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MENTAL HEALTH CARE AND TREATMENT OPTIONS DURING COVID-19 PANDEMIC

COVID-19 is a novel corona virus which is highly contagious and has been identified as responsible for the recent global pandemic. It is, therefore, essential that mental and behavioural healthcare facilities implement plans to protect patients, caregivers and staff from infection to the greatest extent possible.

During this period of COVID-19 pandemic, providing in-person mental health care service is associated with following risks and challenges.

- * Risk of transmission during the gathering of patients in a confined space e.g. registration or out-patient waiting areas
- Physical contact with door knobs, chairs, benches etc at hospital
- * Risk of exposure during travel e.g. public transport

At the same time, the mental health care needs may be more during the pandemic. Further, there is an increased risk of relapse of psychiatric illness due to an inability to visit the hospital and consequent non-availability of prescription advice. Also, there is an emergent need to address the vulnerable population at risk of developing mental disorder during the time of pandemic.

Following are some of the considerations aimed at reducing the likelihood of disease transmission, while providing for mental health care needs of patients.

• Tele-psychiatry services

It is the process of delivering mental health care services from a distance by mental health professionals using information and communication technologies. A mental health professional can provide a range of services including evaluation, therapy, patient education and medication management via a tele-consult (audio/video/text or email).

These services have the advantage of providing medical advice without exposing the patients, their families and service providers to risk of infection. Service provider can provide a digital copy of a signed prescription or e-Prescription to the patient via email or any messaging platform

As per Govt of India telemedicine guidelines released on March 25, 2020, a few limitations are placed on certain medicines depending upon the type and mode of tele-consultation, and certain categories of medications cannot be prescribed (Schedule X of Drugs and Cosmetic Act/Rules; Narcotic drugs as listed in NDPS Act, 1985).

Patients who are stable or by and large maintaining well may be encouraged to take professional advice via tele-consultation services. Telepsychiatry is also suited for individuals with mild to moderate symptoms. In cases with severe or emergent symptoms with possible risk to self or others, the service provider must advice the patients and caregivers to visit the nearest casualty or emergency services.

Emergency psychiatric services

The emergency psychiatric services are available round-the-clock which can be availed for patients who show a significant worsening of their symptoms, or who are unmanageable at home or those with suicidal risk or risk of violence towards others. Patients who are experiencing significant or distressing withdrawal symptoms associated with alcohol or other substance use are also a candidate for

emergency care. The psychiatrist on call can evaluate the patient, give appropriate advice, prescribe injectable and/or oral medication and observe the patient before deciding on subsequent management.

• Inpatient facilities

These may be reserved for those in whom symptoms pose an imminent risk. In these extraordinary times of risk of COVID19 transmission, it is preferable that in-patient treatment be utilized only for those with emergency situation, limited to minimum essential duration. Routine admissions may be postponed in view of risk of restricted space in general wards with lot of common or shared facilities. While admitting a patient from casualty, care should be taken to screen and test those who may have been exposed to a family member or relative with COVID-19, along with similar policies for caregivers and visitors to psychiatric ward.

• Out-patient facilities

As and when permitted to be open by govt orders, these may be availed for routine care especially if telepsychiatry services are not deemed to be adequate for particular mental health care needs e.g. for patients requiring prescription of schedule X drugs, or patients requiring physical examination or patients who have been advised on teleconsultation by their mental health professional to visit outpatient clinic for further management, etc.

General precautions and advice, including social distancing, wearing a mask, hand hygiene and cough etiquette must be followed strictly during a visit to out-patient treatment facility.

Reference:

• Telemedicine practice guidelines: https://www.mohfw.gov.in/pdf/Telemedicine.pdf