

## Complicated grief as a mental health sequel derived from the COVID-19 pandemic

## El duelo complicado como una secuela en salud mental derivada de la pandemia por COVID-19

Brenda Elizabeth Barraza-Sánchez<sup>a</sup>**Abstract:**

The SARS-CoV2 pandemic is the third most serious coronavirus outbreak in less than 20 years, causing the death of millions of people around the world, mostly older people or those with a compromised immune status. This health emergency has become one of the principal public health problems precisely because of all the consequences to the physical and mental health of the population. For its part, complicated grief represents one of the most evident consequences due to the multiple losses experienced by the population who could not experience grief as usual due to health restrictions. However, little research has been conducted in this regard. Until now, it has been determined that the participation of mental health professionals, psychologists, and psychiatrists is essential for the diagnosis and care of complicated grief and other mental illnesses that may be a consequence of this pandemic. This article aims to demonstrate the importance of analyzing and studying this phenomenon to develop effective interventions at the population and individual levels.

**Keywords:***Psychological attention, SARS-CoV2, complicated grief, mental health***Resumen:**

La pandemia por SARS-CoV2 es el tercer brote más grave de coronavirus en menos de 20 años, ha provocado la muerte de millones de personas alrededor del mundo, en su mayoría personas de la tercera edad o con un estado inmunológico comprometido. Esta emergencia sanitaria se ha convertido en uno de los principales problemas de salud pública, precisamente por todas las consecuencias a la salud física y mental de la población. Por su parte, el duelo complicado representa una de las secuelas más evidentes, debido a las múltiples pérdidas que experimenta la población y que no pudieron ser vividas con normalidad debido a las restricciones sanitarias. Sin embargo, hasta este momento son pocas las investigaciones que se han realizado al respecto. Hasta ahora se ha determinado que es indispensable la participación de los profesionales de la salud mental, psicólogos y psiquiatras para el diagnóstico y atención de un duelo complicado y otros padecimientos mentales que pueden ser consecuencia de esta pandemia, por lo que este artículo tiene el objetivo de evidenciar la importancia del análisis y estudio de este fenómeno para desarrollar intervenciones eficaces a nivel poblacional e individual.

**Palabras Clave:***Atención psicológica, SARS-CoV2, duelo complicado, salud mental***INTRODUCTION**

The COVID-19 pandemic not only brought about damage to the physical health of humanity but has also generated instability in public health and social systems due to the forced closure of schools and social institutions, as well as the collapse of the global economy due to the suspension of production, commercial and labor activities.<sup>1</sup> Scientific research on epidemics and pandemics conducted throughout human history

has made it possible to understand that, during the outbreak of any infectious disease, the psychological reactions of the population play a fundamental role in the spread of certain diseases. Pathology, in addition to the appearance of mental problems, such as anguish, fear, uncertainty, stress, depression, and anxiety during and after the outbreak, and which are not exclusive to an age group or with specific cultural, economic or social characteristics, but it occurs in a generalized way.<sup>2</sup> Specifically speaking of the grief that people experience as a

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consequence of the COVID-19 pandemic, they not only refer to the death of a loved one, whether associated with SARS-CoV2 or any other cause. Humanity has faced various losses simultaneously due to restrictive and preventive measures to prevent the spread of the virus.<sup>1</sup> For this reason, during a pandemic, it is necessary to consider various psychological factors that intervene. First, trust in the management by the authorities and the health sector of preventive measures implemented to avoid the risks of contracting the virus, as well as those aimed at the treatment and hospitalization of infected patients, ensuring dignified treatment, and on the other hand, those that correspond to community support in the different processes that were experienced such as confinement, changes in routines and lifestyles. In those who have contracted the virus, facing isolation and, in severe cases, hospitalization, solidarity and emotional displays adapted to health measures influence the person's ability to assimilate losses and cope with grief in a better way. All of these aspects have resulted in mental health conditions with the development of complicated grief, depressive and anxiety disorders, suicidal thoughts, and sleep and appetite disorders.<sup>3</sup> Considering the relevance of the analysis of the mental health situation of the population and the consequences left by the pandemic, the objective of this article is to carry out a bibliographic review, which allows identifying the importance of the analysis and study of mental conditions such as complicated grief and that this information favors the development of effective interventions at the population and individual level.

