



ASSESSMENT OF INDICATORS OF ANXIETY AND DEPRESSION IN PATIENTS AFTER COVID-19

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Abstract:

The indicators of anxiety and depression of patients after Covid-19, which is one of the medical and social problems. The degree of anxiety and depression was assessed using modern neuropsychological scales. Based on the obtained results, an algorithm for early diagnosis was developed.

Keywords: Covid-19, anxiety, depression

Currently, the coronavirus infection (Covid-19) is a very urgent problem in all countries of the world in the form of a pandemic. This viral infection has caused the death of many patients, and in some patients it has aggravated the course of certain diseases, increased disability and, in this regard, stabilized severe socio-economic problems. Covid-19 infection strongly affected the central nervous system as well as all systems of the body, including cerebrovascular diseases, peripheral nervous system diseases, epilepsy and neurodegenerative diseases, increased anxiety and depression. In patients, comorbidities accelerated the course of the disease and stabilized the disability [6,7,11,12].

Covid-19 is increasing anxiety in the population and leading to mental health disorders in individuals. Therefore, experts in the field have realized the unprecedented need to study and recognize these difficult mental states, and have conducted several studies. Evidence shows that individuals with Covid-19 experience anxiety, depression, psychosis, anxiety, trauma, suicidal ideation and panic attacks. It is known that higher than normal levels of anxiety weaken the immune system and consequently increase the risk of viral infection [15,16,17,22].

Studies show that during the Covid-19 pandemic, the news transmitted by various social networks and mass media is causing people to experience more anxiety. A lot of the news is sad, and sometimes it's related to rumours, and it's natural for a person exposed to the news of Covid-19 to have a heightened level of anxiety. Misinformation and false reports of Covid-19 may exacerbate hypotensive symptoms in the general

population [1,2,5]. That said, the number of people recovering from the disease and the drugs and vaccines being developed against the virus can reduce the level of concern. In this regard, mental health experts recommend promoting healthy behavior.

According to statistics, 18% of people infected with Covid-19 develop mental health problems such as depression, anxiety or dementia. Such problems can occur within 3 months after diagnosis. The risk of such mental illness is twice as high in people without Covid-19 [8,9,13,21]. The relationship between Covid-19 infection and mental illness symptoms is actually very complex. Experts suggest that Covid-19 is associated with higher mental health problems. Although several studies have shown that Covid-19 patients commonly experience anxiety, insomnia, depression, and stress, this process is still ongoing [3,4,10,14]. Noting that the coronavirus causes delirium, anxiety, depression, insomnia, and memory problems, we must not forget that any other virus that manages to settle in the human body can attack the central nervous system, cause hypoxic damage to the brain, and affect physical and mental health [23,24].

Naturally, a person suffering from a Covid-19 infection will experience stress and anxiety. Especially the coronavirus with sick something of the patient death second one depression in the patient and worry strengthens. Diagnosis of Covid-19 and treatment another medical to the circumstances relatively more spiritual injury deliver can. Of this some reasons Covid-19 infection more heavy to the disease rotation probability existence, this infection new disease



treatment __ and Izolyats iga relatively uncertainties existence [18,19,20].

Research to the results according to 2018 relatively in people anxiety (20%) and depression (16%) increased . The most spiritual damage those who see are between 16 and 24 years old has been women and young people organize is enough So so , this restless period public psychological problems understand , check and that 's right to do practical important have

What we say possible spread of the virus prevention get according to to the instructions compliance to do , to the needy help show to others relatively soothing to the effect have to be ie those around panic inciting if so , to them to the situation peace of mind point of view look i with to his views help to give to loved ones relatively kind to be too _ worry and to depression not to fall and them that 's right of doing is one of the methods . Taking into account the

above, it is possible to draw a conclusion about the necessity of this research work.

THE PURPOSE OF THE STUDY. Study of levels of anxiety and depression in patients with covid-19, developing principles of early diagnosis.

