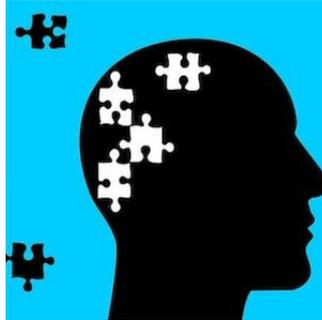

Mental Disorders and Risk of Severe COVID-19



Over the last few months, several risk factors have been identified for severe COVID-19 illness and mortality. These include age, male sex, obesity and cardiovascular disease. Recent evidence from a meta-analysis also demonstrates an increased risk of severe or fatal COVID-19 among patients with a pre-existing mental disorder. Since then, several studies have found that patients with psychiatric disorders are also at an increased risk of severe COVID-19. However, results remain conflicting.

A study was conducted to assess the risks of COVID-19-related mortality, hospitalisation and ICU admission associated with pre-existing mental disorders and specific diagnostic categories of mental disorders as well as exposure to certain specific psychopharmacological drugs.

Eight hundred forty-one studies were identified for the purpose of this analysis, of which 33 were included in the systemic review and 23 were included in the meta-analysis. A total of 1,469,731 patients with COVID-19 were included, of whom 43,938 had mental disorders.

Findings show that the presence of any mental disorder was associated with an increased risk of COVID-19 mortality. This association was observed for psychotic disorders, mood disorders, substance use disorders and intellectual disabilities and developmental disorders. No such association was found for anxiety disorders. COVID-19 mortality was associated with exposure to antipsychotics, anxiolytics, and antidepressants.

Mental disorders were found to be associated with increased risk for hospitalisation. However, no significant association was found with mortality for ICU admission.

These findings show that pre-existing mental disorders, specifically psychotic and mood disorders, and exposure to antipsychotics and anxiolytics were associated with COVID-19 mortality. There is thus a need to use targeted approaches to manage and prevent COVID-19 in at-risk patient groups.

Source: [The Lancet](#)

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