COVID-19: impact on mental health

16th July 2021

**Title:** NHS mental health crisis helplines receive three million calls

NHS England | 8th July 2021

Mental health phonelines run by the NHS have answered around three million calls during the pandemic. The dedicated 24/7 NHS mental health crisis helplines were fast-tracked to open a year ago so everyone could get rapid care they need without having to go to A&E.

Most of the callers are able to receive treatment over the phone or can be referred to a face to face assessment and fewer than 2% of the calls have resulted in an A&E attendance or a blue light response from ambulance or police.

The crisis lines have been rolled out four years earlier than planned, with nationwide coverage reached in May 2020, having originally been scheduled to go live by 2023/24 under the NHS Long Term Plan, but were fast-tracked to ensure support could be provided during the pandemic.

Full detail: [NHS mental health crisis helplines receive three million calls](https://www.england.nhs.uk/2021/07/nhs-mental-health-crisis-helplines-receive-three-million-calls/)

**Title:** COVID-19: Preparing for the future. Looking ahead to winter 2021/22 and beyond

Academy of Medical Sciences | 15th July 2021

[See section 4.3, which looks at Mental Health]

A lethal triple mix of COVID-19, influenza, and the respiratory virus Respiratory Syncytial Virus (RSV), could push an already depleted NHS to breaking point this winter unless we act now, says a new report.

The report from the Academy of Medical Sciences brought together 29 leading experts alongside 57 members of the public at the request of the Government Chief Scientific Adviser to forecast the greatest risks to health this winter. They include:

* A potential surge in respiratory viruses could cause widespread ill health and put pressure on the NHS. New modelling carried out for the report suggests this winter influenza and RSV hospital admissions and deaths could be two times that of a ‘normal’ year and could coincide with an increase of COVID-19 infections, and their associated long-term consequences.
* Dealing with the current third wave of COVID-19, as well as multiple subsequent outbreaks, between summer 2021 and spring 2022, meaning the NHS cannot catch up with the backlog of routine care.
* The NHS is already under pressure, and so is likely to be less able to cope with extra winter health challenges. Before the pandemic, winter bed occupancy in the NHS regularly exceeded 95%. This year the NHS will also be operating with a reduced number of beds because of infection control measures. The report also highlights that the NHS is reporting a shortage of nearly 84,000 staff, and a shortage of 2,500 GPs. Staff fatigue and burnout will also be a challenge.
* Worse physical and mental health in the UK population – including that due to delayed diagnosis and treatment and other impacts of the pandemic – could lead to even higher rates of conditions such as asthma, COPD, heart attack and stroke this winter.

The report urges policy makers and the NHS to prepare now for a challenging winter, and is calling for:

* Expanding COVID-19 testing to include influenza and RSV. Fast test results would allow doctors to distinguish quickly between illnesses, treat where appropriate with antivirals against flu, and spot trends.
* Increasing the speed and uptake of COVID-19 vaccination now, alongside preparations for delivering booster vaccines if needed, alongside flu vaccines for everyone eligible in the autumn.
* Financial - and other - support to be strengthened urgently to make it easier for ALL people to self-isolate when they are infected with COVID-19, to reduce the spread of the virus.
* Super charging the NHS by bringing in new staff, increasing bed numbers and capacity in primary care, improving infection control, ensuring equitable access to long COVID clinics, improving access to mental health services, reducing the backlog of routine care and increasing testing capacity for flu and COVID-19.
* Government to give clearer and more accessible guidelines about the precautions the public can take to protect themselves and those around them from COVID-19, such as wearing face coverings in crowded indoor spaces, physical distancing and minimising transmission when infected.
* Greater involvement of patients, carers and the public in planning for, and developing communications about, future health risks.