RESEARCH MATERIAL AND ITS METHODS. 86 patients with Covid-19 were examined for the research work. 42 of the examined patients were men (48.8%) and 44 were women (51.2%). The 8th version of the recommendations of the Ministry of Health of the Republic of Uzbekistan on Covid-19 divided patients into severity levels: 41 (47.6 %) patients with mild Covid-19 disease were included in group I ; Covid-19 disease to group II 31 (36 , 0 %) patients with moderate severity ; Group III patients with severe disease 14 people (16.4 %) . Patients in all groups were analyzed by age and gender, Table 1

1-Distribution of patients by age and weight

Young	Youth (18-44)	Middle-aged (45-59 years old)	Elderly (60-74 years old)	Total
	n%	n%	n%	n %
Group I	26 63.4	10 24.4	5 12.2	41 47.6
Group II	8 25.8	9 29.1	14 45.1	31 36.0
Group III	3 21.4	5 35.7	6 42.9	14 16.4
Total	37 43.0	24 27.9	25 29.1	86 100

Patients underwent a comprehensive clinical examination, somatic and neurological condition was assessed, as well as detailed information on the complaint, anamnestic data, subjective and objective symptoms of the disease. A 21-item Hamilton scale questionnaire was used to determine depression levels. Anxiety levels were assessed using the Spielberger-Hanin Personality (ShX) and Reactive Anxiety (RX) scales. The Spielberger-Hanin scale consists of 40 questions, and two parts were used, namely Questionnaire A describing reactive anxiety (RX) and Questionnaire B describing personal anxiety. The obtained results were statistically analyzed.

THE RESULTS OBTAINED. Almost all coronavirus patients show varying degrees of symptoms of anxiety

and depression. That's why we first analyzed the levels of depression according to Hamilton's scale in patients with coronavirus. According to the questionnaire, 16 of the 86 patients (18.6%) had no signs of depression, i.e. 0-7 points, and 32 patients (37.2%) had mild depression, 8-13 points, 28 patients (32.5 %) had moderate depression, 14-17 points, and 10 patients (11.7%) had severe depression, 18 points or more. In 79 patients with depression, this questionnaire averaged 13.8±4.2 points. Depression was observed in 32 patients (76.2%) in men, while this indicator was 38 (86.4%) in women . Mild depression (59.4%) prevailed in men, while moderate depression (65.7%) and severe depression (79.0%) were more common in women, Figure 1.

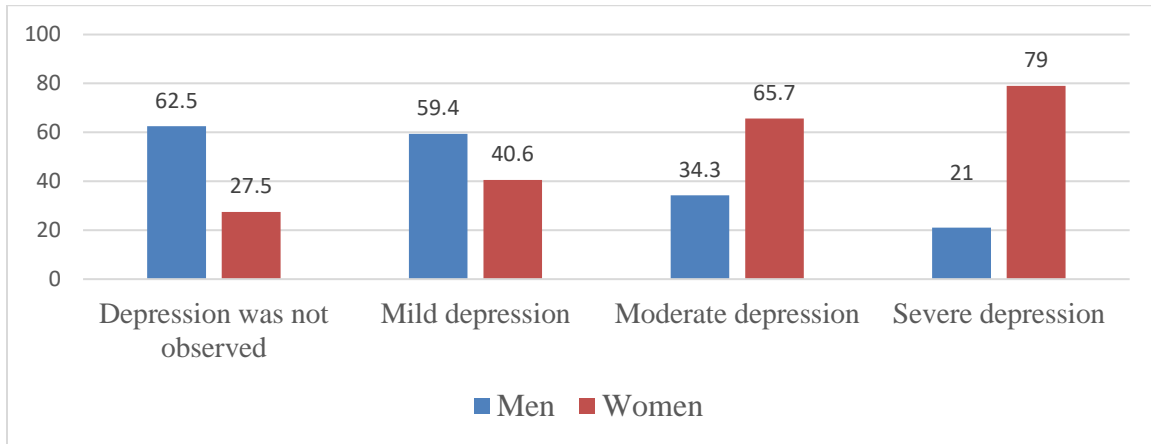


Figure 1. Distribution of depression levels by gender of patients

Next, we analyzed the types of anxiety in men and women. Anxiety was observed in 80 of 86 patients, in 92.8% of men and 93.1% of women. Reactive and personal anxiety types were compared in men and women. Among 39 anxious men, 74.3% had reactive anxiety and 25.7% personal anxiety, while 31.8% reactive anxiety and 68.2% personal anxiety were observed in women.

