

COVID-19 Specific Management of a Depressed Male: A Case Report

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Abstract

In the rapid and progressive world with fast moving regularities, COVID-19 emerged by comprehending worse effects bringing a sudden pause in every aspect globally. Devastating consequence of this pandemic has not only been inclined towards pathophysiology, but the negative impact holds a cruel role on mental health. The regular increased number of deaths confirmed, and suspected cases created enormous anxiety among normal people. This article reports a case of male, 68 years of age worrying repeatedly to have contracted COVID-19 with other symptoms. COVID 19 specific management was done followed by detailed assessment through telecommunication channel. Brief psychosocial management effectively could bring relief from anxiety and led ultimately to a steady lifestyle.

Keywords: Depressed male; COVID-19; Psychosocial management

Introduction

Human beings have exposed to disease outbreak and pandemic history worldwide. Considering all other consequences, mental health has been significantly affected by all epidemics and pandemics that have happened in the past. In the recent period, the most upsetting rise of Coronavirus infectious disease caused by transmission through droplets of saliva and discharge has taken the lives of a massive number of people. Like other natural disasters reported in the past causing huge negative impact on livelihood, numerous psychological impacts caused by COVID-19 made no difference all around the globe affecting each and every sphere of lifestyle. According to World Health Organization, 2021 confirmed cases of COVID-19 latest reported for India is 110384747. Though reports of recovery have been well identified in every state but the global death reports startled concern among common people. Most accepted preventive measures of COVID-19 emphasized on physical, social distancing with isolation preceded by disrupting regular activities with insecurity, financial instability threatened mental and physical well-being. Due to overwhelming fear and anxiety around the globe brought concern among certain groups like older aged population, health care professionals, females and children. Emphasizing mostly on mental health issues, several experiments and researches conducted in every corner of the world reported a positive association between COVID-19 with depression, anxiety related symptoms, sleeplessness, aggressive behaviours, fear, stress [1]. It is not only about the increase in prevalence of mental health disorders like stress, depression and anxiety but the risk of suicide has also been increased due to the COVID-19 pandemic [2-5].

In this report, a case has been presented of a male, aged 68 years, having repeated thoughts of contracting COVID-19, checking repeated news on COVID-19, low interest in activities, uncertainty towards the future, suicidal thoughts and indulging more into traditional techniques of COVID-19. Specific management was done and gradual symptom reduction was observed.

Case Presentation

Single subject design was used to identify the symptoms using a qualitative approach. The present psychosocial case was aimed to analyse the subjective emotion with using COVID-19 specific telecommunication management.

The present client was a 68-year-old male, retired Hindu coming from middle socioeconomic status belonging to a nuclear family located in Bangalore.

Sources of information

For information, the client, his wife and son-in-law were interviewed thoroughly and past prescriptions were reviewed by the case worker.

Brief clinical history

The client was apparently well before August, 2020 but the outbreak of COVID-19 disease made him very upset. Due to the enormous negative impact of COVID-19, the Government of India declared lockdown on 23rd March, 2020 all over India which acted as a preventive strategy. As a result, some precautionary measures like isolation, social disconnection, repeated hygiene maintenance and awareness were the primary lifestyle skills for normal people. Under these circumstances, the index client started having excessive worries for his primary family members who were placed outside for their professional conduct. Since April onward, he started checking news on social media repeatedly on COVID-19 death cases and called his family members repeatedly again. In April, one of his extended family members reported to have contracted COVID-19 which made him terrified. Apparently, he stopped going outside home for fulfilling basic requirements and there was a sharp decline in the maintenance of regular activities like morning walk, shopping, visiting his age group friends. He was very worried about academics for his grandchildren due to the online mode of studies which hampered the overall quality of their academics as reported by the client. In September, 2020 another COVID-19 detected case reported by one of his close friends made him so anxious. His fear of contracting COVID-19 got increased. He started taking regular home remedies, warm water, hot bath and

sprayed alcohol all over the body. His thoughts of uncertainty towards future and ultimately death related thoughts were his primary concern. From September onwards, his sleep got reduced, had chronic chest pain at times for a while, breathing problem, and had recurrent thoughts of contracting COVID-19 and transmitting the virus. He had done diagnostic test of COVID-19. Though the report showed negative result, lack of interest in activities, helpless feelings, and loneliness with suicidal thoughts were persistent in him due to the fear of COVID-19. Then his wife ultimately consulted with a psychiatrist and the concerned psychiatrist referred him to a psychotherapist for therapy. Telephonic therapy started with a psychiatric social worker on 25.10.2020 (Figure 1).

