

COVID-19 survivors face increased mental health risks up to a year later

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As the COVID-19 pandemic stretches into its third year, countless people have experienced varying degrees of uncertainty, isolation and mental health challenges.

However, those who have had COVID-19 have a significantly higher chance of experiencing [mental health problems](#), according to researchers

at Washington University School of Medicine in St. Louis and the Veterans Affairs St. Louis Health Care System. Such [disorders](#) include anxiety, depression, and suicide ideation, as well as [opioid use disorder](#), illicit drug and alcohol use disorders, and disturbances in sleep and cognition.

In a large, comprehensive study of mental health outcomes in people with SARS-CoV-2 infections, researchers found that such disorders arose within a year after recovery from the virus in people who had serious as well as mild infections.

Overall, the study found that people who had COVID-19 were 60% more likely to suffer from mental health problems than those who were not infected, leading to an increased use of prescription medication to treat such problems and increased risks of substance use disorders including opioids and nonopioids such as alcohol and illicit drugs.

The findings are published Feb. 16 in the journal *The BMJ*.

"We know from previous studies and [personal experiences](#) that the immense challenges of the past two years of the pandemic have had a profound effect on our collective mental health," said senior author Ziyad Al-Aly, MD, a clinical epidemiologist at Washington University. "But while we've all suffered during the pandemic, people who have had COVID-19 fare far worse mentally. We need to acknowledge this reality and address these conditions now before they balloon into a much larger mental health crisis."

More than 403 million people globally and 77 million in the U.S. have been infected with the virus since the pandemic started.

"To put this in perspective, COVID-19 infections likely have contributed to more than 14.8 million new cases of mental health disorders

worldwide and 2.8 million in the U.S.," Al-Aly said, referring to data from the study. "Our calculations do not account for the untold number of people, likely in the millions, who suffer in silence due to mental health stigma or a lack of resources or support. Further, we expect the problem to grow because cases seem to be increasing over time. Frankly, the scope of this mental health crisis is jarring, frightful and sad.

"Our goal was to provide a comprehensive analysis that will help improve our understanding of the long-term risk of mental health disorders in people with COVID-19 and guide their post-infection health care," added Al-Aly, who treats patients within the VA St. Louis Health Care System. "To date, studies on COVID-19 and mental health have been limited by a maximum of six months of follow-up data and by a narrow selection of mental health outcomes—for example, examining depression and anxiety but not substance use disorders."

The researchers analyzed de-identified medical records in a database maintained by the U.S. Department of Veterans Affairs, the nation's largest integrated health-care delivery system. The researchers created a controlled dataset that included health information of 153,848 adults who had tested positive for COVID-19 sometime from March 1, 2020, through Jan. 15, 2021, and who had survived the first 30 days of the disease. Few people in the study were vaccinated prior to developing COVID-19, as vaccines were not yet widely available at the time of enrollment.

Statistical modeling was used to compare mental health outcomes in the COVID-19 dataset with two other groups of people not infected with the virus: a control group of more than 5.6 million patients who did not have COVID-19 during the same time frame; and a control group of more than 5.8 million people who were patients from March 2018 through January 2019, well before the pandemic began.

The majority of study participants were older white males. However, because of its large size, the study included more than 1.3 million females, more than 2.1 million Black participants, and large numbers of people of various ages.

Compared with those in the control groups without any infections, people who contracted COVID-19 were 35% more likely to suffer from anxiety disorders and nearly 40% more likely to experience depression or stress-related disorders that can affect behavior and emotions. This coincided with a 55% increase in the use of antidepressants and a 65% growth in the use of benzodiazepines to treat anxiety.

Similarly, people who had recovered from COVID-19 were 41% more likely to have sleep disorders and 80% more likely to experience neurocognitive decline. The latter refers to forgetfulness, confusion, a lack of focus, and other impairments commonly known together as brain fog.

More worrisome, compared with people without COVID-19, those infected with the virus were 34% more likely to develop opioid use disorders and 20% more likely to develop nonopioid substance use disorders involving alcohol or illegal drugs. They were also 46% more likely to have suicidal thoughts.

"People need to know that if they have had COVID-19 and are struggling mentally, they're not alone, and they should seek help immediately and without shame," Al-Aly said. "It's critical that we recognize this now, diagnose it and address it before the opioid crisis snowballs and we start losing more people to suicide.

"There needs to be greater recognition of these issues by governments, public and private health insurance providers, and health systems to ensure that we offer people equitable access to resources for diagnosis

and treatment," he added.

To better understand whether the increased risk of mental health disorders is specific to SARS-CoV-2 virus, the researchers also compared the COVID-19 patients with 72,207 flu patients, including 11,924 who were hospitalized, from October 2017 through February 2020. Again, the risk was significantly higher—27% and 45%—in those who had mild and serious COVID-19 infections, respectively.

"My hope is that this dispels the notion that COVID-19 is like the flu," Al-Aly said. "It's so much more serious."

Because hospital stays can precipitate anxiety, depression and other mental conditions, the researchers compared people who were hospitalized for COVID-19 during the first 30 days of the infection to those hospitalized for any other cause. Mental health disorders were 86% more likely in people hospitalized for COVID-19.

"Our findings suggest a specific link between SARS-Co-V-2 and mental health disorders," Al-Aly continued. "We're not certain why this is, but one of the leading hypotheses is that the virus can enter the brain and disturb cellular and neuron pathways, leading to mental health disorders.

"What I'm absolutely certain about is that urgent attention is needed to identify and treat COVID-19 survivors with mental [health](#) disorders," he said.

More information: Yan Xie et al, Risks of mental health outcomes in people with covid-19: cohort study, *BMJ* (2022). [DOI: 10.1136/bmj-2021-068993](https://doi.org/10.1136/bmj-2021-068993)

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