



Impact of COVID-19 Pandemic on Mental Health of HIV Patients

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ABOUT THE STUDY

Mental health issues have become more prevalent in society as a whole throughout the COVID-19 epidemic. In the United States (US), mental discomfort was present in adults at a rate of 27.7% in 2020, which was eight times greater than in 2018. About 30% of the general public in Asia and Europe experienced anxiety, tension, or depression as a result of COVID-19, according to a meta-analysis. In Japan, the incidence of depressive disorders grew to 18.3%, while during the pandemic, the prevalence of at least one common anxiety disorder rose to 10.6%. Significant lockdowns have been linked to psychological harm, including despair and anxiety, despite the fact that social isolation and travel limitations are vital to stop the COVID-19 infection from spreading.

Additionally, greater drinking during the COVID-19 pandemic was linked to heavy drinking prior to the epidemic. It has been demonstrated that the COVID-19 epidemic encourages addiction, including to alcohol, opioids, cigarettes, and injectable drugs. The intensity of depression and anxiety in France, the Netherlands, and the United Kingdom significantly correlated with Stringency Index (SI) values, which reflect the effectiveness of social infection control methods. Since the beginning of this pandemic, studies have shown that some individuals are more susceptible to the psychosocial effects of the pandemic. These individuals include those who have certain physical illnesses, older adults, those who are at high risk for COVID-19 and patients who have pre-existing psychiatric disorders like depression, anxiety disorders, and substance use disorders.

Even before the COVID-19 pandemic, it was known that People Living with HIV (PLWH) had a higher prevalence of psychiatric illnesses than the general population. According to a thorough study conducted in the US, mood disorders, including depression, affected 29.9% of male PLWH, and anxiety disorders affected 33.4% of them. Furthermore, in Japan, 8.6%–

29.6% of PLWH reported having an adjustment problem, and 25.7% of PLWH reported having a depressive disorder. Of those, 29.3% also reported having an anxiety condition. Additionally, it has been noted that medication adherence and a decline in Quality of Life (QOL) are linked to mental health issues in PLWH. The lives and care of PLWH are thought to be significantly impacted by mental health issues. Thus, a crucial issue is the susceptible group's mental health while experiencing social limitations due to the COVID-19 epidemic.

In the PLWH population during the COVID-19 pandemic, depression affected 44.8% of them, whereas anxiety disorders affected 21.4%. As a result of social infection control measures during the COVID-19 pandemic, some PLWH also saw an increase or decrease in their levels of sadness and anxiety. While the COVID-19 pandemic persists and social infection control becomes more effective, so does the mental health of people living with HIV. The PLWH experience tremendous misery, severe depression, and anxiety disorders because they are excluded from society and lack a spouse, live alone, don't work, or have a history of mental illness.

A global online assessment of PLWH conducted during the COVID-19 pandemic revealed that depression was present in 7.1%–41.0% of cases and generalised anxiety disorder in 14.3%–39.8%. Since the prevalence of depression and generalised anxiety disorder in PLWH was almost the same in other countries, our study found that depression affected 44.8% of participants and GA affected 21.4%. During the COVID-19 pandemic, depression and generalised anxiety disorder were reported to affect 18.3% and 10.6% of the general Japanese population, respectively. People living with HIV in Japan may have much higher levels of stress, as well as more than twice the levels of depression and anxiety. Additionally, during the COVID-19 pandemic in Italy, an online survey of 98 PLWH revealed that 45% of them displayed psychological distress as determined by the Impact of Event Scale-Revised (ISE-R), which was greater than that in our study.

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