



INTEGRATIVE MENTAL HEALTH/ IN THE TIME OF COVID

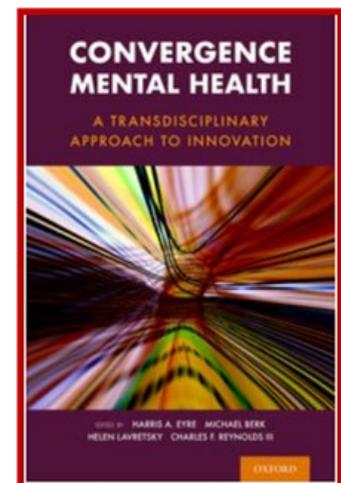
The World Health Organization estimates that 450 million people suffer from mental or neurological disorders or from psychosocial problems. Major depression is now the leading cause of disability globally, ranking fourth among the ten leading causes of the global burden of disease; a million people commit suicide every year. In the U.S., the CDC reports that suicide was the tenth leading cause of death in 2018, claiming the lives of more than 48,000 people. According to the National Institute on Mental Health, 51.5 million people were living with mental illness in 2019 (nearly one in five U.S. adults). **Integrative mental health** (mind, brain and behavior) in the time of COVID, and perhaps most particularly post-COVID, is an important portal to addressing a pressing worldwide need in healthcare.



Helen Lavretsky M.D., M.S., is a professor in-residence in the Department of Psychiatry at UCLA and at UCLA’s Semel Institute for Neuroscience and Human Behavior. She suggests that “all hands on deck” approach to the world’s mental health crisis will require a trans-disciplinary collaboration of mental health professionals, including psychologists, psychiatrists, psychopharmacologists, neuropsychologists, sociologists, scientists, crisis management and medical technology experts, policy-makers and more. She says “*convergence mental health*” will help these teams, including patients, explore the matrix and momentum of their work together to achieve optimum overall health and well-being for each patient.

In the book *Convergence Mental Health, a Transdisciplinary Approach to Innovation*, co-authored and co-edited by Dr. Lavretsky, convergence science is defined as “*an approach to problem-solving that cuts across disciplinary boundaries*” in a unique, more comprehensive way than multidisciplinary or interdisciplinary approaches. “It integrates knowledge, tools and thought strategies” for tackling complex challenges, driving discovery and innovation.

COVID-19 and its impact on mental health has added urgency to the need for evidence-based, transdisciplinary, patient-centered medical care. To help meet this need, Dr. Lavretsky and her team in the UCLA set up a post-COVID care clinic to care for “long-haulers,” i.e., patients whose lingering symptoms (commonly “brain fog,” chronic fatigue, depression, delirium, insomnia and anxiety) can be debilitating, long term.



There are fewer than 100 similar “PCCCs” (post-COVID care clinics or centers) in the U.S. to take care of an increasing number of post-COVID patients. Dr. Lavretsky estimates 10 percent or more of all hospitalized COVID patients will need long term follow-up care. A CDC study released in April 2021 found that two-thirds of non-hospitalized COVID-19 patients “had a visit for a new primary diagnosis, and approximately one third had a new specialist visit,” indicating the potential for post-COVID conditions requiring care.

Since its opening in February, the UCLA clinic has seen five new patients a week, primarily from the UCLA Medical Center’s Post-ICU Recovery Clinic, with plans to scale up after determining what works and what doesn’t, not only for COVID patients, but for others experiencing mental health issues.

“There is so much we don’t yet know about post-COVID conditions,” says Dr. Lavretsky, “but we recognize from what we’ve seen throughout the pandemic that the range of conditions is wide, requiring careful diagnosis, cognitive testing, and neuroimaging, followed by access to a wide range of specialty care, care that many times crosses multiple disciplines for each patient over an extended period.”

The clinic is currently staffed by nine clinicians who evaluate each patient, determine and coordinate the support that is needed in each case. Biofeedback has been introduced, allowing patients to establish and work toward their goals for recovery. UCLA’s Health Integrative Medicine Collaborative is an important resource for any type of specialized post-COVID care that may be required, in addition to approaches that address the physical, emotional, mental, social, spiritual, and environmental aspects that influence overall health and well-being, including acupuncture, yoga, Tai Chi and meditation.

Integrative Mental Health – Integrative Post COVID Care

1. Evaluate the scope of post-COVID care need from your COVID patient population, i.e., the number of patient inquiries or complaints related to “long-hauler” or lingering symptoms to determine your potential for a post COVID Care Center or Clinic (PCCC).
2. Identify a location and logistics, i.e., someone who can answer calls, schedule and process patients.
3. Assess the availability of a mental health team who can screen patients and determine next steps, including psychiatrists with integrative tools such as psychopharmacology, psychologists for cognitive behavioral therapy and trauma-oriented individual and group therapy, neuropsychologists for cognitive testing, and social workers to help resolve psychosocial issues like housing and unemployment.
4. Develop an integrative care contact list covering the range of services and support that may be needed, including cardiologists, pulmonary rehabilitation therapists, neurologists, nurses, etc.

Resources:

- [Helen Lavretsky, MD, MS](#)
- [Feeling Lucky? Convergence Mental Health as a Mechanism for Serendipitous Innovation](#)
- [Bidirectional associations between COVID-19 and psychiatric disorder: retrospective cohort studies of 62 354 COVID-19 cases in the USA - The Lancet Psychiatry](#)
- [Healthcare Utilization of Non-hospitalized Adults in an Integrated Health Care System After COVID-19 Diagnosis – April 2021 CDC Report](#)
- [Survivor Corps](#)