

Boletim BiblioCovid

Boletim BiblioCovid v.2 n.2, fevereiro 2021 | COVID-19 e Suicídio

Boletim destinado a apresentação de estratégias e artigos científicos sobre temas relacionados à Covid-19. Gostaria de um boletim com sua temática? Sugira novos temas aqui: [BiblioCovid_sugestao_de_tema](#)

COVID-19 e Suicídio



Vocabulário controlado

MeSH – Medical Subject Headings (NLM/NIH)

Bases utilizadas

Pubmed

Termos Utilizados (com base no Medical Subject Headings)



Descritores e/ou palavras-chave

Sars-CoV-2
COVID-19
Suicide

Filtros utilizados

Journal Article
Free full text
Ano: 2020-2021

Estratégias de busca

("sars-cov-2" OR "COVID-19") AND (suicide)

Seleção dos dez artigos mais relevantes, segundo critérios da base de dados PubMed e U.S. National Library of Medicine incluindo os filtros, "Journal Article" " Free full text", "Ano: 2020-2021

1. Suicidal thoughts and behaviors in psychiatrically hospitalized adolescents pre- and post- COVID-19: A historical chart review and examination of contextual correlates

[doi: 10.1016/j.jadr.2021.100100](https://doi.org/10.1016/j.jadr.2021.100100)

Resumo

Background: Psychiatrically vulnerable adolescents may be at heightened risk for suicide during the COVID-19 pandemic. This study characterizes suicidal ideation (SI) and suicide attempts (SA) in a sample of adolescents psychiatrically hospitalized during COVID-19. Rates of SI and SA are compared to a historical hospital sample from a matched period in the year prior. Associations between specific stressors and COVID-related SI are also explored. Methods: This cross-sectional chart review utilizes hospital intake data, including self-reports of SA, SI (general and COVID-related), and COVID-specific stressors. Results: SA and SI ratings were higher in the COVID-19 sample compared to the historical sample. Stressors related to missing special events, financial problems, in-home conflict, and changes in living circumstances were associated with COVID-related SI. Among first-time admissions, several interpersonal stressors were linked to COVID-related SI. Limitations: Analyses were cross-sectional, limiting our ability to draw conclusions about causality. Conclusions: This study offers preliminary evidence that COVID-19 may be contributing to suicidal thoughts and behaviors in high-risk adolescents.

Referência

THOMPSON, E.C.; THOMAS, S.A.; BURKE, T.A.; NESI, J.; MACPHERSON, H.A.; BETTIS, A.H.; KUDINOVA, A.Y.; AFFLECK, K. ; HUNT, J.; WOLFF, J.C. J Affect Disord Rep. 2021 Apr; 4: 100100.

2. Suicide during COVID-19 and other major international respiratory outbreaks: A systematic review

[doi: 10.1016/j.ajp.2020.102509](https://doi.org/10.1016/j.ajp.2020.102509)

Resumo

INTRODUCTION: Coronavirus disease 2019 (COVID-19) was recently declared a pandemic by the WHO. This outbreak threatens not only physical health but also has significant repercussions on mental health. In recent world history, major infectious outbreaks were associated with severe mental health sequelae, including suicide. In this study, we systematically review the literature on suicidal outcomes during major international respiratory outbreaks, including COVID-19. We reviewed descriptive and analytic articles addressing suicide during major international respiratory outbreaks. We searched PubMed, Medline, Embase, Scopus, and PsycInfo databases and then utilized an independent method for study selection by a pair of reviewers. Two reviewers completed data abstraction and conducted a narrative summary of the findings. Our search generated 2,153 articles. Nine studies (three descriptive, five analytical, and one with mixed methodology) were eligible. The included studies were heterogeneous, divergent in methods, and with a low degree of evidence. Deducing an association between pandemics, suicide, and suicide-related outcomes remains thus poorly supported. Future research with better methodological characteristics, the use of longitudinal studies, and a focus on suicide as the primary outcome would allow for an in-depth understanding and formulation of the scope of this problem.

