

IMPACT OF COVID-19 PANDEMIC ON EMERGENCY ROOM PSYCHIATRIC PRESENTATIONS IN YOUTH

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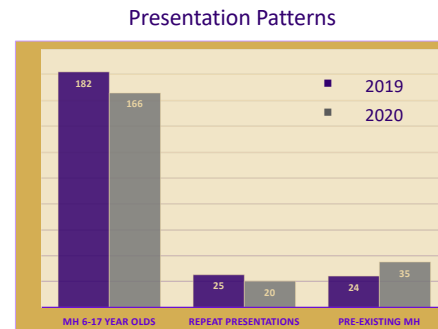
INTRODUCTION

COVID-19 was declared a pandemic by WHO in March 2020 causing widespread lockdown globally, with impact on multiple domains including mental well-being (1,2,3). Children and adolescents were uniquely affected, due to school closures, sudden loss of routine, isolation, and psychological distress in caregivers. Studies show people may modify or reduce help-seeking during the lockdown to avoid exposure to the disease (4,5)

The study aim was to determine patterns of emergency psychiatric presentations in children and adolescents before and after the lockdown in a community-based Emergency Room (ER) in South Alberta, Canada

Total ER Presentations

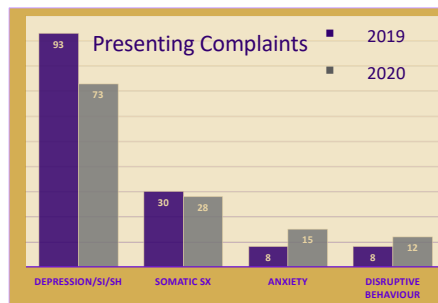
	2019	2020
All Causes Presentations	29 040	25 018
MH Presentations All Ages	2249	2091
MH Presentations Age 6-17Y	182	166
Repeat presentations	25 (17%)	20 (14%)
Previous MH Hx	24 (16%)	35 (26%)



METHODS

Retrospective data was obtained from ER electronic medical records for 6-17 year olds presenting with a mental health (MH) complaint at triage

Data collection covered two periods, 6 months between March - August 2019 (pre-lockdown) and was compared to March-August 2020 (post-lockdown)



RESULTS

Total MH presentations: 2249 and 2091 pre- and post-lockdown for all ages of which 182 and 166 respectively were child and adolescent MH presentations

- No significant difference in :
- Proportion of youth MH presentations (8%)
 - Modal age (17 years)
 - Mean age (14.5 years)
 - Disposition plan

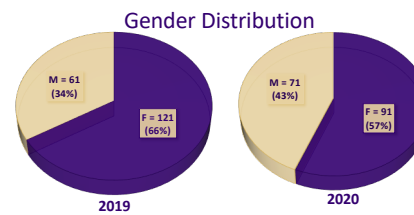
Possible Risk Factors:

- Pre-existing MH presentations – higher attendance post-lockdown (16% vs. 26%)
- Male Gender – relative increase in attendance post-lockdown (34% vs. 43%)

Commonest presentations: Depression, suicidal ideation and self-harm (51% vs. 44% pre- and post-lockdown respectively)

Two-fold increase in anxiety (4% vs. 9%) and behavioral problems (3% vs. 8%) post-lockdown

Commonest discharge diagnoses: anxiety and somatoform disorders with a higher proportion post-lockdown (41% vs. 51%)



	2019	2020
Modal Age	17 (n = 47;26%)	17 (n = 43;26%)
Mean Age	14.6 (SD = 2.46)	14.5 (SD = 2.55)
Youngest Age	7 (n = 1)	6 (n = 1)

CONCLUSIONS

There was an increase in anxiety and behavioral problems post-lockdown. Those with pre-existing MH conditions were disproportionately represented and appear more vulnerable to negative impacts of the lockdown (2,3). Possible contributory factors include boredom, isolation, loss of routine and caregiver burnout (3). These have implications for appropriate service provision and supports for youth during a pandemic. Generalization of this study is limited due to its small sample size and the evolving nature of the pandemic

References

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