### PSYCHOLOGICAL IMPACT OF A PANDEMIC

The history of humanity has been marked by a series of epidemics and pandemics over time. Figure 1. "Main pandemics worldwide" shows some of the different periods in which diseases occurred that became epidemics and pandemics, claiming the lives of thousands and millions of people in various parts of the world.<sup>4</sup>

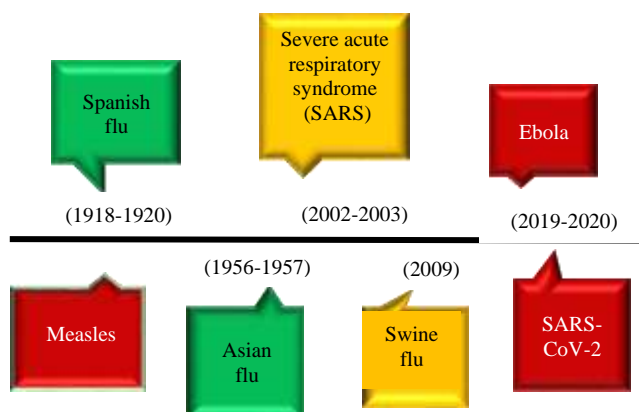


Figure 1. Timeline, main epidemics worldwide.<sup>4</sup>

Scientific research analysis of these phenomena throughout history has made it possible to realize that, during any outbreak of infectious disease, the psychological reactions of the population play a fundamental role in the spread of a specific pathology, in addition to the appearance of mental problems, such as emotional distress, fear, uncertainty, stress, depression, and anxiety to name a few, during and after the health emergency and that it is not exclusive to an age group or with specific cultural, economic or social characteristics, but it occurs in a generalized way.<sup>2</sup>

Many public health studies have shown that outbreaks of infectious diseases such as severe acute respiratory syndrome (SARS) in 2003<sup>5</sup>, the influenza A (H1N1) epidemic in 2009<sup>6</sup> and the Ebola outbreak in 2014 lead the population to experience severe psychological problems, such as post-traumatic stress disorder, depressive disorders, and anxiety disorders, specifically generalized anxiety and social anxiety were identified.<sup>7,8</sup>

However, despite the high rates of mental health problems that arise in populations during epidemics or pandemics, few economic, material, and human resources are allocated specifically for mental health care, inside and outside of the country hospitals, which may be understandable in these cases, since the priority is to reduce the spread of the disease. However, psychological and psychiatric needs should not be overlooked during any phase of pandemic management. Psychological factors play a fundamental role in compliance with health measures issued by governments and health organizations to avoid mass infections and how people face the threat of disease and the consequent losses.<sup>9</sup>

### TYPES OF GRIEF

The word mourning comes from the Latin *dolium*, which means pain or affliction. It is also defined as the natural reaction to the loss of an object, event, or person that is very significant, as well as those emotional reactions and behaviors derived from breaking an emotional bond. Therefore, grief considers physical, psychological, and social factors in addition to their duration and intensity since these are indicators of the dimension of the loss and are considered to evaluate whether it is a normal grieving process or a complicated one.<sup>10</sup>

According to the classifications of psychiatric medical manuals, grief can be usual and complicated, as explained in Table 1, which describes the characteristics that allow one to identify each of them.

According to the Diagnostic and Statical Manual of Mental Disorders (DSM-V) 11, normal grief is accompanied by some of the characteristic symptoms of a major depressive episode; however, they may be natural and understandable given the situation of significant loss, so an evaluation is necessary, especially considering the time of the loss concerning these symptoms, to determine the presence of a mood disorder.

