The Prevalence of Depressive and Anxiety Symptoms Among Healthcare Workers of East Avenue Medical Center (EAMC) During the COVID-19 Pandemic

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COVID-19, the infectious disease caused by the most recently discovered corona virus SARS-CoV-2 (Severe Acute Respiratory Syndrome Corona Virus 2), has already reached pandemic scale worldwide. In any epidemic, it is common for individuals to feel stressed and worried, more especially for healthcare workers (HCWs), who may have direct contact with infected patients. In cross-sectional studies performed in China in Italy in 2020, several psychologic symptoms have been observed to be prevalent, some of which are anxiety, depression, insomnia, and traumatic distress. In this cross-sectional study of 390 health care workers, we use two brief mental health screening tools to identify employees with clinically significant psychologic distress. Patient Health Questionnaire-9 (PHQ-9) is a validated screening tool for depression based directly on the diagnostic criteria for Major Depressive Disorder, while Generalized Anxiety Disorder Scale-7 (GAD-7) is a validated screening tool for anxiety. For our sample population, 31.8% did not have depressive symptoms, 35.6% had mild, 21% moderate, 9.7% moderately severe and 1.8% had severe depressive symptoms. While for anxiety, 57.69% had no to minimal symptoms, 26.92% mild, 9.74% moderate and 5.64% had severe anxiety symptoms. Factors such as marital status, educational attainment, occupation and employment status also appear to have correlation with the development of depressive and anxiety symptoms. Included among the perceived stressors during the COVID-19 pandemic are long working hours, insufficient income, inconsistent administrative policies, exposure to Covid-19 positive patients and co-workers, inadequate time off from work and increasing number of patients but without commensurate additional work force. It is therefore concluded that the Covid-19 pandemic indeed caused significant psychologic symptoms among health care workers. Measures to increase work force should be put in place to decrease work burden and employee fatigue. Providing adequate protective equipment can decrease anxiety by decreasing the probability of contracting the infection.

