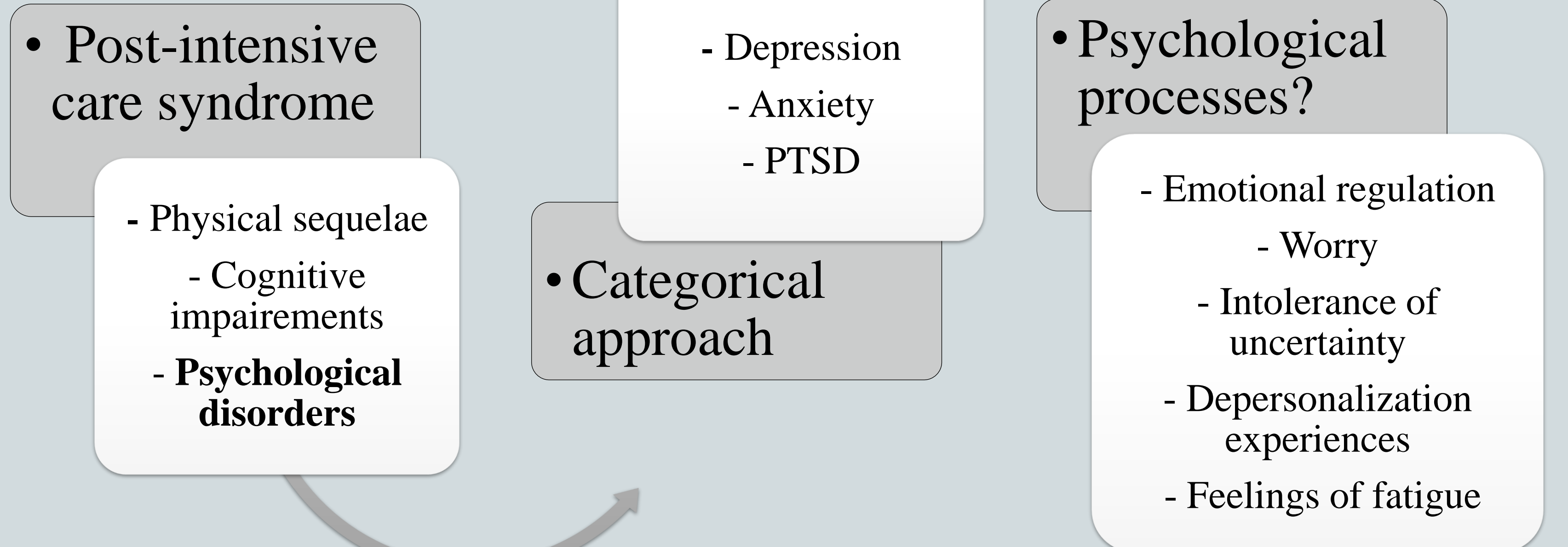


# WHAT ARE THE PSYCHOLOGICAL IMPACTS OF AN INTENSIVE CARE UNIT HOSPITALIZATION? A DIMENSIONAL APPROACH

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## INTRODUCTION

Every year, more and more patients are being cared for in intensive care units (ICU). This experience can lead to various outcomes, both short and long term, for those who are confronted with it. The risk for the survivors is to develop a “post-intensive care syndrome” which includes physical sequelae, cognitive disorders or impairments. The most common psychological disorders reported in the literature are depression, anxiety and post-traumatic stress disorder (Milton et al., 2017; Proffit & Menzies, 2019; Taquet et al., 2021). So far, none of the studies found in the literature seem to have evaluated the dimensional aspects of the aforementioned psychological difficulties. Thus, our research aims at assessing the psychological impacts of an intensive care unit hospitalization in a more dimensional approach. To this end, we assessed psychological processes and not diagnostic categories.



## HYPOTHESES ?

- 1/ We believe that, apart from depression, anxiety or post-traumatic stress disorder, other problems could be found in post-intensive care patients (psychological processes above).
- 2/ Patients hospitalized for **Covid-19** would be more likely to develop psychological difficulties compared to patients hospitalized for another reason.