Full report: [COVID-19: Preparing for the future. Looking ahead to winter 2021/22 and beyond](https://acmedsci.ac.uk/file-download/4747802)

Report summary: [COVID-19: Preparing for the future. Looking ahead to winter 2021/22 and beyond](https://acmedsci.ac.uk/file-download/38576298)

Press release: [Winter viruses and COVID-19 could push NHS to breaking point, warns new report](https://acmedsci.ac.uk/more/news/winter-viruses-and-covid-19-could-push-nhs-to-breaking-point-warns-new-report)

**Title:** Neurological manifestations of SARS-CoV-2 infection in hospitalised children and adolescents in the UK: a prospective national cohort study

The Lancet Child & Adolescent Mental Health | 14th July 2021

The spectrum of neurological and psychiatric complications associated with paediatric SARS-CoV-2 infection is poorly understood. The authors of this study aimed to analyse the range and prevalence of these complications in hospitalised children and adolescents.

The study identified key differences between those with a primary neurological disorder versus those with PIMS-TS. Compared with patients with a primary neurological disorder, more patients with PIMS-TS needed intensive care, but outcomes were similar overall. Further studies should investigate underlying mechanisms for neurological involvement in COVID-19 and the longer-term outcomes.

Full detail: [Neurological manifestations of SARS-CoV-2 infection in hospitalised children and adolescents in the UK: a prospective national cohort study](https://www.thelancet.com/action/showPdf?pii=S2352-4642%2821%2900193-0)

**Title:** Education and mental health: good reasons to vaccinate children

The Lancet | July 14th 2021

With the elevated transmissibility of circulating SARS-CoV-2 variants, vaccination coverages as high as 90% in adults might be necessary to fully relax control measures towards the end of 2021. Such targets might be hard to reach because of vaccine hesitancy.

Therefore, there is a risk that COVID-19 might cause substantial stress on health care in the winter months at the end of 2021 and beginning of 2022.

Modelling data suggest that vaccination of children and adolescents could help mitigate this risk of SARS-CoV-2 dissemination by ensuring they do not act as a reservoir. However, since COVID-19 is mild in children, such intervention might be ethically problematic if the population benefits come without individual benefits for children.

The authors of this correspondence piece argue that vaccinating children and adolescents is important to secure their continued access to education and protect their mental health.

Full detail: [Education and mental health: good reasons to vaccinate children](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)01453-7/fulltext)

**Title:** COVID-19 as a context in suicide: early insights from Victoria, Australia

Australian & New Zealand Journal of Public Health | 12th July 2021

Abstract

Objective: To examine how the coronavirus (COVID-19) pandemic and its consequences may have influenced suicide in Victoria, Australia.

Methods: A mixed methods study of consecutive Victorian suicide cases spanning 1 January 2015 to 31 January 2021. Interrupted time series analysis examined whether suicide frequency changed following the pandemic onset. Thematic analysis was undertaken of police reports in suicides linked with COVID-19 to try to understand how COVID-19 acted as a stressor.

Results: The frequency of Victorian suicides did not change following the onset of COVID-19. Sixty COVID-linked suicides were identified, featuring three recurring themes: COVID-19 as a disturbance in the self, in relationships with others and institutions.

Conclusions: While COVID-19 has not led to an increase in Victorian suicide frequency to date, it is an important background stressor that can erode one's wellbeing, sense of agency and connectedness to others.

Implications for public health: Clinical interventions that serve to reconnect people with a sense of agency and seek to re-establish contact with significant others are indicated. Clinicians should ensure they are familiar with pathways for their patients to access government social and economic supports. A better understanding of how government interventions may be lessening psychological distress is needed.

Full paper: [COVID-19 as a context in suicide: early insights from Victoria, Australia](https://onlinelibrary.wiley.com/doi/epdf/10.1111/1753-6405.13132)

**Title:** Evaluation of the Mental Health of Care Home Staff in the Covid-19 Era. What price did care home workers pay for standing by their patients?

International Journal of Geriatric Psychiatry | 11th July 2021

Background: The characteristics of this pandemic increase the potential psychological impact on care homes workers (CHWs). The aims of this study were to analyze the mental health and health-related quality of life (HRQoL) of a broad sample of CHWs in Spain and to identify potential factors that have a significant effect on their mental health and HRQoL.

