

Mental health & COVID-19: OMP approach

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The human experience of COVID-19



Symptoms at work

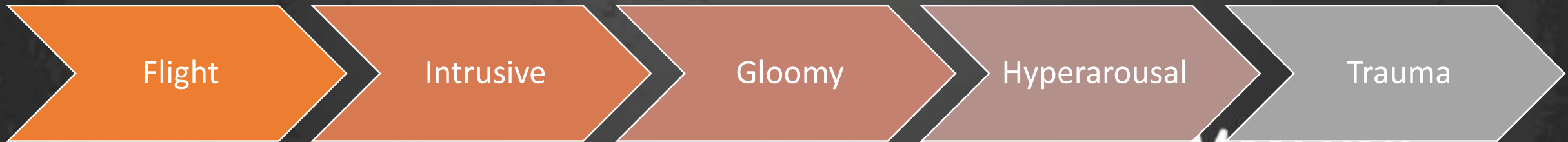
- Remote work and personality
- Concentration
- Hopelessness and depressed mood
- Impulse control - substances
- Avoidance of triggers
- Hyperarousal and fatigue of anxiety
- Vegetative features
- Drive and motivation



Post-traumatic stress (disorder)

- PCL-5 to measure FIGHT
- COVID-19 as traumatic event
 - Trauma of symptoms and treatment
 - Witnessing people suffer from/struggle against/die from
 - Fear of infection, isolation, stigmatization

21% of HCW experience PTSD (2003 SARS, 2009 H1N1, occupational HIV exposure) of which 40% experience PTSD 3 years after



Psychiatric Diseases

- Mood disorders (BDI-II ASRM)
- Anxiety disorders (BAI; PCL-5)
 - Social anxiety
 - Health anxiety
 - Panic disorder
 - Generalized anxiety
- Substance use (CAGE)
 - Caffeine
 - Dagga
 - Street drugs
- Cognitive decline & GMC (MMSE)
- Psychosis
- Personality disorders (MMPI)
 - **Mad** (schizoid, schizotypal, paranoid)
 - **Bad** (borderline, histrionic, narcissistic, antisocial)
 - **Sad** (obsessive, dependent, avoidant)

