

Mental and Psychological Well-Being Threats That Meets COVID-19 Patients in ICU and Treatment Options

Opinion

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Opinion

COVID-19 pandemic is stressful for patients and nurses. So, the patients experience physical, mental and psychological problems related to the coronavirus pandemic. such as pain, anxiety, insomnia, depression, loneliness in isolation units, disorientation, psychological distress [1,2]. Little interest has been given to common complaints of COVID-19 patients and their families. As well, the fear of acquiring the virus within the hospital may be an additional stressor of patients' families. Moreover, restrictions on family visitors also increase the patients' complains of loneliness, anxiety and depression. These patients need psychological support that cannot be given to them due to their isolation and increased nurses workload with their acute physical care.

Besides, coronavirus patients experience many health problems in ICU settings such as noise induced by equipment (e.g. monitor alarm and mechanical ventilation) and Noise caused by health care providers (e.g.loud voices). So, the critical care nurses and other care provides must make the best use of alarm settings and implement the appropriate measure for reduction of mechanical noises such as wearing of ear plug at night to reduce noise and improve sleeping [3]. Regarding the isolation of coronavirus patients and inability to communicate, the health care providers and authoritative personnel must collaborate together and consider giving the patient with the chance to digitally communicate with their families and friends through paper based or digital media. One of proposed digital media is Video conferences for contacting with their families but its uses have their restrictions [4]. Family support was proven to reduce patients' anxiety and pain during the care of corona virus patients in ICU settings [5].

Furthermore, due to the very high nurses' workload, it was sometimes necessary to downscale elements of ICU care, including giving a lower attention and priority for screening patients for delirium. Hence, it was unexpected, but nevertheless very important that recently two multicentre studies were published revealing that prevalence of delirium is high in COVID-19 ICU patients between 55–65% [6,7] and benzodiazepines were administered in 64% and 78% [8] of the patients. Compliance with delirium management bundle is essential. Finally, besides physical wellbeing, we have to keep in mind the psychological support, as well as the mental health of corona virus patients and their families.

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