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Addressing Post – COVID-19 Pandemic Depression

ARIA ELAHI

NEWTOWN PRIMARY CARE

APRIL-MAY 2022

DR. EURICA CHANG

Problem

- The coronavirus pandemic of 2019 has dramatically compounded the mental health crisis in the United States.

-Factors include but not exclusive to:

- Social Isolation
- Unemployment
- Anxiety from getting sick
- Loss of family members

-Patients need to have access to resources that will allow them to receive help if they are dealing with depression due to the pandemic.

-Depression is associated with an increase in other chronic disease such as diabetes, cancer and myocardial infarction. (Solomon et al., 2021)

Public Health Cost

- The number of US adults with Major Depressive Disorder continues to increase from 15.5 million to 17.5 million (+12.9%).
- Depression has significant financial and social costs to patients. The total cost of individuals with major depressive disorder in the United States was \$326.2 billion in 2020.
- There are many factors that contribute to these costs that include but are not exclusive to: pharmaceutical costs for 1) antidepressant, antipsychotic and antimanic drugs 2) injury/illness 3) time off from work 4) disability.
- Depression also results in 225 million lost workdays and 36.6 billion salary-equivalent lost productivity each year. (Greenberg et al, 2021)

Community Perspective

Dr. Eurica Chang M.D., Family Medicine Physician, Newton Primary Care

“Definitely has caused stress and at the very most has brought out things like anxiety and depression either because of the isolation or the restriction on movement and not being able to see family members and loss of family members and illness as well.”

Nya Rossi PA, Family Medicine Physician Assistant, Newtown Primary Care

“We need more mental health help, access, especially for the underserved people like the people who are poor. Especially people on Medicaid the options are limited and the ones that need it the most. I think Medicaid should give more incentives for healthcare providers.”

Intervention and Methodology

-I created a pamphlet that is specifically targeted towards individuals who have become depressed or have had their depression worsen due to COVID-19 pandemic regardless of whether they had contracted COVID-19.

-It includes PHQ-2 and PHQ-9 screening questionnaires for them to fill out for them to screen for depression.

-The pamphlet will be distributed and made available at Newtown Primary Care.

-I communicated with Newtown Primary Care Staff to gain perspective on their patients, I asked the following interview questions:

- How do you think the pandemic has affected the mental health of your patients?
- Do you think that there are resources available for them to seek help if needed?
- Can you describe how it has affected patients that were already diagnosed with depression before the pandemic?
- Can you describe the socioeconomic impact the pandemic had on your patients?
- Can you describe how depression has on the overall health of your patients?
- What changes do you think can be made to address the needs of patients who are diagnosed with depression?

Results

- The patient is encouraged to bring the results of their PHQ-2 and PHQ-9 to their next primary care visit so that they can discuss further steps with their physician if needed.
- The pamphlet provides mental health resources for the individual to reach out to such as the Substance Abuse and Mental Health Services Administration National Hotline, National Alliance on Mental Illness, and National Suicide Prevention Hotline.
- There is also information regarding Nuvance Health's COVID Recovery Program, a program targeted towards patients that have lingering symptoms after contracting Covid-19. These symptoms can greatly affect one's mental health however this program is having difficulty due to the lack of awareness that this service is available. The pamphlet hopes to address that by increasing awareness.
- The pamphlet will be distributed at Newtown Primary Care.

Evaluation of Effectiveness

-The effectiveness of the pamphlets comes from the questionnaires that are incorporated. The Patient Health Questionnaire (PHQ)-2 has a 97% sensitivity and a 67% specificity in adults. The PHQ-9 has a 61% sensitivity and a 94% specificity in adults. Therefore, the combination of both these tools are effective for screening individuals for depression (Maurier).

-The main limitation, through the interviews that I have done is the accessibility of resources to address depression. Many individuals cannot afford many of the resources for depression such as therapy or pharmaceutical intervention as it may not be covered by their insurance.

-There is still an overall stigma about diagnosing oneself with depression and reaching out for help. This may prevent many individuals from using the pamphlet and utilizing its resources.

Recommendations for Future Interventions

- The main issue with treating Major Depressive Disorder is accessibility. The more easily accessible the resource there will be a greater likelihood of the individual using it mainly because it would be counter-intuitive if the resource was a burden to the patient by adding to the many stressors they have.
- Having more psychiatrists work in the primary care clinic itself would be beneficial because it would be easy for PCPs to make follow-up appointments in the clinic if they identify one of their patients having a mental health issue.
- The patient would be more comfortable addressing their issues in the clinic they have been going to for some time rather than a different location.
- We should find solutions to increase the ability for patients to afford care for mental health or ways to have their insurance cover for it.

References

1. Greenberg PE, Fournier AA, Sisitsky T, Pike CT, Kessler RC. The economic burden of adults with major depressive disorder in the United States (2005 and 2010). *J Clin Psychiatry*. 2015 Feb;76(2):155-62. doi: 10.4088/JCP.14m09298. PMID: 25742202.
2. Solomon MD, Nguyen-Huynh M, Leong TK, et al. Changes in Patterns of Hospital Visits for Acute Myocardial Infarction or Ischemic Stroke During COVID-19 Surges. *JAMA*. 2021;326(1):82–84. doi:10.1001/jama.2021.8414
3. Maurer DM. Screening for depression. *Am Fam Physician*. 2012 Jan 15;85(2):139-44. Erratum in: *Am Fam Physician*. 2013 Apr 1;87(7):464. PMID: 22335214.