Psychometric properties and use in SA

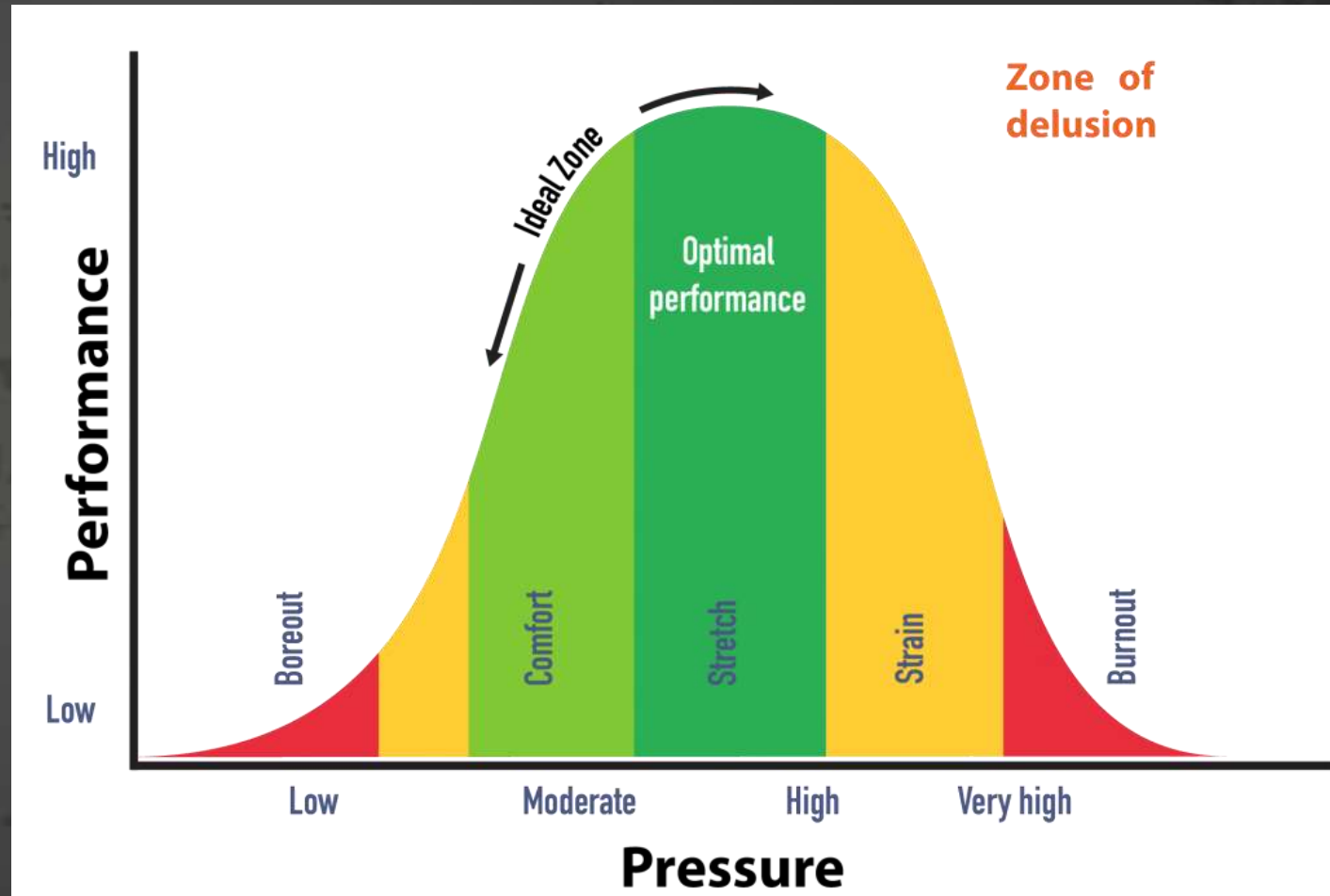
Measure	Comments
Beck Anxiety Inventory (BAI)	.92 see this
Beck Depression Inventory II (BDI-II)	.86 see this
Posttraumatic Stress Disorder Check List-5 (PCL-5)	.94 see this and this
CAGE	.80 – .95 see this
Mini Mental State Examination	Variable see this and this
Minnesota Multiphasic Personality Inventory-2 (MMPI-2)	Must be administered by a trained clinician
Altman Self-rating Mania Scale	See this

Gold standard remains a clinical interview



Yuppie flu & other vague conditions

- Adjustment disorders
- Pain disorder
- Yuppie flu
- Burnout
- Compassion fatigue
- Secondary trauma
- Pain disorder
- Malingering/secondary gain



Treatment and prognosis

Disease	Evaluation	Treatment	Return to work
Depression	BDI	12 wks therapy (CBT & behaviour activation), meds	Suicide risk
Bipolar	ASRM	Medication & therapy ongoing	Shifts
Anxiety	BAI	6 - 12 wks therapy (CBT & exposure)	Progressive exposure
PTSD	CAPS		
Substance	CAGE	Variable	Risk
Cognitive decline	MMSE	Defer	Defer
Personality d/o	MMPI	Long term	Varies (teams)

Case studies

Bipolar long
distance truck
driver

Traumatized
teacher drinking

Depressed remote
worker going
through divorce

Admin tik addict
at health practice

Panic attacks at
store front
(COVID)

Allied health
chronic fatigue

Borderline PD
educator team
dynamics

GAD tech
specialist takes
time off

Psychological First Aid

- Safe
 - Compassionate contact
 - Feeling safe at work (also emotionally)
- Calm
 - Breathing and other self-regulation
- Capable
 - Give back control
 - Current needs e.g. Place to stay/isolate
- Connected
 - Social support
 - Referrals
- Hopeful

How you respond to somebody's story can be more harmful than the experience itself



MANZINI
Health

So now what?

- Psychological first aid: beware of pathologizing a normal reaction to abnormal events
- EAP and mental health professionals



Levels of Prevention

- Primary: Whole workforce programs – e.g EAP
- Secondary: “routine screening” – fitness to work evaluation
- Tertiary: Incapacity evaluation

FTW = Ability x Endurance x Risk