Referência

KAHIL, K.; CHEAITO, M.A.; EL HAYEK, R.; NOFAL, M.; EL HALABI, S.; KUDVA, K.G.; PEREIRA-SANCHEZ, V.; EL HAYEK, S. Asian J Psychiatr. 2021. Feb; 56:102509.

3. Theoretical Mapping of Suicidal Risk Factors During the COVID-19 Pandemic: A Mini-Review.

[doi:10.3389/fpsy.2020.589614](https://doi.org/10.3389/fpsy.2020.589614)

Resumo

Suicide prevention in times of COVID-19 pandemic has become more challenging than ever due to unusual circumstances. The common risk factors identified with regard to suicidal behavior are fear of COVID-19, economic instability, poor access to healthcare facilities, pre-existing psychiatric disorders, and social disconnect. The studies done so far have reported either case studies or have made an effort to understand the risk factors. An understanding of the underlying causal pattern from existing theories, behind these risks, will enable adopting appropriate prevention mechanisms. Hence, this review examines evidence related to risk factors of suicides that occurred during COVID 19 and discusses it in the light of three major theoretical approaches: interpersonal model, stress diathesis model, and cognitive model. The insights obtained from the three viewpoints reveal that perceived burdensomeness, thwarted belongingness, stress sensitivity, cognitive errors such as magnification, catastrophic thinking, arbitrary inference, and mind-reading are likely reasons behind these risk factors for suicide. It is suggested that awareness regarding COVID-19 stressors, use of community-based approaches like gatekeeper training, and brief online psychotherapy by using techniques of mindfulness, interpersonal psychotherapy, and cognitive behavior therapy can be useful in reducing suicide risk during COVID-19.

Referência

RAJ, S.; GHOSH, D.; SINGH, T.; VERMA, S.K. Arya YK. Front Psychiatry. 2021 Jan 22; 11:589614.

4. The three frontlines against COVID-19: Brain, Behavior, and Immunity

[doi:10.1016/j.bbi.2021.01.030](https://doi.org/10.1016/j.bbi.2021.01.030)

Resumo

The pandemic outbreak of coronavirus disease 2019 (COVID-19) is raising global anxiety and fear of both real and perceived health threat from the virus. Overwhelming evidence shows infected patients experiencing neuropsychiatric complications, suggesting that the "psychoneuroimmunity" model might be beneficial in understanding the impact of the virus. Therefore, this Special Issue on "Immunopsychiatry of COVID-19 Pandemic" was launched immediately after the pandemic was declared, with the first paper accepted on the March 25th, 2020. A total of ninety-three papers were accepted, the last one was on the July 10th, 2020 when the initial acute phase started declining. The papers of this Special Issue have illuminated the social impact, psychopathology, neurological manifestation, immunity responses, and potential treatments and prevention on COVID-19. For example, anxiety disorders, mood disorders, and suicidal ideation are most common psychiatric manifestations. COVID-19 infection can have central and/or peripheral nervous system symptoms, including headache, sleep disorders, encephalopathy, and loss of taste and smell. A "three-steps" Neuro-COVID infection model (neuro-invasion, clearance and immune response) was established. The current therapeutic interventions for COVID-19 include supportive intervention, immunomodulatory agents, antiviral therapy, and plasma transfusion. Psychological support should be implemented, improving the psychological wellbeing, as well as to enhance psychoneuroimmunity against COVID-19 development. The ethnicity effect might be related to differences in susceptibility to COVID-19 and access to health care (including intensive care) across ethnicities. Our analysis supports an urgent effort on the part of Brazilian authorities to consider how the national response to COVID-19 can better protect Pardo and Black Brazilians, as well as the population of poorer states, from their higher risk of dying of COVID-19.

Referência

WANG, S.C.; SU, K.P.; PARIANTE, C.M. Brain Behav Immun. 2021. Feb 4: S0889-1591(21)00034-9.