## RESULTS

FIGURE 1. CAUSES OF HOSPITALIZATION

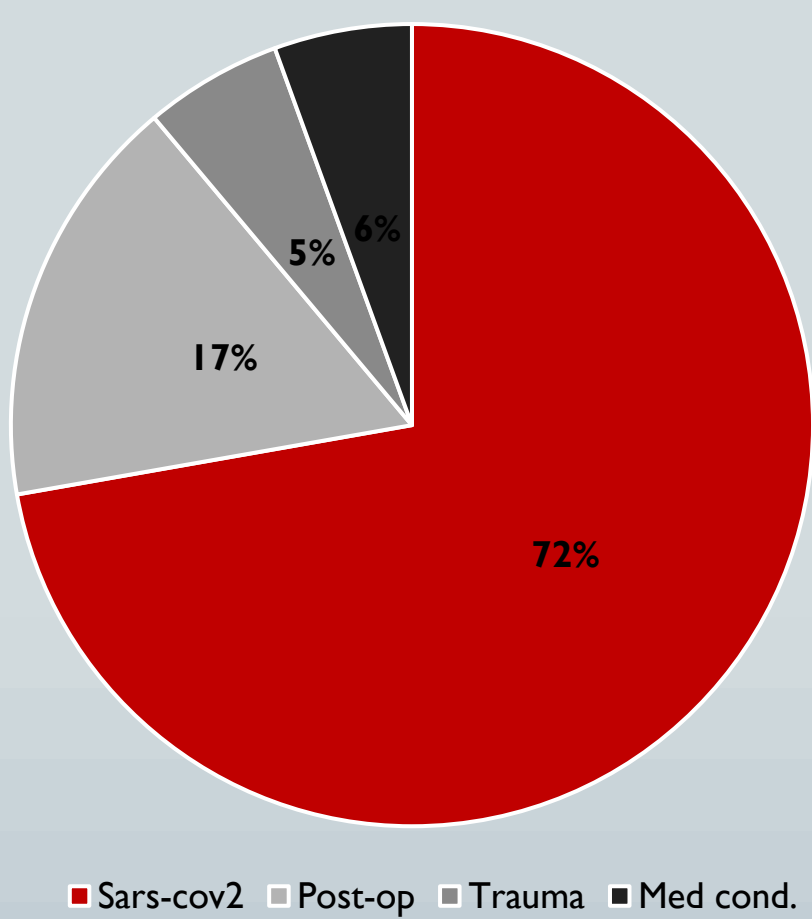
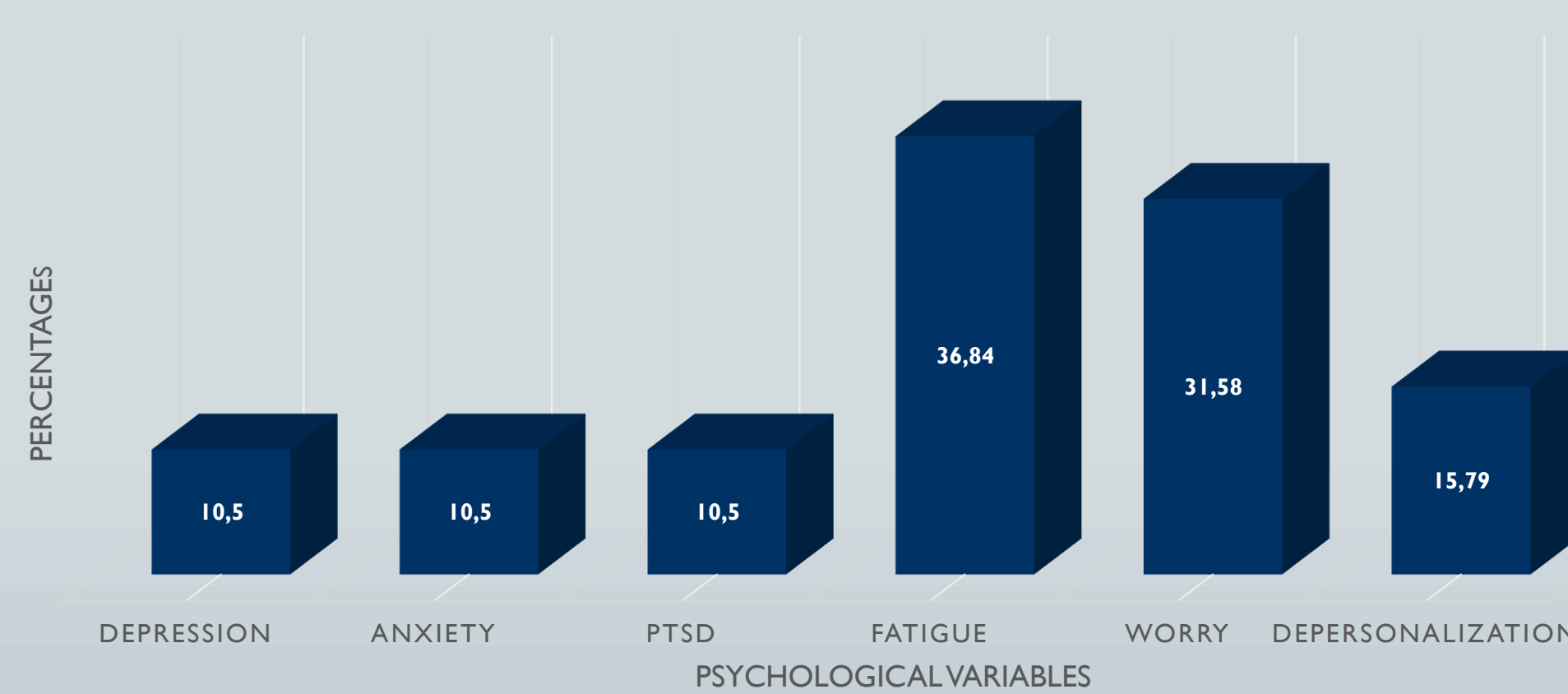


