

Discovery COVID-19 Podcast Series

Transcript: Louisa Niehaus - Mental Health for Healthcare Providers

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	Speaker	Dialogue	
00:00	Louisa Niehaus	Hello, this is Louisa Niehaus. I'm a psychotherapist and relationship expert and I'm based in Gauteng. You can contact me by going onto my website louisaniehaus.com. I'm going to talk to you today about mental healthcare for medical and associated personnel during COVID-19.	00:22
00:27		Medicine is a stressful profession under normal circumstances and the fact that you've made the time to listen to this podcast is in itself a positive. Medical personnel are at risk of burnout but more so under conditions of disaster let alone a pandemic. The physical demands, psychological strain and ineffective work processes can often lead to burnout and working under extreme conditions such as a pandemic can lead to a combination of exhaustion, cynicism, and perceived inefficacy. Clinicians experiencing burnout are traditionally likely to quit their jobs, yet in the face this pandemic, burnout cannot accurately capture what doctors, nurses, paramedics, and others are experiencing as Corona virus which has the potential to overwhelm the healthcare system. Burnout is a chronic response to healthcare conditions, but this is an unprecedented, acute crisis.	01:34
01:49		Facing the extreme uncertainty of COVID-19 for weeks and months on end could have significant impacts on mental wellbeing. More than any other group, it needs to be recognised that medical personnel are in danger of getting sick from constant exposure. It is normal to be experiencing anxiety and fear. You may find yourself struggling to sleep or battling with intrusive thoughts or even crying more than usual. There may be an overall feeling, prevalent for you and in friends, family, and co-workers of an impending doom and an existing gloom that is both physically and psychologically palpable. To an outside observer, medical professionals appear strong and resilient in the face of the unknown. There is an expectation from patients that you are invincible and that you are all-knowing and that inevitably, you will protect and save them. However, you put yourselves at risk during this pandemic in order to keep others safe. Let's face it, the reality is that medical personnel have very real, and acute stresses of their own. Challenges for medical personnel include not only the increased workload, but also fears of contagion	03:42

		for themselves and their families and working with new and frequently changing protocols and personal protective equipment, caring for patients who are very sick and quickly deteriorating, and also caring for colleagues who have also fallen ill. Medical personnel are faced with the very real concern that they, themselves might die from COVID-19	
03:44		Many factors are contributing to the psychological distress of medical personnel and these include emotional strain and physical exhaustion when caring for growing numbers of acutely ill patients, caring for co-workers who've become critically ill, concerns about infecting family members, anxiety about assuming new or unfamiliar clinical roles and expanded workloads when caring for patients with COVID-19, and limited access to personal mental health services for managing depression, anxiety and psychological distress.	04:24
04:35		Interpersonal issues arise from infection control measures and the use of personal protective equipment. Communication with patients is made much more complicated by PPE which covers most of the face and staff have less time to spend with each patient. Family and friends may not be able to visit patients and staff may feel guilt that the patient has died alone. Normal routines for breaking news of death are also not available and news may have to be shared over the phone. Equally, the opportunity to view the body and collect belongings will not be available. However, we all respond differently and not everyone becomes distressed in the same way or to the same degree and in many instances will not constitute mental health pathology. There are concerns around negative psychological effects during this pandemic such as burnout, compassion fatigue, anxiety, depression, post traumatic stress disorder and moral injury. Not all of these will occur, nor will they necessarily last long beyond the end of the pandemic.	05:54
05:55		So, let's look at how to cope. The right support can foster resilience and as I said before, some people will find they experience a sense an increase of their own confidence or ability to manage future stresses and this is called post traumatic growth. Trauma is often associated with something overtly violent such as a car accident or a shooting but a traumatic situation can also occur when it violates familiar expectations about someone's life and the world, sending them into a state of extreme confusion and uncertainty. And in the case of the pandemic, prolonged uncertainty is compounded by the moral anguish that healthcare professionals face when they may not have adequate resources to treat critically ill patients. Moral injury, a	07:54