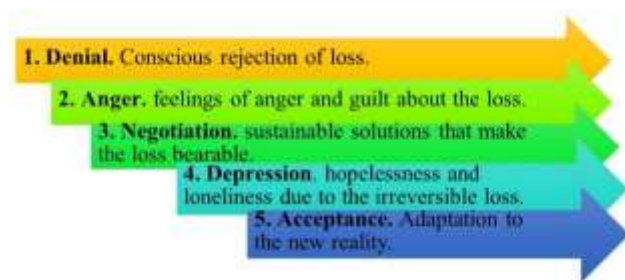
Table 1. Main characteristics of normal and complicated grief.<sup>10-12</sup>

	COMPLICATED GRIEF	NORMAL GRIEF
<b>Main manifestations</b>	Symptoms persist and become more severe over time. Other mental pathologies can develop, among them depressive disorders and anxiety disorders.	Intense and persistent feeling of sadness. Hopelessness. Anger and frustration. Isolation. Insomnia, loss of appetite and weight.
<b>Duration</b>	The symptoms last more than 18 months and become more intense for the sufferer.	Approximately 6 to 12 months, although residual symptoms may occur afterward.
<b>Prevalence</b>	It occurs in approximately 10 to 20% of the general population.	At some point in their lives, everyone will go through a grieving process.

On the other hand, complicated grief implies that this prolongation of symptoms can affect going through the different stages of this process, accompanied by a lack of emotional regulation, which can generate, as a consequence, a series of maladaptive behaviors that lead to clinical severe symptoms, such as depression, anxiety and in severe cases psychotic outbreaks, these consequences will appear by elements such as the type of bond with the person who has passed away, the characteristics of the loss and the mental aspects of the bereaved, as well as social support.<sup>13, 14</sup>

### STAGES OF GRIEF

Grief is a process that consists of a series of phases or stages. However, researchers have yet to unify this theory since its definition is conditioned according to clinical observation or the therapeutic approach, so there are several concepts that cannot be definitive.<sup>15</sup> The American psychiatrist Elisabeth Kubler-Ross and the medical Kessler<sup>16</sup> are some of the most prominent researchers on death and palliative care. She proposes five stages of grief. Each of these stages is described in the following section (see Figure 2).



**Figure 2. Stages of grief.**<sup>16</sup>

### PSYCHOLOGICAL INTERVENTION IN COMPLICATED GRIEF

The first-line treatment for grief that becomes complicated or pathological is usually psychological therapy. Cognitive behavioral treatment facilitates adaptive change in response to

loss, by addressing negative thoughts and behaviors<sup>14</sup>. Other investigations conclude in their research that cognitive behavioral therapy for the treatment of pathological grief has been more effective when carried out in a group.<sup>17</sup>

Telemedicine turned out to be an excellent option to take care of those who were grieving during the pandemic. A series of small randomized controlled trials showed that cognitive behavioral therapy through electronic media and the internet was effective at that time for grief care and that people who required it could more easily access a psychiatric evaluation and diagnosis.<sup>18</sup>

On the other hand, there is evidence that psychotherapy during the grieving process that becomes complicated offers better results to reduce symptoms when it is the mourner himself who requests care and in the same way when it is identified that it is a complicated grief. In addition to grief, some mental disorders such as depression, anxiety or post-traumatic stress, occur.<sup>19</sup> Research indicates that group therapy can be a good option for the treatment of grief symptoms and that it can even help patients address grief that they experienced in other stages of their lives, allowing for a more adequate elaboration, which can serve as a basis for their recovery in some cases.<sup>15</sup>

Regarding how a psychotherapist could make a diagnosis of complicated grief, one can consider the Complicated Grief Inventory (CDI) adapted to Spanish, which is a self-administered questionnaire with 19 items with 5 Likert-type response categories that assess the frequency of the symptom explored in the emotional, cognitive or behavioral field; a complicated duel results when obtaining 25 points or more.<sup>20</sup>

Speaking specifically about the interventions carried out during the pandemic for grief care, the Ministry of Health<sup>21</sup> issued a document called Recommendations for Grieving Family Members during the COVID-19 pandemic, the objective of which was to issue guidelines for mourning and self-care in different contexts to prevent spreading the virus. Table 2 describes the recommendations for the population in more detail.

