult to sustain the fight against Covid-19.

We may think that doctors are used to long duty shifts, to death, pain and blood; but statistics show that physicians are twice more likely to die by suicide than general public [3]. Burnout or depression amongst doctors is very common and remains largely unaddressed. Doctors and nurses are not immune to the physical and psychological consequences of Covid-19. Excessive work hours, inadequate PPE (personal protective equipment) kits, shortage of testing kits, political pressures, handling expectations and hopes Received: September 26, 2020Published: October 22, 2020© All rights are reserved by Murkey., et al.

of patients and relatives, rising infection rates among other medical staff and media inputs have added to the tremendous stress at work among healthcare personnel. There are simultaneous challenges at home like taking care of family, kids, old parents and daily household chores, too. When combined, it can lead to a major burden which cannot be shared with anyone else. This leads to frustration, helplessness, adjustment issues, stigma and fear of discrimination amongst the medical staff [4].

Not only do healthcare workers suffer the anxiety of caring for the sick with changing medical protocols, but they also have to maintain a calm demeanor with their partners and children. For so many reasons, doctors across the world are forced to make difficult decisions; like choosing a patient over another for ventilator access, unintended ICU admissions or prioritizing VIP patients over genuine cases and unethical intrusions from authorities leave a long lasting psychological impact. Lack of crucial information and public panic, along with gossip and social rejection or denial of essential services and physical assault, further have a compounding effect on the mental burden of doctors. When a doctor him/herself admits to undergoing treatment for a mental health condition, patients often end up not trusting them to treat their condition. Thus, our attitudes towards mental illness worsen the psychological distress in medical professionals.

In many cases, it has been the hospital staff members who have performed the last rites of the patients because the family was in quarantine or was also admitted in the hospital. Doctors and nurses have been the last persons to witness the patient's last few moments of life, reflecting deeply emotional experiences. Social ostracization of doctors in the form of not allowing doctors and nurses to stay in their homes or to use the common elevator has also been stressful [3].

Studies conducted in an attempt to gauge the magnitude and nature of this problem, report nearly 35% of prevalence of depressive symptoms and 33% of anxiety symptoms in doctors in India, wherein high risk duties such as in fever clinic or Covid-19 isolation wards, was identified as a key factor for higher psychiatric morbidity [5].

People across the world have applauded healthcare workers for putting their lives in line to save others. Social media posts have time and again displayed people's gratitude towards them. While these gestures can boost one's morale, it is crucial to understand that appreciation alone is not going to be protective against mental anguish. Processing of stressful experiences is going to take time before they can heal [6].

The Covid-19 era has seen a surge in telemedicine platforms and the calls for help received by them. Some e-platforms have reported over a 180% increase in consultations. The Government of India has issued guidelines for management of mental health problems in primary and specialized health settings. Several nonprofit organizations, private hospitals and universities have set up webinars, helpline numbers and e-counselling portals for the same [7]. Tele-therapy, virtual mental health services, and meditation apps have started to make inroads after the central government imposed the nationwide lockdown, and these need to be extended to reach healthcare workers too.

In order to maintain the emotional well-being of healthcare professionals, the India Research Centre at Harvard School of Public Health has advocated practice of mindfulness meditation, relaxation and breathing exercises, mindful use of social media and practice of empathy without stigmatizing those affected [8]. It has also emphasizes the need for promoting social wellbeing of individuals while responding to Covid-19 crisis, by being a force of positive change, volunteering to help others, staying virtually connected with loved ones, reducing screen time, talking to children about their emotions and being kind and sensitive to the needs of others [9]. Accepting the stress can be a good start. Even though unwelcome, the pandemic is our current reality and so are its consequent apprehensions. If doctors accept the challenges, validate the impact on their own health, prioritize self-care and seek out support from colleagues and family members, they can safeguard themselves and continue to be resourceful for the society [4].

As the pandemic continues, ensuring the safety and protection of medical professionals needs to be an integral part of the public health measures for addressing the outbreak. Specialized interventions aimed at promoting wellbeing of doctors and nurses are need of the hour [10]. This crisis is a wake-up call for us, to ensure occupational safety of healthcare workers as well as increase the preparedness for a more resilient post-Covid India.

### **Author Contribution**

All the authors have contributed equally to the concept, design and drafting of this manuscript.

#### **Conflict of Interest**

None.

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