

COVID-19: From Grief and Mourning to Prolonged Grief Disorder

COVID-19: Do Luto e do Pesar ao Luto Prolongado

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Palavras-chave: COVID-19; Luto; Pandemia; Pesar; Saúde Mental

Dear Editor,

Aguiar *et al* made some relevant considerations about funeral rituals and public health measures triggered in Portugal, in the context of the COVID-19 pandemic.¹ One of the issues raised was the mental health support for bereaved family members. This raises a reflection about the particularities of the COVID-19 pandemic, namely the impact on mental health and the experience of mourning for the people affected.

Anticipatory grief, preceding the death of a patient, is due to the hospitals' restrictions on physical presence of visitors that deprives families of assisting their relatives in their final days and by the general lack of information about how the disease will progress. This uncertainty could be traumatic since there is a quick transition between being healthy, 'ill' and 'dying', which can take five to nine days, on average.² Traditional grief rituals were also severely restricted by the pandemic circumstances. This should be a time of acceptance of a future loss that is soothed by the constant presence of loved ones, watching over the departing, and

celebrating a legacy.

Disenfranchised grief follows the death of the patient and is due to: i) breach of the social recognition of the loss in the form of traditional burial practices; ii) society overlooking the distress felt by family members, especially if the deceased was elderly, frail or had a chronic progressive disease; iii) insufficient socioeconomic resources resulting from lockdown; iv) longstanding pressure to reestablish social and professional activities, with few resources remaining for the necessary support for close friends and the family after a loss.³ Many families also face conflicts in terms of what was the deceased's will and what is currently obtainable. In addition, contagion occurring among family members contribute to feelings of responsibility and guilt.³

The literature is still scarce on the impact of this pandemic on mental health. However, there is evidence of a probable increase of prolonged grief disorder.⁴ In addition to situational risk factors described, there are factors related to the bereaved, such as: personality traits, relational and socioeconomic factors, coping style, previous psychiatric history and comorbidities.⁵ In addition, social distancing and isolation make physical and psychological comfort challenging.

It is urgent to anticipate the need for effective treatments for prolonged grief disorder. It is essential to promote accessibility to evidence-based interventions, in both face-to-face and online formats, that could be applied even if the pandemic persists for a long time.⁴

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