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Letter to Editor

The prevalence of Post-Traumatic Stress Disorder after COVID-19 Pandemic

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Dear Editor,

On March 11, 2020, the World Health Organization identified the coronavirus 2019 as SARS-CoV-2 and a worldwide pandemic. COVID is a common human-animal virus known as bats that can be transmitted to humans through droplets floating in the air and aerosols (1). The COVID-19 pandemic has created a set of psychological, physical, and social problems associated with COVID-19 in many people around the world. If these problems are not addressed, the psychological consequences of the COVID-19 pandemic in the general population may persist for a long time and become a global medical crisis (2). Studies also show that coping with COVID-19 does not end with vaccination and screening. According to the World Health Organization, COVID-19 syndrome is defined as a disease with stable symptoms in people who have defeated the coronavirus 2019 after a while. The type of persistent symptoms, their prevalence, duration, and severity after recovery of COVID-19, as well as their risk factors, are still under investigation (3).

Post-traumatic stress disorder (PTSD) is one of the most common psychological disorders that may occur after experiencing very threatening events such as accidents, natural disasters, pandemics, deaths of others, and other stressful events (4). Symptoms of PTSD include disturbing thoughts or memories of events, anxiety, restlessness, trying to avoid stimuli related to the traumatic event, changes in thinking and feeling, and increased reactions to war or flight. These symptoms persist for more than a month after the traumatic event. Studies have shown a 17-44% prevalence of PTSD among survivors of acute illness (5).

During the COVID-19 pandemic, many people, including hospital staff (6), the elderly (7), patients with or suspected of COVID-19 (8), children and adolescents (9), experienced PTSD. Medical staff and nurses are among those at risk for this disorder. These employees face traumatic events that threaten their health at work, as well as incidents in which their patients are seriously injured or threatened with death, but they are not in danger of being threatened in the psychological literature. These events are referred to as observed trauma. The COVID-19 pandemic also caused a great deal of stress and anxiety for hospital staff, especially nurses who were at the forefront of the fight against COVID-19 (3). In this regard, Li et al. (6) in a review study examined the prevalence of PTSD, depression, and anxiety of hospital staff during the COVID-19 pandemic. In this study, 65 articles from 21 countries were reviewed. The results showed a prevalence of 21.7% in

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depression, 22.1% in anxiety, and 21.5% in PTSD during the prevalence of COVID-19 in the world.

From the earliest days of the COVID-19 pandemic, there has been a perception among people around the world and governments that older people over the age of 60 are most affected by COVID-19 and need to take health care seriously. This in turn exacerbated anxiety in the elderly; This caused the elderly population to distance themselves from other people in the community and experience severe post-traumatic stress (10). In the same vein, Srifuengfung et al. (7) in a study examined the prevalence of depression, anxiety, and PTSD in the elderly during the COVID-19 pandemic. The results showed that depression, anxiety, and post-traumatic stress were 7%, 12%, and 5.5%, respectively.

Because there was no definitive cure for COVID-19, many people with COVID-19 developed high levels of post-traumatic stress and anxiety, especially those hospitalized (11). In this regard, Einvik et al. (8) in a study investigated the causes of post-traumatic stress in patients with and without a history of hospitalization during the outbreak of COVID-19. The results of this study showed that post-traumatic stress symptoms were reported in 9.5% of hospitalized patients and 7% of non-hospitalized patients. Shortness of breath and observation of death of others were the causes of post-traumatic stress in hospitalized patients. Also, a history of depression in people without hospitalization was a cause of post-traumatic stress. In another study, Simani et al. (11) examined the prevalence and association of chronic fatigue syndrome and PTSD after COVID-19. 120 patients participated in this study. The results showed that the prevalence of chronic fatigue symptoms was 17.5% and PTSD was 5.8%.

The COVID-19 pandemic has a much wider impact on the daily lives of children and adolescents around the world than SARS, MERS, or swine flu. The United Nations Educational, Scientific, and Cultural Organization estimates that school closures have affected 862 million children and adolescents, accounting for almost half of the world's population (12). In this regard, Liang et al. (9) in a study examined the prevalence of psychological distress and PTSD in Chinese children and adolescents during the COVID-19 pandemic. The results showed a 12.5% prevalence of PTSD and psychological distress.

Overall, given that two years have passed since the coronavirus 2019 pandemic in the world and during this period many psychological disorders in the general public, hospital medical staff, the elderly, patients with or suspected of COVID-19, Children, and teens were created. However, we are still witnessing the mutation of this deadly virus worldwide, which can lead to many psychological disorders. Also, since global vaccination has begun in many countries around the world, more attention needs to be paid to the long-term consequences of the COVID-19 pandemic in the coming years. In this regard, according to the studies, it is suggested to use cognitive-behavioral, mindfulness, and metacognitive interventions to reduce the severity of PTSD to reduce the prevalence of psychological disorders in the post-COVID.

Conflicts of Interest

There is no conflict of interest.

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