

## Mental health and quality of life in COVID-19 survivors: A needed discussion

Dear Editor,

It was with great interest that we read the article “Short-term neuropsychiatric outcome and quality of life in COVID-19 survivors” by Méndez et al., which consisted on drawing an association between quality of life and neuropsychiatric effects resulting from the acute infection of COVID-19 [1]. This cross-sectional study was based on complete test battery by telephone with 179 patients who were discharged from the hospital in order to synthesize characteristics of outcomes among them. The analysis concludes that most of them had cognitive impairments, psychiatric morbidity, and poor quality of life, even those who did not need advanced life support.

It is believed that SARS-CoV-1 and MERS-CoV can infect the central nervous system, in particular the brain stem [2]. The mechanisms for developing symptoms indicate that it is a combination of biological and environmental factors, as well as immunological reactions that affect the blood-brain barrier and provoke coagulopathies, such as strokes, with delirium being one of the most common manifestations [2]. Delirium and the need for intensive care cause Post-traumatic stress disorder (PTSD) in 20% of survivors in general [2]; these data are also proven by the analyzed article [1], as 25.1% tested positive for this condition. It is interesting to note that risk factors for COVID-19 are also related to PTSD, such as obesity, diabetes, and cardiovascular diseases [2], which may further explain the symptomatology in post-COVID patients and the need for adequate treatment.

Around the world, health professionals are studying the best way to minimize the effects of the pandemic on mental health, both among those directly affected by the disease and those indirectly affected by the social isolation and exhaustion of the current world context. In Brazil, the creation of the voluntary and collaborative Working Group (WG) on mental health and psychosocial care was a successful initiative by the Oswaldo Cruz Founda-

tion (Fiocruz) [3]. Its main objective was to guide workers and managers of the Brazilian Healthcare System through thematic booklets and technical recommendations, and work with the National Course of Mental Health and Psychosocial Care at COVID-19, which had more than 60,000 people enrolled. Another solution was the creation of the COVID Recovery Clinic at the University of North Carolina at Chapel Hill [2]. This clinic aims to, through a multidisciplinary team of professionals, assist survivor who have medical complications, residual symptoms, and/or loss of functional independence.

In addition, a cross-sectional study conducted on patients infected by COVID-19 [4] reported that patients, hospitalized and nonhospitalized, had psychological symptoms after an average of 50 days after diagnosis. It was observed that 40% of the patients reported poor quality sleep, while one-third reported PTSD, anxiety, and/or depression. These data demonstrate again that COVID-19 patients are more likely to have psychiatric morbidities. Therefore, even with few studies on the subsequent impact of the virus, we agree that more analysis related to the neuropsychiatric consequences of the virus is needed, and that we require new methods and treatments to effectively support the large number of people affected.

### Conflict of Interest

All authors declare no conflict of interest.

### Author Contributions

Sophia De Moraes De Medeiros: Conceptualization, resources, visualization, writing-original draft, and writing-review and editing. Raílla Vandresen: Conceptualization, resources, visualization, writing-original draft, and writing-review and editing. Elonir Gomes: Supervision, writing-review and editing. Eliane Mazzuco: Supervision and writing-review and editing.

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