

# Addressing mental health needs of post-ICU COVID patients through process group psychotherapy

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## Conclusion

- PTSD-like and grief themes (traumatic & life-circumstance themes)
  - Medical trauma with infection (hospitalization)
  - Ongoing psychological, collective trauma with pandemic (infections, deaths, uncertainties about the future, loss of roles/identity, economic instability, existential grief)
- The psychotherapy process group provided an outlet to find recovery through discussing relatable experiences

## Limitations

- Virtual vs. in-person psychotherapy
- Offered time of group
- Small vs. large number of group members
- Began as clinical operation with subsequent application of research methodology to look for outcomes (retrospective)
- Surveys not given routinely & only 4 with pre- and follow-up data thus far

## Future Directions

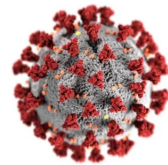
- Merge post-ICU with non-ICU group
- Further outreach and referrals
- Survey analysis
- Add controls without group therapy
- Stratify group by diagnoses & co-morbidities

## What We Learned

- Peer-based process group supports mental health and healing for COVID-19 survivors post-ICU
- Group provides a space for reciprocated vulnerability, relatability, and decreased isolation

## Methods

- Co-facilitated by supervising psychologist, psychiatry resident, and MS4
- 1.5 hours long; meets bi-weekly
- COVID post-ICU ‘Long Haulers’ from OP post-COVID clinic at UCH
- Ages 29-64, up to 10 participants, Caucasian, African American, Asian, Latinx



- Hope Future Scale (HFS) and UCLA Loneliness Scale (UCLA-LS) before and at least 6 group visits later to evaluate levels of hope and quality of connection with others
- Additional qualitative interview (n=4)

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## Preliminary Results

- Majority of patients (74%) attended >1 session
- Groups with 2 to 5 participants
- Participants indicated positive impact of process group on improving mental health, well-being, and hopes for recovery
  - “You know if you’re not an astronaut, don’t tell me what it was like to walk on the moon. You’ve never done it so you can’t act like you do... it’s been comforting to me to hear that someone has kind of been where I’ve been.”
  - “Group has been helpful, I’d have to say extremely so”
  - “You guys all can relate and understand... it’s nice to know that I’m not alone”
  - “You guys give me hope...you guys are accepting”
  - “It really helped me a lot... that it was us learning together”
  - “The format is great”

## Background

- Studies have shown that severe acute illness from COVID-19 correlates with subsequent neuropsychiatric symptoms (depression, fatigue, impaired cognition i.e. decreased memory, attention, and executive functioning)
- Founded diagnoses following COVID illnesses include: Adjustment disorders, anxiety disorders, major depression, prolonged grief disorders, chronic stress, and post-traumatic stress disorder
- Specialized mental health support services for this post-ICU patient population is needed