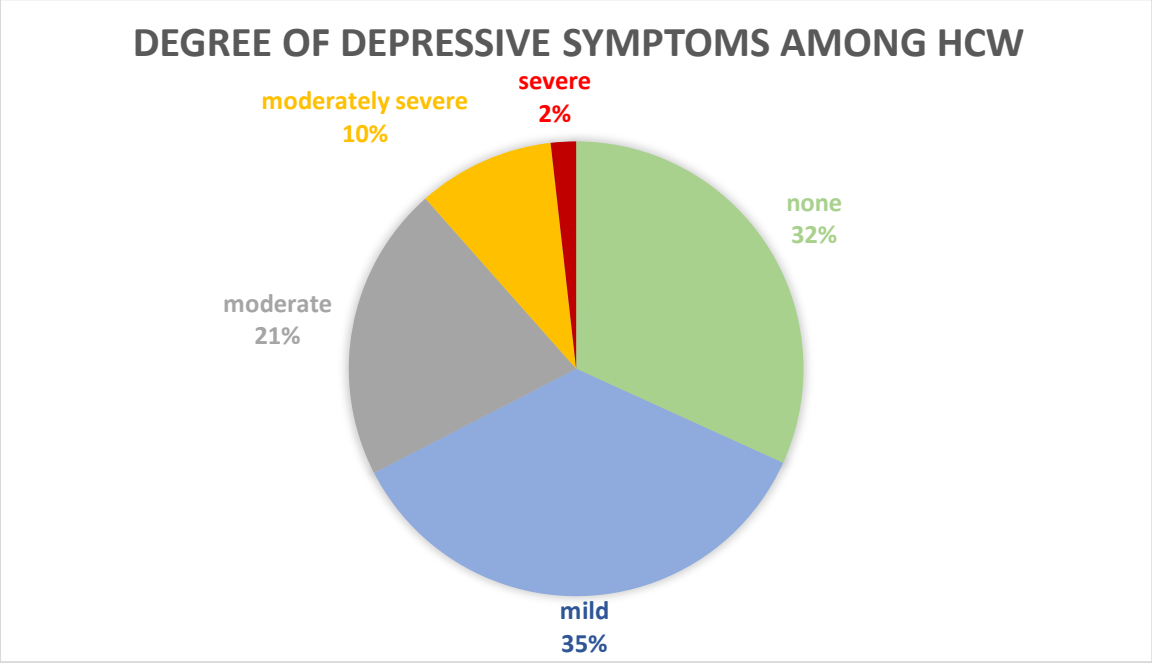


Figure 1: Degree of Depressive Symptoms among EAMC Health Care Workers

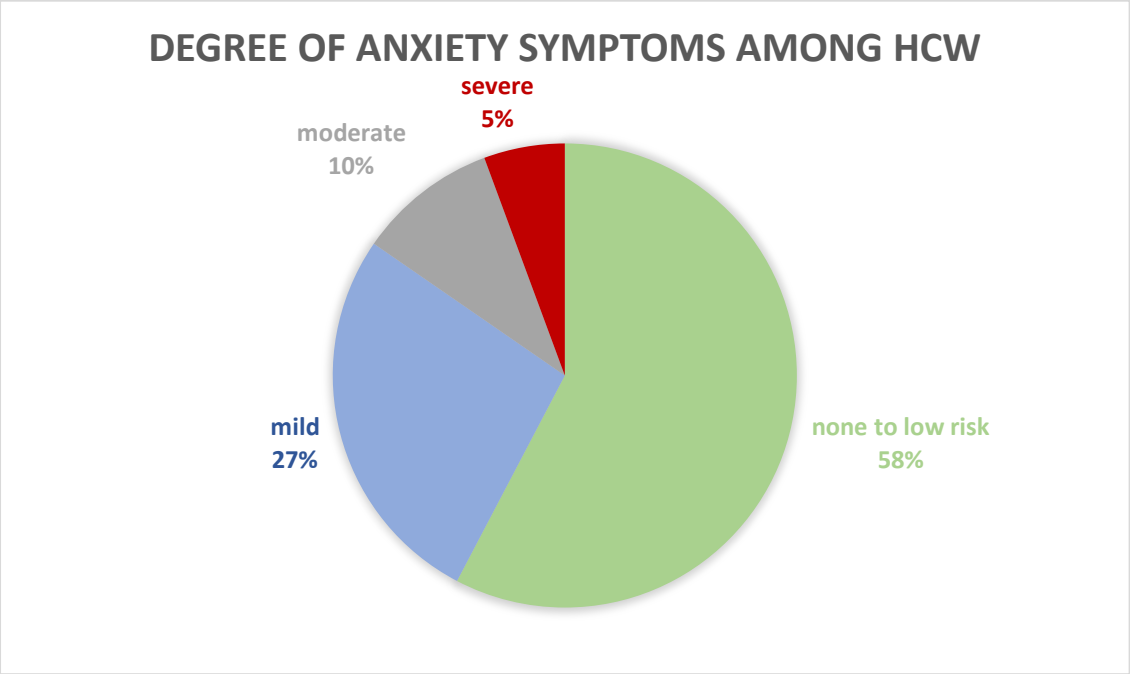


Figure 2: Degree of Anxiety Symptoms among EAMC Health Care Workers

REFERENCES:

1. https://www.who.int/emergencies/diseases/novel-coronavirus-2019
2. Lai, J et al. Factors Associated with Mental Health Outcomes Among Health Care Workers Exposed to Coronavirus Disease 2019. March 2020
3. Rossi, R et al. Mental Health Outcomes Among Frontline and Second-line Health Care Workers During the Coronavirus Disease 2019 (COVID-19) Pandemic in Italy. May 2020
4. https://aims.uw.edu/resource-library/phq-9-depression-scale
5. Spitzer RL et al. A Brief Measure for Assessing Generalized Anxiety Disorder: The GAD-7. Arch Intern Med. 2006;166(10):1092–1097.



Dr. Maria Yña Eluisia T. Pereyra-Borlongan is a medical doctor currently specializing in Internal Medicine. She also is a certified consultant in Occupational Medicine, practicing as an occupational health physician for some construction and chemical companies. She has interest in the behavioral sciences since she has observed increasing mental health issues in their institution since the Covid-19 pandemic started. She hopes to develop policies which can improve workplace environment and further decrease employee fatigue and psychologic symptoms in her institutions.

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