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COVID-19 and Medical Students: Breaking the Silence on Mental Health

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A feeling of panic overcame me as I sat at my desk, where my sole existence had been for the past several weeks. Putting down my phone and taking a sip of water, I attempted to get back to my studies, but my mind was racing. And before I could process what was happening, I began to cry, violently sobbing alone in my room. It took several minutes before I regained control over my own body.

It was June 2020, and I was just one week away from the United States Medical Licensing STEP 1 Exam, arguably the most important exam for medical students when applying for residency (and beyond, at least for my class – who still received a numerical score). In the “before time,” what we call life before the COVID-19 pandemic, second-year medical students gradually retreated into their studies for several

months before the big exam, which eventually culminated in a six-week dedicated study marathon known simply as “Dedicated.” This time period often entailed 12+ hours of daily studying, seven days a week, laden with stress and isolation and uncertainty, to say the least. Now, with the added layers of an international pandemic on top of societal trauma to the American psyche, morale was at an all-time low.

Taking a break amidst my studies, I had just read yet another article commenting on the bleak situation engulfing the United States; I quite honestly cannot remember what the tragedy du jour was. News articles seemed to report more bad than good, aptly inspiring a new term – “doom-scrolling” – to describe the endless newsfeed of negativity and despair. I had also made the mistake of checking my social media, where I was met with an inundation of social unrest and calls-to-action from my peers. And it was then, as I sat in my pajamas, sheltered at my desk with my books, that I completely lost it. The delicate wall of emotional protection I had carefully built collapsed instantly from

months of weathering. To this day, I still struggle to identify what had struck me the most: the stress from the exam and uncertainty over my future, the health of my loved ones, or the general state of the world.

The COVID-19 pandemic has rapidly transformed not only the field of healthcare, but more importantly, the world at large. The public eye has focused mainly on the ongoing impacts regarding physical and mental health of the entire population, with some attention being given to healthcare workers, and even less attention to healthcare students and trainees. Although not yet having seen the frontlines, pre-clinical medical students have been caught at an especially precarious time. From my own experiences, I often felt guilt for attempting to tune out the horrors of the world in order to get through the day. I felt inadequate for sitting on the sidelines while my peers within the realm of healthcare were risking their lives. I felt selfish for temporarily retreating from the social discussion over injustice in this nation.

As of mid-July 2020, over half of American adults have reported a negative impact on their mental health due to COVID-19. This takes the form of sleep disruption, appetite changes, substance use, and strained

relationships, among many other things. [1] Mental health in relation to the pandemic has also been explored in healthcare workers, a particularly resilient population who is now experiencing increased rates of anxiety, depression, and other psychological effects, beyond their physical health risks. [2] The literature dwindles even further when exploring COVID-19 mental health effects on healthcare trainees, specifically. One such study surveyed medical students in May 2020, which “demonstrated a higher prevalence of moderated and severe anxiety and depression symptoms among medical students during [the] COVID-19 pandemic.” [3] This is alarming when understood in the context of the already rocky psychological health experienced by medical students in the “before time.”

Perhaps we are fortunate that mental health destigmatization and open discussion has been gaining prevalence within the last decade, well before SARS-CoV-2 became a household name. But there is still much progress to be made, particularly for healthcare workers who exist in a culture that “reinforces the belief that physical and emotional exhaustion is part of the job.” Vulnerability and needing help are often viewed as signs of weakness that must be

internalized. [4] And, once again, what about the medical students? A cohort who often feel they have no grounds to articulate their struggles when there are “real clinicians” who appear to cope with their stressors, at least on the outside. When taking into account the status quo of emotional silence within medicine, trainees are taught to mask their struggles just the same as they are taught cardiology or histology.

The system of medical education must continue to make strides towards trainee and clinician wellness, adopting a proactive approach rather than reacting when the going gets tough. My own medical school sends monthly wellness emails that normalize the emotional and mental struggles students experience while encouraging the utilization of resources, including free therapy. But students themselves must continue to be proactive, checking in on peers but also checking in on ourselves, lest our delicate emotional walls come crashing down in one fell swoop.

Everyone – not just healthcare workers and trainees – is experiencing a period of history in the making; we will one day be the protagonists of novels about this transformative time. But in the meantime,

we must be kinder to ourselves and ask for help when it is needed. We must catalyze the continual progress being made regarding mental health to pave the way towards a stigma-free future.

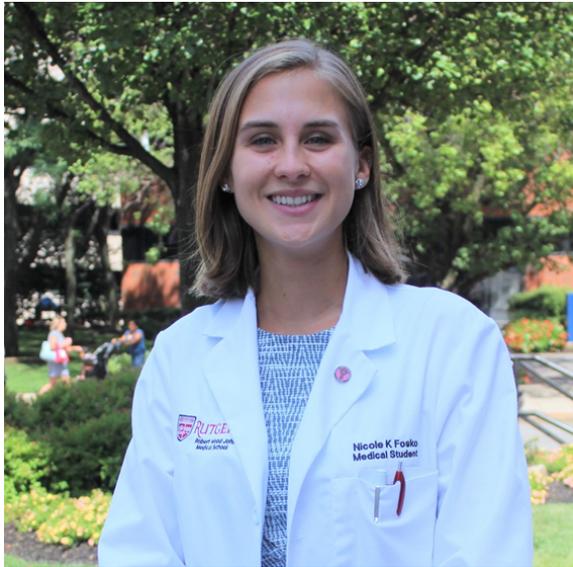
[1] Panchal, N. (2020) The Implications of COVID-19 for Mental Health and Substance Use. Retrieved October 17, 2020, from <https://www.kff.org/coronavirus-covid-19/issue-brief/the-implications-of-covid-19-for-mental-health-and-substance-use/>

[2] Shaukat, N., Ali, D.M. & Razzak, J. (2020) Physical and mental health impacts of COVID-19 on healthcare workers: a scoping review. *Int J Emerg Med* 13, 40. <https://doi.org/10.1186/s12245-020-00299-5>

[3] Filho, C. I. (2020). Impact of COVID-19 Pandemic on Mental Health of Medical Students: A Cross-Sectional Study Using GAD-7 and PHQ-9 Questionnaires. *MedRxiv*. doi:10.1101/2020.06.24.20138925

[4] Shapiro, J. (2020). Supporting Clinicians during Covid-19 and Beyond — Learning from Past Failures and Envisioning New Strategies. *New England Journal of Medicine*. doi:10.1056/NEJMp2024834

Biography



aspires to incorporate women's health into her future medical specialty.

Nicole received a Bachelor of Engineering in Biomedical Engineering from Stevens Institute of Technology in 2018, where she worked on a variety of technical projects. For her capstone, she developed a system of sensors to non-invasively detect obstructive apnea in premature newborns.

Nicole Fosko is an MS3 at Rutgers Robert Wood Johnson Medical School in New Brunswick, NJ. In her time at Rutgers RWJMS, Nicole has volunteered for the student-run Promise Clinic, which locally serves the uninsured; she also runs the BLAST Anatomy program, where she introduces local high school biology students to anatomy through the cadaver lab. With the Cancer Institute of New Jersey, Nicole has explored the effects of COVID-19 on delays in breast cancer care. Through the Rutgers Women's Health Institute, Nicole has authored a publication for patient education that explores the relationship between the perinatal period and the bacterial microbiome. In the Summer of 2019, she took part in an intensive four-week medical Spanish program in San Jose, Costa Rica. Nicole