FIGURE 2. PERCENTAGES OF PATIENTS ACCORDING TO EACH PSYCHOLOGICAL VARIABLE EVALUATED

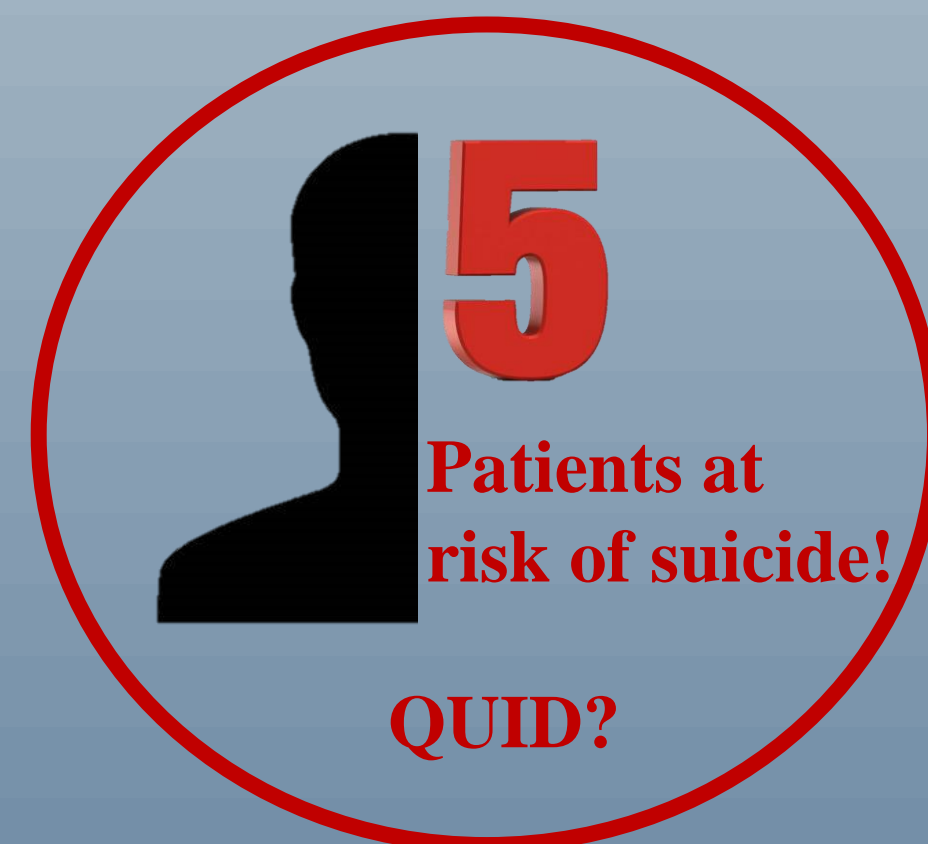


➤ Emotional regulation and intolerance of uncertainty : high variability within the sample for these variables. Some subjects seem to report difficulties but on average the scores are relatively low for these variables.

