

LETTER TO THE EDITOR

Were you a family member, or a COVID-19 patient?

Dear Editor,

We have read with great interest the study by Shirasaki et al.¹ recently published in *Acute Medicine and Surgery*, where the authors studied the long-term outcomes of psychiatric disorders in families of COVID-19 patients admitted to the intensive care unit (ICU) of a single hospital in Tokyo, Japan. They described that as high as 39% of families suffered from anxiety and/or depression even more than a year after the patient's discharge. Notably, this is a valuable study that presents data on long-term post-intensive care syndrome—family (PICS-F) in Japan.

In the context of the prolonged COVID-19 pandemic, the high transmissibility of SARS-CoV-2 may pose an additional discussion in assessing the long-term psychological outcomes of family members of COVID-19 patients. According to the Japanese Ministry of Health, Labour, and Welfare, the prevalence of SARS-CoV-2 antibodies among Japanese adult population is as high as 56.4%, as of November 2023.² The fact suggests that many family members may have contracted COVID-19 themselves during the epidemic.

A crucial aspect to consider is the prevalence of “long COVID,” a condition characterized by persistent sequelae including psychiatric disorders, in a significant number of COVID-19 survivors.³ Notably, around 30% of COVID-19 patients who required mechanical ventilation in Japan exhibited symptoms of psychiatric disorders after discharge.⁴

Furthermore, while the Hospital Anxiety and Depression Scale (HADS) is a widely recognized tool for assessing anxiety and depression symptoms in PICS-F,⁵ it does not specifically determine whether these symptoms are directly linked to the ICU admission of a family member. As a result, the depressive and anxious symptoms described in this study could be attributed not only to PICS-F but also to the impacts of long COVID or post-intensive care syndrome (PICS) experienced by the patients themselves. Therefore, we feel it is essential to adopt a more nuanced approach to understand the complex effects of these conditions on the mental health of families affected by COVID-19.

Again, we would applaud the authors for performing such an important study, which suggests the need for support for

both patient-centered and family-centered care during the remote period after the patient's discharge from the ICU.

CONFLICT OF INTEREST STATEMENT

The authors declare no conflicts of interest.

ETHICS STATEMENT

Approval of the research protocol: N/A.

Informed consent: N/A.

Registry and the registration no. of the study/trial: N/A.

Animal studies: N/A.

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