5. Peripandemic psychiatric emergencies: impact of the COVID-19 pandemic on patients according to diagnostic subgroup

[doi:10.1007/s00406-020-01228-6](https://doi.org/10.1007/s00406-020-01228-6)

Resumo

On March 11th, 2020, the outbreak of coronavirus disease 2019 (COVID-19) was declared a pandemic. Governments took drastic measures in an effort to reduce transmission rates and virus-associated morbidity. This study aims to present the immediate effects of the pandemic on patients presenting in the psychiatric emergency department (PED) of Hannover Medical School. Patients presenting during the same timeframe in 2019 served as a control group. A decrease in PED visits was observed during the COVID-19 pandemic with an increase in repeat visits within 1 month (30.2 vs. 20.4%, $pBA = 0.001$). Fewer patients with affective disorders utilized the PED (15.2 vs. 22.2%, $pBA = 0.010$). Suicidal ideation was stated more frequently among patients suffering from substance use disorders (47.4 vs. 26.8%, $pBA = 0.004$), while patients with schizophrenia more commonly had persecutory delusions (68.7 vs. 43.5%, $pBA = 0.023$) and visual hallucinations (18.6 vs. 3.3%, $pBA = 0.011$). Presentation rate of patients with neurotic, stress-related, and somatoform disorders increased. These patients were more likely to be male (48.6 vs. 28.9%, $pBA = 0.060$) and without previous psychiatric treatment (55.7 vs. 36.8%, $pBA = 0.089$). Patients with personality/behavioral disorders were more often inhabitants of psychiatric residencies (43.5 vs. 10.8%, $pBA = 0.008$). 20.1% of patients stated an association between psychological well-being and COVID-19. Most often patients suffered from the consequences pertaining to social measures or changes within the medical care system. By understanding how patients react to such a crisis situation, we can consider how to improve care for patients in the future and which measures need to be taken to protect these particularly vulnerable patients.

Referência

SEIFERT, J.; MEISSNER, C.; BIRKENSTOCK, A.; BLEICH, S.; TOTO, S.; IHLEFELD, C.; ZINDLER, T. Eur Arch Psychiatry Clin Neurosci. 2021 Feb 5:1-12.

6. COVID-19 Pandemic and Mental Health of Vulnerable Two Groups: Developmental Trauma of the Child-Adolescents and Work Disaster of Health Care Workers.

[doi: 10.4068/cmj.2021.57.1.7.](https://doi.org/10.4068/cmj.2021.57.1.7)

Resumo

COVID-19 has spread worldwide. People are struggling to adjust to a new normal, but changes in their daily routines are also causing stress. A person may feel depressed, uneasy, or suicidal and may complain of symptoms such as panic attacks, post-traumatic stress disease (PTSD), psychosis, obsessive-compulsive disorder, or paranoia when personal resilience cannot effectively process the stress. Children, adolescents, and health care workers are especially psychologically vulnerable groups in the pandemic calamity situation; therefore, a long-term intervention plan is necessary for them. When intervening with children and adolescents, it should be considered that each individual has different ways of expressing stress according to the developmental level of cognition, language, and emotion, and taking into account these developmental levels, it is necessary to help them achieve developmental tasks appropriate for their age. Health care workers feel psychological pain from problems such as the risk of becoming infected, the risk of passing the virus to their families, overwork, isolation, and stigma. Therefore, it is necessary to help them recover themselves by supplying personal protective equipment and providing the most basic resources necessary for adequate rest, work-life balance, and childcare.

Referência

NAM, S.H.; YANG, J.C. Chonnam Med J. 2021 Jan;57(1):7-12.

7. Racial and Ethnic Disparities in the Prevalence of Stress and Worry, Mental Health Conditions, and Increased Substance Use Among Adults During the COVID-19 Pandemic - United States, April and May 2020.

[doi:10.15585/mmwr.mm7005a3](https://doi.org/10.15585/mmwr.mm7005a3)

