

Anxiety and Depression in Family Members of Critically Ill Covid-19 Inpatients: Brief Psychological Interventions via Telephone, an Exploratory Study [Letter]

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Dear editor

We have read the paper by Nancy Patricia et al about Anxiety and Depression in Family members of Critically Ill Covid-19 Inpatients: Brief Psychological Interventions via Telephone, an Exploratory Study.¹ We congratulate all authors for providing initial evidence that brief psychological interventions via telephone are effective in reducing levels of anxiety and depression in family members of critical COVID-19 patients, because psychological stress often leads to burnout. Maintaining psychological health is very important to prevent the emergence of mental disorders in at-risk populations.^{2,3}

The study conducted by Nancy Patricia et al aimed to assess levels of anxiety and depression and explore the effectiveness of brief psychological interventions delivered by telephone.¹ However, this research was only conducted on family members of critical COVID-19 patients who were treated in the intensive care unit, so the sample is limited to that population. This can affect the representativeness of research results. We recommend that there be a control group that does not receive any intervention at all to determine the extent of the effect of psychological interventions in reducing anxiety and depression.⁴

The study conducted by Nancy Patricia et al used an exploratory method with a pilot study design through a brief psychological intervention given by telephone to family members of critical COVID-19 patients followed by anxiety assessment using GAD-7.¹ The method used is effective in measuring the final objective of this research. However, we would like to recommend one instrument that can be used together with the GAD-7 to assess anxiety levels, namely using psychological intervention with MBSR (Mindfulness-Based Stress Reduction) and other mindfulness training programs. Both online and face to face to support health professionals in increasing and reducing respondents' anxiety levels.²

In conclusion, we agree that brief psychological interventions delivered by telephone are effective in reducing levels of anxiety and depression in family members of critical COVID-19 patients,¹ however we recommend conducting long-term follow-up to see the effect of the intervention over a longer period of time. This will help evaluate the sustainability of the intervention's effects and its impact on the well-being of family members in the long term.³ In addition, researchers can also use objective measurements of the patient's clinical condition, such as disease severity scores or biomedical parameters, to complement subjective data collected from family members. This will provide a more comprehensive picture of the relationship between the patient's condition and the level of anxiety and depression of family members.⁵

Disclosure

The author reports no conflicts of interest in this communication.

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