**Table 2.** Self-care guidelines for grief during the COVID-19 pandemic.<sup>21</sup>

Care guidelines	Recommendations
Self-care	Sleep hygiene Adequate nutrition. Avoid consumption of psychoactive substances.
Emotional	Use electronic devices to communicate and express emotions. Respect moments of solitude, but without reaching isolation. If you require support for physical or emotional care, the suggestion is to call the lines of authorized public institutions.
Cognitive	Do not demand too much of yourself intellectually; avoid the infodemic. Write objectives related to grief to identify its emotional and physical evolution. Do not make relevant decisions.
Spiritual	Create an exclusive space with significant objects to remember the person. Engage in activities that enhance creativity. Engage in farewell rituals from home, where you are connected through electronic devices.

On the other hand, Spain issued a recommendations manual for relatives of patients who passed away from virus-derived complications, which, in the face of health isolation measures, in the most critical period in terms of infections and deaths, suggested an adaptation of rituals and ceremonies inside the home and emphasized requesting support from mental health professionals through telephone lines especially set up for this work to prevent complications in grief and likewise suicidal ideation or attempts.<sup>22</sup>

### GRIEF IN TIMES OF COVID-19

Speaking specifically about losses and consequent grief during the COVID-19 pandemic, mourners experienced two main risk factors that could cause complicated grief. The first is related to those situational factors around the death since, in most cases, it arrives suddenly, also accompanied by feelings of helplessness, not being able to accompany the loved one during the illness process, and not being able to say goodbye before death.<sup>23</sup>

The second refers to the situational factors in which the loss occurs, in this case, the limitations that arose regarding social support during the grieving process since this made it difficult for the mourner to express his feelings and share them with others to validate their pain, as well as remember memories and perform funeral rituals or ceremonies, all of this allows the mourners to assume the pain of their loss in solitude.<sup>24</sup>

Regarding the relational factors of the mourner with the deceased, which in most cases are those representing a greater risk, for example, the type of bond they maintained, if there was any dependence, economic, physical or emotional, complicated grief is more likely to develop when a parent or partner is lost.<sup>17</sup> Likewise, it is necessary to consider some individual aspects to evaluate the presence of complicated grief, including previous unresolved grief, any mental disorder before the loss, especially mental state disorders, mood, abuse of psychoactive substances, and few emotional and social resources to cope with the loss.<sup>25</sup>

### CONCLUSIONS

The COVID-19 pandemic is one of the worst global public health crises in a century, whose medical complications have claimed the lives of several million people around the world and left even more people grieving as a result. Although researchers are beginning to identify the possible medium-term consequences, and it is still unknown what will come in the long term after this health crisis; they determined that a significant number of grieving people will possibly develop complicated grief, derived from the health measures they implemented in the face of emergency.<sup>2</sup>

Researchers indicate that if patients do not receive psychotherapeutic care for complicated grief, the possibility of developing some mental pathology increases, including depression, anxiety, sleep disorders, eating disorders and a greater risk of suicide, besides the risk of developing cardiovascular and oncological diseases also increases, as well as deficiencies in the immune system, complicated grief can also cause difficulties in adherence to treatment in patients who require daily medication, for example, those who suffer from chronic diseases.<sup>27</sup>

Likewise, health professionals must be able to detect symptoms of depression, especially if there is suicidal ideation and even suicide attempts derived from a significant loss, as well as a possible post-traumatic stress disorder in these patients, and consider referral to specialized psychiatric and psychological services promptly.<sup>18</sup>

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