Resumo

In 2019, approximately 51 million U.S. adults aged ≥ 18 years reported any mental illness, * and 7.7% reported a past-year substance use disorder† (1). Although reported prevalence estimates of certain mental disorders, substance use, or substance use disorders are not generally higher among racial and ethnic minority groups, persons in these groups are often less likely to receive treatment services (1). Persistent systemic social inequities and discrimination related to living conditions and work environments, which contribute to disparities in underlying medical conditions, can further compound health problems faced by members of racial and ethnic minority groups during the coronavirus disease 2019 (COVID-19) pandemic and worsen stress and associated mental health concerns (2,3). In April and May 2020, opt-in Internet panel surveys of English-speaking U.S. adults aged ≥ 18 years were conducted to assess the prevalence of self-reported mental health conditions and initiation of or increases in substance use to cope with stress, psychosocial stressors, and social determinants of health. Combined prevalence estimates of current depression, initiating or increasing substance use, and suicidal thoughts/ideation were 28.6%, 18.2%, and 8.4%, respectively. Hispanic/Latino (Hispanic) adults reported a higher prevalence of psychosocial stress related to not having enough food or stable housing than did adults in other racial and ethnic groups. These estimates highlight the importance of population-level and tailored interventions for mental health promotion and mental illness prevention, substance use prevention, screening and treatment services, and increased provision of resources to address social determinants of health. How Right Now (Qué Hacer Ahora) is an evidence-based and culturally appropriate communications campaign designed to promote and strengthen the emotional well-being and resiliency of populations adversely affected by COVID-19-related stress, grief, and loss (4).

Referência

McKnight-Eily, L.R.; Okoro, C.A.; Strine, T.W.; Verlenden, J.; Hollis, N.D.; Njai, R.; Mitchell, E.W.; Board, A.; Puddy, R.; Thomas, C. MMWR Morb Mortal Wkly Rep. 2021 Feb 5;70(5):162-166

8. Measuring the impact of COVID-19 on mental health as a preliminary procedure in primary care provision: A cross-sectional study using COVID-19 anxiety scale.

[doi:10.4103/jfmpe.jfmpe_1244_20](https://doi.org/10.4103/jfmpe.jfmpe_1244_20)

Resumo

It is imperative to acknowledge that COVID-19 poses significant burden on the psychological well-being of people. With implementation of lockdown and measures like quarantine, the mental health of people is affected, and the associated problems may range from depression to suicidal ideation. With this background, the aim of this study was to assess COVID-19 anxiety among general population of the state of Andhra Pradesh. Materials and Methods: This cross-sectional study assessed the COVID-19 anxiety among the population of Andhra Pradesh using COVID-19 Anxiety Scale (CAS-7), a seven-item validated psychometric instrument which assesses the cognitive, emotional, and physiological dimensions of COVID-19 anxiety, using a semantic differential scale. The final sample constituted 1,346 participants. Statistical analysis was done using SPSS version 20 software (IBM SPSS statistics for Windows version 20, Armonk, NY, USA). Results: The mean age of the study participants was 36.13 ± 10.2 years, and 55.8% were males. The mean CAS-7 score in this study was found to be 18.9 ± 6.4 . The item with highest mean scores was: "How concerned are you when people cough or sneeze because of the fear that you may acquire COVID-19?" No significant differences in CAS-7 scores were found based on gender, educational qualification of the participants, while significant differences were observed based on place of residence, presence of COVID-19 affected individuals in close surroundings, tobacco, and alcohol consumption. Conclusion: The results of this study inform that it is imperative for authorities and health care professionals to focus on the mental health aspect of COVID-19 and arrange for necessary support mechanisms.

Referência

MEESALA, N.; HARSHA, G.; KANDIKATLA, P.; KARTEEKVARMA, P.V.; NADAKUDITI, S.R.; KAKARAPARTHI, S.K. J Family Med Prim Care. 2020. Nov 30;9(11):5554-5558.

9. Assessment of Suicide in Japan During the COVID-19 Pandemic vs Previous Years.

doi: [10.1001/jamanetworkopen.2020.37378](https://doi.org/10.1001/jamanetworkopen.2020.37378).

Resumo

We Importance: There are concerns that suicide rates may have increased during the coronavirus disease 2019 (COVID-19) pandemic. **Objective:** To assess whether suicide rates in Japan increased in April through November 2020 compared with previous years.

