

It is illegal to post this copyrighted PDF on any website.

Does a Mental Health Diagnosis Worsen Outcomes From COVID-19?

Ramu Vadukapuram, MD^{a,*}; Chintan Trivedi, MD, MPH^b; and Zeeshan Mansuri, MD, MPH^c

The coronavirus disease 2019 (COVID-19) pandemic is having a serious impact on our lives. Many of us are confronted with challenges that can be stressful and overwhelming, eliciting strong emotions in all age groups. Preventive measures, such as social distancing, are needed to slow the spread of COVID-19, but these measures make us feel isolated and lonely and increase levels of stress and anxiety. Learning to deal with stress in a healthy way would benefit everyone.¹ Stress can lead to several consequences such as feelings of fear, difficulty concentrating and making decisions, worsening of mental health conditions, difficulty sleeping or nightmares, and increased use of tobacco, alcohol, and other substances.² Infection susceptibility was found to be genetically linked to the diagnosis of mental disorders.³ People who have preexisting psychiatric, neurologic, or substance abuse disorders are also more vulnerable to COVID-19 infection, and they are at a higher risk of severe outcomes, including death.^{4–6} According to a survey conducted June–August 2020 among 130 countries across the 6 regions of the World Health Organization,⁷ over 60% of respondents reported disruptions in mental health services for vulnerable individuals, including children and adolescents (72%) and older adults (70%), and about 30% reported interruptions to access for medications for psychiatric, neurologic, and substance use disorders. In a case-control study⁴ conducted using de-identified population-level electronic health records data, people with a recent diagnosis of a psychiatric disorder were at greater risk of COVID-19 infection. This risk was exacerbated among African Americans and women, who also had a

higher occurrence of negative infection outcomes.⁴ In a retrospective cohort study,⁵ the risk of mortality was studied in patients with schizophrenia spectrum disorders, mood disorders, and anxiety disorders. This study⁵ found that patients with a schizophrenia spectrum disorder diagnosis had a higher risk of death, but those with mood and anxiety disorders did not. The study findings⁵ imply that schizophrenia spectrum disorders may be a risk factor for mortality in COVID-19 patients. In a retrospective cohort study⁶ conducted using electronic health records between February 15 and May 24, 2020, individuals hospitalized with a history of psychiatric comorbidities including mood disorders such as major depressive disorder and bipolar disorder were found to be at increased risk of COVID-19 morbidity and mortality and had a higher likelihood of needing post-acute care.

After reviewing the existing literature, we have observed worse COVID-19 outcomes in individuals with psychiatric disorders. Therefore, it is crucial to identify patients who may be more susceptible to COVID-19 infection and most at risk for adverse outcomes. Such identification is critical for clinical decision-making, including the need for enhanced monitoring and targeted interventions.

Received: September 23, 2021.

Published online: January 20, 2022.

Potential conflicts of interest: None.

Funding/support: None.

REFERENCES

1. COVID-19 and Your Health. Centers for Disease Control and Prevention. CDC website. Accessed December 13, 2021. <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>
2. Stress. Mental Health Foundation. MHF website. Accessed December 13, 2021. <https://www.mentalhealth.org.uk/a-to-z/s/stress>
3. Nudel R, Wang Y, Appadurai V, et al. A large-scale genomic investigation of susceptibility to infection and its association with mental disorders in the Danish population. *Transl Psychiatry*. 2019;9(1):283.
4. Wang Q, Xu R, Volkow ND. Increased risk of COVID-19 infection and mortality in people with mental disorders: analysis from electronic health records in the United States. *World Psychiatry*. 2021;20(1):124–130.
5. Nemani K, Li C, Olsson M, et al. Association of psychiatric disorders with mortality among patients with COVID-19. *JAMA Psychiatry*. 2021;78(4):380–386.
6. Castro VM, Gunning FM, McCoy TH, et al. Mood disorders and outcomes of COVID-19 hospitalizations. *Am J Psychiatry*. 2021;178(6):541–547.
7. COVID-19 Disrupting Mental Health Services in Most Countries, WHO Survey. WHO website. Accessed December 13, 2021. <https://www.who.int/news/item/05-10-2020-covid-19-disrupting-mental-health-services-in-most-countries-who-survey>

^aDepartment of Psychiatry, Icahn School of Medicine at Mount Sinai, New York, New York

^bTexas Tech University Health Sciences Center at Permian Basin, Midland, Texas

^cBoston Children's Hospital/Harvard Medical School, Boston, Massachusetts

*Corresponding author: Ramu Vadukapuram, MD, Department of Psychiatry, Icahn School of Medicine at Mount Sinai, 1 Gustave L. Levy Place, New York, NY 10029 (vadukapuram@gmail.com).

Prim Care Companion CNS Disord 2022;24(1):21com03152

To cite: Vadukapuram R, Trivedi C, Mansuri Z. Does a mental health diagnosis worsen outcomes from COVID-19? *Prim Care Companion CNS Disord*. 2022;24(1):21com03152.

To share: <https://doi.org/10.4088/PCC.21com03152>

© Copyright 2022 Physicians Postgraduate Press, Inc.