

Mental Health Outcomes and Risk Factors Among Female Physicians During COVID-19 Pademic

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Abstract The fast spread of COVID-19 pandemic brought a huge workload burden, where health care workers have become a particular risk group for developing mental health symptoms, women being the most affected group according to preliminary data. The aim of this study was to provide information about the prevalence of mental health outcomes in female physicians during COVID-19 pandemic and describe risk factors associated with them. Using a cross-sectional design, we applied a questionnaire to female physicians inquiring about COVID-19 changes in their social and professional dynamics. The prevalence for depression, anxiety, sleep quality disturbances and PTSD was 72.6%, 64.3%, 77.8%, and 19.4% respectively. The main risk factor associated with every outcome was having a previous history of any mental health disorder.

Introduction

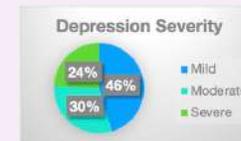
Studies by Jianbo Lai et al. in Wuhan China and Rossi et al. in Italy, reported high prevalence of depression, anxiety and insomnia in health care workers during the pandemic, being women in the frontline of attention, the ones reporting more severe symptoms (1,2). The aim of this study was to provide information about the prevalence of depression, anxiety, sleep disturbances and posttraumatic stress disorder in female physicians during COVID-19 pandemic and describe risk factors associated with them.

Methodology

Using a cross-sectional design, we applied a questionnaire to female physicians inquiring about COVID-19 changes on their social and job dynamics. To assess the presence of depression, anxiety, sleep disturbances and posttraumatic stress disorder, the participants responded the 9-item Patient Health Questionnaire (PHQ-9), the 7-item Generalized Anxiety Disorder scale (GAD-7), the Pittsburgh Sleep Quality Index (PSQI) and the PTSD Checklist for DSM-5 (PCL-5).

Results

A total of 303 female physicians participated in the study, 57.1% were in a 31-40 years age range. Overall, 77.8% of all participants reported symptoms of sleep quality disturbances, 72.6% reported depression, 64.3% reported anxiety and 19.4% reported PTSD symptoms. Most participants were specialist, married and actively working on a regular schedule.



Almost all prevalence rates of mental health entities were higher than those reported in previous studies, except for PTSD rate reported by Rossi (49.38% vs 9.4%). Analyzing the most important risk factors, the single risk factor with the strongest correlation with current mental health symptoms was being a COVID-19 frontliner and having a previous diagnostic of any mental health disorder

Conclusions

Our results confirm the need for further follow up and implementation of specific mental health interventions in female physicians, especially those with previous diagnoses of any mental health disorder. The development of a gender specific approach for interventions and support is needed in order to comprehensively protect women wellbeing.

References



Biography

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