

Mental Health Disorders in Critical Care Clinicians



During the COVID-19 pandemic, working in the ICU has been significantly challenging for healthcare workers and has been associated with high levels of mental health disorders. Primary sources of stress include physical and mental exhaustion, shortages of resources, communication challenges, social isolation, unusually high number of deaths, sadness and grief, distress of families unable to see their loved ones, fear of getting infected and for some, residual symptoms after having contracted the virus.

Risk factors for mental health disorders are particularly high for ICU healthcare providers. Already, the rate of burnout among ICU workers is high, and now, with the pandemic and multiple surges, healthcare providers face additional anxiety and stress. There is also a significantly high element of fear - fear of contracting the virus, fear of dying, and fear of infecting loved ones. All these factors contribute to the psychological burden among ICU healthcare workers.

A study was conducted to evaluate the mental health symptoms in healthcare providers facing COVID-19. Sixteen ICUs in France during the second wave were included in the analysis. Participants completed the Hospital Anxiety and Depression Scale (HADS), the Impact of Event Scale-Revised (IES-R, for post-traumatic stress disorder), and the Maslach Burnout Inventory (MBI). The study objective was to determine the prevalence of and risk factors for anxiety, depression, PTSD and severe burnout among ICU healthcare providers.

A total of 1203 respondents were included, out of which 66% was nursing staff, 32% was medical staff, and 2% were other healthcare professionals. 57.6% of the respondents had managed more than ten new COVID-19 patients in the previous week. Results show that 37.9% of healthcare workers suffered from insomnia, and 7.7% were taking a psychotropic drug daily. 60% of the respondents reported symptoms of anxiety, depression, post-traumatic stress disorder and burnout.

These findings clearly show the prevalence of mental health disorders among ICU healthcare workers during the second wave of COVID-19. It is important for hospital managers to provide psychological support and peer-support groups to their workers as well as establish a communication structure that is geared towards ensuring the wellbeing of healthcare providers. It is also important to acknowledge that mental distress among healthcare workers is not a weakness but an occupational hazard. Proper leadership is a must to support healthcare workers during such a crisis

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