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## Anxiety and Depression Scores Amongst NCHDs During the SARS-CoV-2 Pandemic

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Dear Sir,

I was one of many healthcare staff across Ireland reallocated to a different role during the first wave of the Covid-19 pandemic in 2020. For 3 months of my medical internship year, I worked within the Occupational Health Department and through this witnessed the enormous psychological impact the pandemic placed on healthcare staff. Pre-existing stressors within our health system were exacerbated such as understaffing due to sick leave and increasing numbers of critically unwell patients with the addition of new workplace stressors including feelings of inadequacy performing new tasks or new roles, lack of adequate breaks from personal protective equipment (PPE) and a fear of infecting loved ones.<sup>1</sup>

Through an anonymous online survey distributed to Non Consultant Hospital doctors (NCHDS) within an Irish tertiary centre, we aimed to assess the prevalence of anxiety and depression during the first wave of the covid-19 pandemic amongst NCHDs and therefore highlight a need for further action and psychological support for NCHDS post-pandemic. The survey was a 20-item questionnaire which included the Hospital anxiety and depression (HADS) score, A self-reported health question and the work-ability index score. Sociodemographic data was also collected including gender, level of training and marital status.

A total of 82 NCHDS responded to the survey with interns making up the majority of the respondents at 72% and also included 5% SHOs and 22% registrars making up the total. The median HADS score was 12.5 (range 4-27) with the highest level being in registrars at 15.5. The median anxiety score for the whole group was 8, which is determined to be mild anxiety. The overall median depression score was 5 which does not meet the criteria for depression. The majority of those surveyed described their general health as very good (n=33%,40%). Only one NCHD (1.2%) described their general health as poor and only 4 (4.9%) as fair. Overall, the median workability score was 6 (range 3-10) with the lowest scores being seen in females with a median of 6 compared to 7 in males.

This small study highlights the psychological impact of the pandemic on NCHDs during the first wave of Covid-19 in early 2020 and similar results have been reflected worldwide in various studies amongst doctors<sup>3</sup>. It has been recognized that global pandemics such as SARS-COV2 can have long lasting psychological impacts. In a study of long-term psychological side effects from Canadian frontline staff who worked during the 2003 SARS Pandemic, Data showed that 29-35% of these hospital workers experienced a high degree of post event stress and trauma.<sup>3</sup>

As we progress through the vaccine roll out and as inpatient case numbers fluctuate, it is essential to avoid burnout and low morale amongst medical staff <sup>4</sup>. Many of the current stressors within the system will only be exacerbated as we struggle to catch up with long waiting lists and delayed investigations thus it is essential that institutions put in place tangible measures to support workers psychological wellbeing during these extraordinary times.

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