In the next step, we analyzed depression and anxiety scores by disease severity. Depression was not observed in 6 out of 41 patients (14.6%) in group I, i.e. 18-44 years old, 3 out of 31 patients in group II, i.e. 3 out of 45-59 years old (3.2%) and 14 out of 60 in group III. - 1 out of 74 patients (7.1%) had no symptoms of

depression. Depression was more common in group II and III patients, that is, older patients had moderate and severe depression, and mild depression prevailed in patients aged 18-44 years.

When the types of anxiety were compared for each group, reactive anxiety scores were higher in group I, while personality anxiety was higher in group III patients. 42.1% reactive anxiety and 57.9% personal anxiety were shown in the general group of patients. However, when comparing patients by gender, reactive anxiety (41.8 ± 2.7) was more common in men, while personal anxiety (45.6 ± 4.3) prevailed in women. In patients of group II and III, reactive and personal anxiety prevailed in women compared to men, Fig. 2.

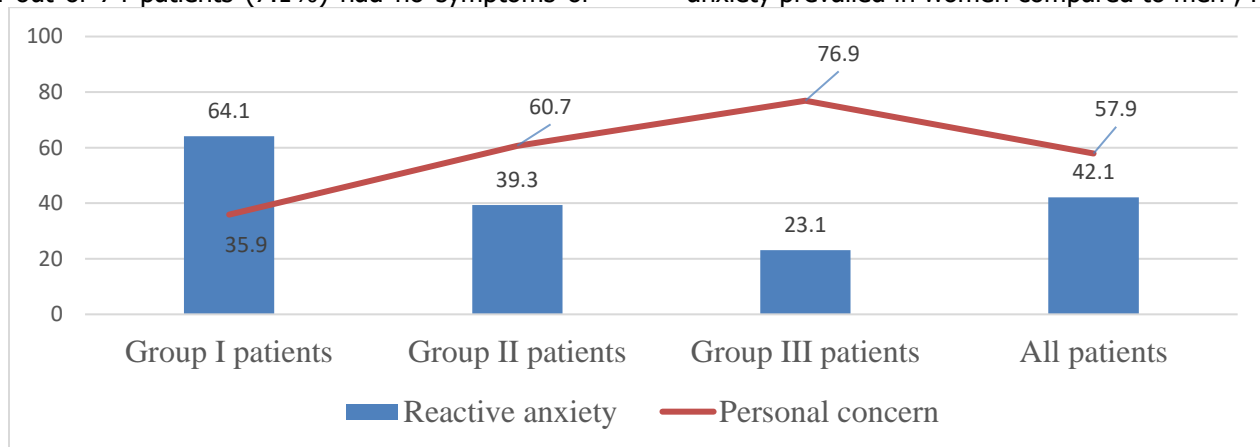


Figure 2. Frequency of occurrence of anxiety manifestations by groups

Thus, as the average age of patients increases, so does the severity of the illness, the levels of depression deepen, and personal anxiety tends to be more prevalent than reactive anxiety.

CONCLUSIONS.

1. Depression and anxiety are more common in patients with Covid-19, depending on the gender of the patients. Depression is more



common in women than men, while anxiety is more prevalent in men.

2. In patients with Covid-19, mild and moderate depression predominated in men, while moderate and severe depression was more common in women, and this was inversely related to the severity of the disease.
3. In patients with Covid-19, reactive and personal anxiety are intrinsically dependent on the gender and age of patients. If reactive anxiety predominates in relatively young people, personal anxiety begins to manifest more in older people, and this condition is associated with secondary diseases in patients.

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