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Challenges for mental health services during the 2020 COVID-19 outbreak in Germany

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In the current COVID-19 emergency, similar to other countries, Germany has taken exceptional measures (travel bans, closure of non-essential enterprises, school closures) aimed at moderating the exponential increase of infections and lessening the impact on the health service. In this unprecedented situation, mental-health services are confronted with fundamental challenges.^{1, 2} First, access to psychiatric diagnosis and treatment needs to be maintained in the face of COVID-19. While minimizing the risk of exposure of patients and mental health professionals to the SARS-CoV-2 virus, it is vital that psychiatric patients (especially those with severe mental health problems) continue to receive the full range of psychiatric services. As such, it is key that mental health professionals liaise with decision-makers to safeguard the needs of psychiatric patients during emergency measures. Second, mental health services will need to treat COVID-19 patients; clear protocols need to be developed for patients with COVID-19 symptoms, including clear guidelines for when psychiatric patients need to be transferred to pulmonary services and for the treatment of patients who remain in psychiatric clinics (for example, the possibility of establishing specific psychiatric wards for COVID-19 patients). For psychiatric patients being treated in pulmonary or intensive-care wards, functional liaison-psychiatric services need to be provided and possibly intensified in parallel with critical care. Measures should be developed to protect especially vulnerable psychiatric patients, such as those being treated in old-age psychiatry, who have concomitant higher risk of severe COVID-19 and to whom there is considerable risk that insufficient attention is currently given.³

As for other health workers, it is essential to protect mental-health workers from the risk of infection. Here, increased use of electronic devices and telepsychiatry can play a major role, allowing for online psychological counseling services, and mental health surveys and education.⁴ Psychiatric clinics must also provide service to health-care workers involved in the battle against COVID-19 who develop secondary psychiatric symptoms, such as anxiety, panic, or other stress-related disorders.⁵ Psychiatric services need to be available to those who develop mental-health symptoms resulting from severe restrictions and/or stressors precipitated by exceptional public-health interventions; there is concern that suicide rates are increasing in parallel with the imminent imposition of the strict curfew. Therefore, there is concern that pressure on psychiatric services will significantly increase at a time

when such services struggle due to COVID-19-related staff shortages. To address such concerns, emergency planning for restructuring of existing psychiatric provision should be prioritized. Day-care clinics may be suspended and patients triaged for inpatient or outpatient care. As such, inpatient and outpatient services become essential and should be strengthened for increased service requests. Finally, staff and patients need to be constantly educated in regards to basic hygiene measures for minimizing infectious diseases. For the many challenges discussed above, specific solutions need to be developed at national and regional levels in the context of the specific service structure in each area.


In summary, psychiatric services are at risk of being both overlooked and overwhelmed at this time of unprecedented crisis. Psychiatrists have the duty of defending the urgent and essential needs of their patients, and in doing so can make vital contributions to overcoming the pandemic by supporting other medical disciplines and ameliorating the psychological impact of the emergency.

Disclosure statement

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Mitigating mental health consequences during the COVID-19 outbreak: Lessons from China

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The pandemic of coronavirus disease 2019 (COVID-19) is sweeping the world. As of 15 April 2020, almost 2 million people have been diagnosed with COVID-19 globally. COVID-19 is not only taking its toll on physical health but is also threatening mental health. At the peak of the COVID-19 epidemic in China, Qiu *et al.* found that the prevalence of psychological distress in the general population was as high as 35%.¹ Those directly impacted by COVID-19, including patients and frontline