Method: This descriptive study comprised 210 CHWs who completed the Generalized Anxiety Disorder 7-item Scale, the Patient Health Questionnaire-9, the Impact Event Scale-Revised, the Insomnia Severity Index, and the Health-related Quality of Life Questionnaire. Sociodemographic and clinical data in relation to COVID-19 were also recorded. Descriptive statistics, univariable analysis and multivariable linear regression models were applied to identify factors associated with mental health and HRQoL.

Results: 86.19% of participants were female; 86.67% were aged under 55 years; 11% were physicians and 64.19% were nurses or auxiliaries; 77.62% have themselves tested positive for Covid-19, and 67.94% of CHWs have directly treated patients with Covid-19.

49.28% had clinical depression; over half (58.57%) had clinical anxiety; 70.95% had clinical stress; and 28.57% had clinical insomnia. Increased use of tranquilizers/sedatives appears to be an explanatory variable of suffering greater anxiety, depression, stress and insomnia, and of having a worse HRQoL amongst our CHWs.

Conclusions: This study confirms that symptomatology of anxiety, depression, stress, insomnia and HRQoL were affected amongst CHWs during the Covid-19 pandemic.

Full paper: [Evaluation of the Mental Health of Care Home Staff in the Covid-19 Era. What price did care home workers pay for standing by their patients?](https://onlinelibrary.wiley.com/doi/epdf/10.1002/gps.5602)

**Title:** Mental disorders and risk of COVID-19-related mortality, hospitalisation, and intensive care unit admission: a systematic review and meta-analysis

The Lancet Psychiatry | 15th July 2021

Mental disorders might be a risk factor for severe COVID-19. This research aimed to assess the specific risks of COVID-19-related mortality, hospitalisation, and intensive care unit (ICU) admission associated with any pre-existing mental disorder, and specific diagnostic categories of mental disorders, and exposure to psychopharmacological drug classes.

Pre-existing mental disorders, in particular psychotic and mood disorders, and exposure to antipsychotics and anxiolytics were associated with COVID-19 mortality in both crude and adjusted models. Although further research is required to determine the underlying mechanisms, our findings highlight the need for targeted approaches to manage and prevent COVID-19 in at-risk patient groups identified in this study.

Full paper: [Mental disorders and risk of COVID-19-related mortality, hospitalisation, and intensive care unit admission: a systematic review and meta-analysis](Mental%20disorders%20and%20risk%20of%20COVID-19-related%20mortality,%20hospitalisation,%20and%20intensive%20care%20unit%20admission:%20a%20systematic%20review%20and%20meta-analysis)

**Title:** COVID-19 and Social Exclusion: Experiences of older people living in areas of multiple deprivation

University of Manchester’s Institute for Collaborative Research on Ageing | 12th July 2021

A new report by The University of Manchester’s Institute for Collaborative Research on Ageing (MICRA) has revealed the challenges faced during the coronavirus pandemic by people aged 50 and over, especially those living in deprived areas.

The research was designed to learn about the pandemic’s impact on the everyday lives of older people, to examine the activities of community organisations working on their behalf, and to assist the local authorities and NGOs who work with them.

Many of those interviewed spoke of the challenges and difficulties experienced during the lockdown. Physical deterioration was reported – especially as a result of restricted mobility and lack of exercise – and mental health deteriorated in some cases through the effects of losing relatives, lack of contact with friends and family, the impact of shielding, and lack of access to meeting places.

Full report: [COVID-19 and Social Exclusion: Experiences of older people living in areas of multiple deprivation](https://documents.manchester.ac.uk/display.aspx?DocID=56003)

Press release: [New research reveals challenges faced by older people during pandemic](https://www.manchester.ac.uk/discover/news/older-people-during-pandemic/)

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We also produce a range of subject-specific news feeds to ensure our clinical and professional teams stay up to date with developments in their work areas. Please visit our [website](http://www.trftlibraryknowledge.com/) for more information

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