	<p>term borrowed from the military, occurs when someone does something that goes against his or her deeply held moral beliefs and in medicine, this can occur when the business side of healthcare hinders a physician's ability to care for patients, for instance when there are not enough ventilators or physicians are not used to doing triage to choosing who gets life support and who does not. Doctors face a conundrum of fighting COVID-19, making them feel more dedicated to profession and determined to push through and help their patients. However, many also admit to harbouring darker feelings. They're afraid of spreading the disease to their families, frustrated about a lack of protective gear and a sense that they can't do enough for their patients. There is a risk that medical personnel feel more exhausted without a clear end in sight and most of all, deeply sad for their dying patients.</p>	
07:56	<p>So, what can you do for yourself? In this time of extreme anxiety and uncertainty, it is worth remembering that many habits that have stood us in good stead up to now, will still hold throughout this pandemic. It is useful to be able to acknowledge the gravity of the situation, noticing what is in your control and what is not. Psychological reactions to the acute and prolonged stress of the pandemic will be common and you are going to be likely to experience these. It does not mean that it will last long-term or that you are weak. Remember, it is the virus that kills people, not the staff. This pandemic is a marathon. It's not a sprint. Take your breaks, try to get time off and take time to reset yourself. It is important although not always easy to allow yourself to rest and reset but here are some practical things for you to try. Start with the small things. Remember to eat well, to hydrate yourself, to sleep, and to exercise. Focus on the positives and be thankful for the good things in your life. Keep in regular contact with family and friends by phone or online and talk about your feelings and share your experiences with others. Sometimes it may feel much more appropriate not to talk about work and this is also okay. Take time to rationalise the risks of infection to yourself and your family so that you feel comfortable going to work. Know who forms your peer and support network and where to access external support, should you require it. Allow yourself to be proud of your important role in society and the work that your doing to help others. Remember, the scope of this mental health crisis amongst medical personnel isn't going to come into focus until the more immediate problem has ebbed. The real challenge s going to come when the pandemic eases up and people start having time to process all that they've seen, all that they've done, all they've felt and pushed away.</p>	10:21

10:23		<p>Acute stress reactions can be significant in their presentation, but they usually resolve in a couple of weeks or so and these can include emotional, cognitive, physical, and social reactions and will often present in combination. It's important that you know what some of these reactions are and how normal it is to experience them because distress often arises from feeling guilt or shame about these reactions happening. So, let's look at some of these acute stress reactions. The physical will include palpitations, nausea, low appetite, maybe chest pain, headaches, abdominal pains, insomnia, or hyper arousal. Behavioural reactions include avoidance, recklessness, detachment, withdrawal, irritability, drug or alcohol abuse, and conflict with others. Some emotional reactions are numbness, anxiety, low mood, anger or fear, mood swings, anhedonia, or low confidence. And cognitively, be aware of poor concentration, intrusive thoughts, flashbacks, poor memory, confusion, hypervigilance, and rumination. I would encourage you to seek remote psychological support. While peer support has its place, it is sometimes really, really important to be able to offload to a relative stranger, especially enabling you to acknowledge feelings such as fear, anger, or even a reluctance to come to work at all. Do not underestimate the importance of peer support. Peer groups have shared experiences which means they are able to communicate in a kind of shorthand. There is no need for members of the peer group to worry about breaking taboos because their social rules are already established, and you can speak to your peers much more freely than you may be able to with friends or family. I would encourage you to try and create formalised peer support in order to offer debrief or supervision sessions. Colleagues and friend at work that can support each other are going to be an important part of maintaining good wellbeing and camaraderie during this pandemic.</p>	12:53
12:54		<p>As a colleague, you can support your co-workers by spotting signs of concern in them, like nightmares or difficulty sleeping, unable to stop worrying, being jumpy, easily irritable, flashbacks. You can offer your colleagues the opportunity to talk, to listen, to laugh or even to cry with them. To be kind consistent and reassuring and helping them to explore the cause of their distress. Like soldiers coming back from deployment, it's going to take time for medical professionals to process and heal. And when this acute medical crisis ends, there might be a mental health crisis that could emerge, and we need to be ready for this. Mental health treatment is not just something that occurs urgently or in a crisis, but it is something that need to continue and to be available long into the future.</p>	13:57