Design, setting, and participants: This cross-sectional study used national data obtained from the Ministry of Health, Labor and Welfare from 2016 to 2020 on the monthly number of individuals who died of suicide in Japan from January to November of 2016 to 2020. **Exposure:** 2020 vs previous years. **Main outcomes and measures:** The main outcome was monthly suicide rates, calculated as the number of individuals who died of suicide divided by the total population. A difference-in-difference regression model was used to estimate the change in monthly suicide rates in April to November 2020 vs these months in 2016 to 2019. **Results:** Analyses included 90 048 individuals (61 366 [68.1%] men) who died of suicide from 2016 to 2020. The difference-in-difference analysis of men showed that there was no increase in suicide rates from April through September 2020 compared with these months in 2016 to 2019, but that suicide rates were increased in October (difference-in-difference, 0.40 [95% CI, 0.14 to 0.67] suicide deaths per 100 000 population) and November (difference-in-difference, 0.34 [95% CI, 0.07 to 0.60] suicide deaths per 100 000 population). Among women, suicide rates in 2020 compared with 2016 to 2019 increased in July (difference-in-difference, 0.24 [95% CI, 0.09 to 0.38] suicide deaths per 100 000 population), August (difference-in-difference, 0.30 [95% CI, 0.16 to 0.45] suicide deaths per 100 000 population), September (difference-in-difference, 0.29 [95% CI, 0.15 to 0.44] suicide deaths per 100 000 population), October (difference-in-difference, 0.62 [95% CI, 0.48 to 0.77] suicide deaths per 100 000 population), and November (difference-in-difference, 0.29 [95% CI, 0.15 to 0.44] suicide deaths per 100 000 population). In secondary analyses in which the suicide rates of 2020 were compared with the expected rates based on trends from 2011 to 2019, the increases in suicide rates were most pronounced among men aged younger than 30 years (eg, November: observed vs expected rate ratio [RR], 1.48 [95% CI, 1.26-1.71]) and women aged younger than 30 years (eg, October: observed vs expected RR, 2.14 [95% CI, 1.76 to 2.52]) and 30 to 49 years (eg, October: observed vs expected RR, 2.30 [95% CI, 2.01 to 2.58])

Referência

SAKAMOTO, H.; ISHIKANE, M.; GHAZNAVI, C.; UEDA, P. JAMA Netw Open. 2021 Feb 1;4(2): e2037378.

10. Título: Impact of the COVID-19 Pandemic on Psychiatric Admissions to a Large Swiss Emergency Department: An Observational Study

[doi:10.3390/ijerph18031174.](https://doi.org/10.3390/ijerph18031174)

Resumo

The coronavirus disease 2019 (COVID-19) pandemic is a public health emergency with profound mental health consequences. The psychiatric emergency department (ED) plays a key role during this mental health crisis. This study aimed to investigate differences in admissions at a Swiss psychiatric ED from 1 April to 15 May during a "pandemic-free" period in 2016 and a "during-pandemic" period in 2020. The study included 579 consultations at psychiatric ED in the "during-pandemic" period and 702 in the "pandemic-free" period. Sociodemographic and clinical characteristics were compared, and logistic regression analysis was performed to identify variables associated with psychiatric admissions during the pandemic. A reduction in total psychiatric ED admissions was documented during COVID-19. Logistic regression analysis predicted the independent variable (ED admission during the pandemic) and estimated odds ratio (OR) for being unmarried/not in a relationship, arrival in an ambulance, suicidal behavior, behavioral disorders and psychomotor agitation. Though only statistically significant in bivariate analysis, patients were also more likely to be involuntarily hospitalized. This picture appears to be reversed from a sociodemographic and clinical point of view to our observation of psychiatric ED consultation in 2016. These findings highlight that the reduction in psychiatric ED admissions during the pandemic seems to be associated with living alone and more severe psychopathologies, which must alert psychiatrists to ensure access to mental health care in times of pandemic.

Referência

AMBROSETTI, J.; MACHERET, L.; FOLLIET, A.; WULLSCHLEGER, A.; AMERIO, A.; AGUGLIA, A.; SERAFINI, G.; PRADA, P.; KAISER, S.; BONDOLFI, G.; SARASIN, F.; COSTANZA, A. Int J Environ Res Public Health. 2021 Jan 28;18(3):1174.



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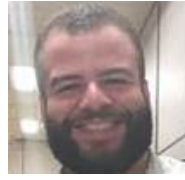
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