

Original research article

Mental health among the resident doctors, house surgeons, during the corona virus disease

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Abstract

The fact that medical school is one of the most stressful types of educational settings is a fact that is widely known around the world. This fact contributes to the prevalence of mental health problems among medical students. Medical students, as a whole, have significantly higher rates of anxiety and disillusionment compared to their classmates. There has been an uptick in the number of cases of mental illness as well as stress due to the increasingly tough surroundings of competition. There is not a lot of focus on the emotional well-being of medical professionals. Using a questionnaire about general health, the participants in this study are asked about their overall health in order to conduct an evaluation of their intellectual fitness at some point throughout the COVID-19. Both the incidence of mental health disorders and the correlations between mental health status and a variety of demographic factors are examined and estimated.

Keywords: Medical professionals, covid-19, tertiary hospital

Introduction

The fact that medical school is one of the most stressful types of educational settings is a fact that is widely known around the world. This fact contributes to the prevalence of mental health problems among medical students. As a whole, medical students experience higher rates of anxiety and disillusionment compared to their classmates, and the incidence of mental health issues is on the rise^[1, 2]. Mental diseases and stress are on the rise along with the number of years spent training^[3]. This is due to the fact that competitive situations are becoming increasingly tough to navigate. However, despite the fact that having a high workload and being anxious about exams may be necessary for overall growth and development, they cause weariness, lead to a reduction in the amount of sleep one gets, and have a negative impact on academic performance^[4, 5].

In recent years, there has been a distressing rise in the number of medical professionals and medical students who have taken their own lives. Despite mounting evidence that those working in the health care industry are significantly more likely to suffer from mental disorders than members of other professional groups^[4], the mental health of those employed in the health care industry receives very little attention. There is also a stigma attached to mental health issues among medical students, which is caused by multiple factors including the fear of being unfairly appraised by their faculty, diminished admiration among their peers, or perceived weakness in handling responsibilities^[6]. This stigma contributes to the fact that there is also a stigma attached to substance abuse among medical students. It has also been noted that people who work in the medical field are more likely than the general population to engage in substance misuse and that when they do, the behaviour is typically novel and persists for a longer period of time^[7]. Because they will one day be practising doctors, it is essential that medical students maintain good health while they are enrolled in medical school.

The most recent pandemic of severe acute respiratory syndrome caused by the coronavirus has had a significant impact on the patients' psychological well-being^[8, 9]. The Indian government has announced that there would be a nationwide lockdown beginning in March of 2020 in order to take preventative action against the development of the coronavirus sickness. The psychological and social impacts of trauma have been noted among medical staff, including resident doctors and House surgeons. This is in addition to the negative effects that the epidemic and lockdown have had on patients' health.

Aims and Objectives

To study the mental health among the resident doctors, house surgeons, during the corona virus disease.

Materials and Methods

This study was done in the Department of Psychiatry, Kanachur Institute of Medical Sciences, Mangalore.

The study was done from Jan 2020 to Dec 2020.

Methodology

This study included a sample of 105 medical resident doctors and house surgeons at Medical College. The GHQ-28 was adapted to Google Forms and administered to the medical professionals. A Likert scale with a range from 0 to 3 was utilised for the GHQ-28. This scale was used to reflect "not at all", "no more than usual", "slightly more than usual" and "far more than usual." The possible range for the total score is from 0 to 84. The GHQ-28 has been translated and validated in over 38 different languages since it was first developed; however, for the purposes of this research, only the English version was utilised. We decided to use a cut-off value of >23 to establish what constitutes an abnormal GHQ score. It has been stated that the reliability measure known as Cronbach's alpha for the GHQ-28 can range anywhere from 0.78 to 0.95^[10, 11].

Results

Table 1: Scores

	Male	Female
Somatic symptoms	SD=2.32 Mean=5.62	SD=3.4 Mean=6.41
Anxiety* (Significant p value equals 0.0122)	SD=3.3 Mean=5.61	SD=4.38 Mean=8.09
Social dysfunction	SD=2.17 Mean=8.47	SD=2.27 Mean=9.48
Depression	SD=3.18 Mean=4.12	SD=3.94 Mean=6.3

Discussion

This research on the psychological morbidity experienced by medical health workers during the COVID-19 pandemic led to the formation of several hypotheses and several results. An astounding sixty percent of the individuals had an abnormal GHQ score, which was much higher than the prevalence rates reported by other authors in comparable study in India and around the world^[13-15]. The difficulty and pressures associated with the medical profession are known to cause trainees a great deal of emotional discomfort, which is a common occurrence. In the modern world, the level of competition in the medical field is at an all-time high, and the consequences of failing to compete against the tens of thousands, even hundreds of thousands, of other people are severe. The majority of people are now cognizant of the fact that the disease is not going away anytime soon.

Participants had the expectation that they would continue to suffer the effects of the epidemic for at least another six months. According to this study, about one-third of participants experienced highly unpleasant feelings as a result of the epidemic, and these persons were twice as likely to score higher on the GHQ scale. These feelings were accompanied by concerns about the participants' professions and the future. According to the findings of this study, women are twice as likely as men to struggle with issues related to their mental health. It has been hypothesised, and it has been proven in other studies, that females may experience higher degrees of psychological discomfort as a result of a weakened sense of coherence and less social support^[13, 16]. This study has shown that early intervention is necessary, as well as an open culture that encourages the airing of personal complaints and difficulties. Both of these things are necessary, as indicated by the study. It is futile and does not foster personal development to create a learning atmosphere in which students are punished for low performance. On the other hand, working in the medical field requires a significant amount of patience and effort, and a medical student can realise this objective with the assistance of lecturers who are sympathetic to their plight. Both the establishment of mentorship programmes between students and faculty and the requirement that certified counsellors be employed in medical schools are steps in the right direction. Yoga, meditation, and mindfulness practise are all practises that have been the subject of extensive research as potential approaches to alleviate anxiety and stress^[17, 18]. If we want the health of future generations to be in capable hands, broad use of these modalities to improve the psychological well-being of medical students could be advantageous and is urgently needed.

Conclusion

Higher rates of mental health issues have been related to a number of factors, including the possibility of a pandemic and female sex. Even if the pandemic does not act as a stressor, medical professionals still need advice and counselling, as well as intervention at the individual, group, and community levels, in order for them to develop as a whole.

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