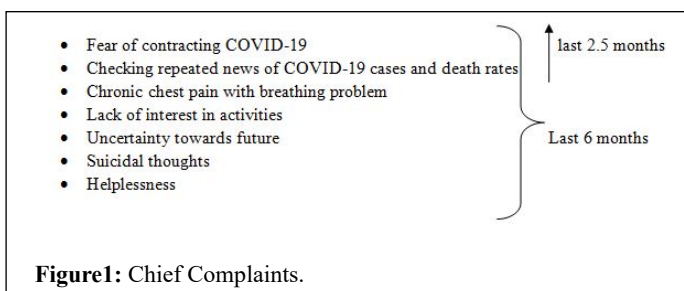


Figure1: Chief Complaints.

Psychosocial intervention

The psychosocial management of this present case comprises of establishment of therapeutic alliance, psychoeducation, activities of daily living and brief COVID-19 specific management.

Family dynamics

According to the informants, clear boundary with open communication style has been sustained in the family. The index client maintains cordial relationship with his wife and they have adequate spousal sub system. Due to professional growth, offspring stays away from home but they all keep connection with client and his wife. They have adequate reinforcement style and also maintain cohesiveness within the family. Apart from maintaining positive family environment, they all give values to family rituals as they by performing regular worships, customs and systems. A study during COVID-19 lockdown identifying the relationship between mental wellbeing with relationship quality reported a positive association. Positive mental health has been significantly connected with good relationship [6,7]. During lockdown, free flowing movement was restrictions led to grow loneliness for the aforesaid client. Supporting this phenomenon, several previous studies demonstrated strong positive relationship between mental health distress with quarantine period [8,9].

Test administered

Both Beck Depressive Inventory and Fear of COVID - 19 scale were administered on the client.

Results and Discussion

The scores of BDI and Fear of COVID-19 were 30 and 33 respectively which represented severe level depression and high fear of COVID-19.

Psychosocial management

Therapeutic alliance: As the medium of the psychosocial intervention was telecommunication, the therapist discussed some pros and cons of telehealth by giving some clear explanation on expectation from the treatment. Though the client was primarily willing to get treatment by taking prior appointment and completed all necessary requirements. To build up therapeutic alliance, background noise and background movements were controlled. Adequate time was given to make him comfortable. Directly looking at camera and using some reflective statements played as key strategies to maintain eye contact and establish therapeutic alliance respectively [10]. Although there has been much concern of telehealth treatment but considering the current problematic scenario, interest towards telehealth measures have continuously been raising by older population [11].

Psychoeducation and informative counselling: Vivid information related to depression and its symptoms were explained. He was given proper knowledge on how critical events are being responsible for triggering some chronic emotional disturbances. The probable course, prognosis, treatment method of depression was discussed. He was also given clear overview of COVID-19 scenario with authentic precautionary measurements and probable transmitting methods. Additionally, some myths regarding COVID-19 virus were clarified like eating turmeric, lemon could prevent the disease and no evidences have been found with warm water or hot bath as protective measurements. The therapist clarified and assured the client that maintaining two meters of distance from the infected patient, wearing mask, avoiding contaminated things, washing hands could prevent to get infected [12].

Activities of daily living and COVID-19 specific management: To get relief from pessimistic thoughts and irritable mind, involvement into activities played an effective role. The client was guided to perform regular activities like going for walk at terrace, keeping frequent contact with relatives and children, regular exercising, going to sleep at a specific time, taking regular meal and other consistent activities. Information from valid and authentic sources, minimized frequency of news once or twice in a day were prioritized by the therapist. Moreover, he was assisted to keep record on his suicidal thoughts and given some helpline numbers to get support. He was encouraged to maintain his protective measurements and also supportive strategies to others as the receivers and helpers both might get advantages during crisis period. The case worker helped the client to enhance positivity by using metaphors where hopeful stories with positive image of those who had recovered from COVID-19 were emphasized [13]. Regular follow ups with psychiatrist, sleep hygiene maintenance with treatment adherence were prioritized by the case worker.

Overall improvement: Though the negative pandemic consequences have not yet diminished and all pessimistic thoughts of client was not absolutely removed but regular pharmacological treatment and psychosocial intervention could bring relief and improved his daily functioning.

Conclusion

Different corners of globe have negatively affected by the outbreak of COVID-19 disease. Most importantly rapid rate of transmission of virus with uncertain treatment measured has impacted the majority of the population which ultimately increased psychosocial burden. The aforesaid case report is an attempt to represent the distress of a retired

aged person during COVID-19 pandemic. Effective and well validated psychosocial measurement played a major role to enhance his mental wellbeing.

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