TABLE 1. RESULTS OF THE « COVID » AND « NO-COVID » GROUPS IN THE EXACT WILCOXON TEST

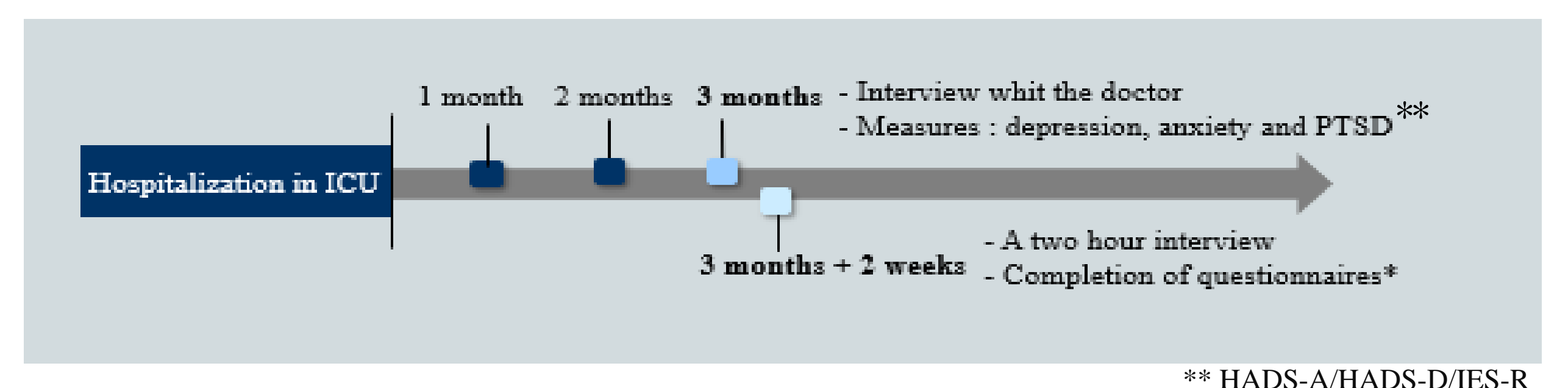
	S	P *	Medians (interquartile range)	
			Covid (N=13)	No Covid (N=6)
HADS-A	31.5	0.01	4 (4)	0 (2)
IES-R	30.5	0.01	19 (19)	2 (5)
EII	37.5	0.04	54 (22)	39 (11)
Steinberg	37	0.04	20 (10)	16.5 (2)

\* P < 0,05 = significant difference between medians



## METHODS

### STUDY DESIGN



### PARTICIPANTS

19 Participants  
Age 61,89 Middle Age

➤ **Inclusion criteria** : + 18 years old | minimum 7 days of hospitalization in ICU | no cognitive impairment too important | no deafness or mental impairment

### QUESTIONNAIRES

- **5 self-administred questionnaires\*** :
  - ✓ Pitchot fatigue scale (Gardenas, 2002)
  - ✓ Emotional regulation scale - DERS-F (Dan Glauser et al., 2013)
  - ✓ Penn state worry questionnaire (Gosselin et al., 2001)
  - ✓ Uncertainty intolerance scale - EII (Freeston et al., 1994)
  - ✓ Steinberg depersonalization scale (Steinberg, 2001)
- **Semi-structured interview\*** :
  - ✓ Mini International Neuropsychiatric Interview (Lecrubier et al., 1999)

### STATISTICAL ANALYSIS

- Descriptive statistics and group analyzes (exact Wilcoxon test)

## DISCUSSION

➤ The first results obtained for this study seem to support some of our hypotheses. Difficulties within the psychological processes assessed appear to be present in some patients of our sample. Participants who were hospitalized for Covid-19 appear to have more psychological difficulties compared to patients hospitalized for another reason.

### Limits

- ✓ The small sample size
- ✓ The anxiety-provoking context due to the Covid-19 pandemic

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