EUROPEAN JOURNAL OF BIOMEDICAL AND PHARMACEUTICAL SCIENCES
http://www.ejbps.com

ISSN 2349-8870
Volume: 7
Issue: 8
382-385
Year: 2020

LOCKDOWN SYNDROME VS COVID-19 IN INDIA

Dr. Anis A. B. Choudhery, Ph.D.[1]* and Tasmi Ansari[2]

Department of Zoology, G.M. Momin Women's College, Bhiwandi, District Thane, 421302 Maharshtra. India.

***Corresponding Author: Dr. Anis A. B. Choudhery**
Department of Zoology, G.M. Momin Women's College, Bhiwandi, District Thane, 421302 Maharshtra. India.

Article Received on 25/05/2020 **Article Revised on 16/06/2020** **Article Accepted on 07/07/2020**

ABSTRACT
The lockdown in India has a deep impact on various strata of society. The Present research is done to investigate and study the impact of lockdown on different segments of society. During last six months entire human population is undergoing a different phenomenon. With the onset of Janta Curfew on 22nd March 2020, The Government of India launched five nationwide lockdowns restraining 1.3 billion people movement which still in the process. The society underwent a long journey right from forced lockdown to sanitizing everything, to psychological acceptance, struggling with worldwide web and hypertext channelizing all the global happening on the screen of smallest mobile phones. Physically COVID-19 is affected less than 1% of global population only but mentally its impression is all over the world. Initially people enjoyed these leaves and holidays as family togetherness but after few days entire society started acting differently. Their Social, physical and mental responses started behaving differently. It was not due to COVID-19 or due to fear of COVID-19, it was due to lock-down hence we have named it Lock-Down Syndrome, a new word in present modern vocabulary of English language. Restraining social species 'human' in houses with very limited mobility for such prolong period of 3 months and still going on, It heavily impact on their health, wellbeing, wealth and social integration. The present study revealed the percentage suffering of corporate/industrialist is 48.3%, housewives is 56%, Middle class salaried individual is 25.8%. Impact of lockdown syndrome was different on different segments of society, Lock-down syndrome caused migration of 80 million people within India, it caused thousands of non-corona deaths, 198 migrants killed in road accident during lockdown and hundreds of suicides.

KEYWORDS: Lock-down, Lock-down Syndrome, COVID-19 pandemic, non-corona deaths.

INTRODUCTION
A novel corona virus, designated as 2019-nCoV, emerged in Wuhan, China, at the end of 2019. To date, most SARS-CoV-2 infected patients have developed mild symptoms such as dry cough, sore throat, and fever. The majority of cases have spontaneously resolved. However, some have developed various fatal complications including organ failure, septic shock, pulmonary oedema, severe pneumonia, and Acute Respiratory Distress Syndrome (ARDS) (N. Chen, 2020). On 30th January 2020, The World Health Organisation (WHO) declared the outbreak as a pandemic and Public Health Emergency of International Concern; typically, respiratory viruses are most contagious when a patient is symptomatic. However, there is an increasing body of evidence to suggest that human-to-human transmission may be occurring during the asymptomatic incubation period of COVID-19, which has been estimated to be between 2 and 10 days (C.Rothe and Q.li, 2020). At present, no effective antiviral treatment or vaccine is available for COVID-19. However, a randomized multicentre controlled clinical trial is currently underway to assess the efficacy and safety of abidole in patients with COVID-19 (ChiCTR2000029573). First-line treatment for fevers includes antipyretic therapy such as paracetamol, whilst expectorants such as guaifenesin may be used for a non-productive cough. (D.wang, 2020). Currently, an estimated 2.6 billion people under lockdown. With nearly 500 confirmed cases the government of India imposed "janta Curfew" on 22nd march 2020, as of today the confirmed cases rose to half a million mark in India. In India, with the longest lockdown across globe having a great psychological impact on various segments of society. The lockdown started with phase 1, On 24 March 2020, Prime Minister Narendra Modi declared a nationwide lockdown for 21 days, limiting movement of the entire 1.37 billion population of India as a preventive measure against the COVID-19 pandemic in India.(Gettlleman, 2020). Different countries used variety of technological tools to guard their citizen and some of countries including India imposed Lock-Down of citizens in their homes since 25 March 2020, the first day of the lockdown, nearly all services and factories were suspended(Singh, 2020) People were hurrying to stock essentials in some parts.(ANI,2020) Arrests across

the states were made for violating norms of lockdown such as venturing out for no emergency, opening businesses and home quarantine violations. (India today, 2020). And as of today, India is going through fifth phase of lockdown from 1st June 2020 to 30th June 2020. The lockdown applied to three main areas: physical movement out of the home, social distancing when outside the home, and restricted availability of most public services while sparing essential services. There was a sudden and drastic alteration in the daily routine, with many millions stranded in boarding houses and rental apartments, without work and far from home. Academic work ground to a halt, with auxiliary staff like cleaners, security guards and gardeners suddenly being thrown out of their contractual work. Earlier studies have shown that this sudden loss of employment, along with financial stress or even distress, could enhance the psychological impact on the working community, shown by symptoms of increased aggressiveness and post-traumatic stress. (Liji, 2020). Overall, the investigators found that social isolation and loneliness increased the risk of depression, as well as the possibility of anxiety at the time of loneliness, which was measured between 0.25-9 years later. The duration of loneliness was strongly correlated with mental health symptoms than the intensity of loneliness. The investigators found young people were as much as 3 times more likely to develop depression in the future due to social isolation, with the impact of loneliness on mental health lasting up to 9 years later.(Kenny walter, 2020) In addition to various psychological problems like depression, anxiety, and panic disorder, the COVID-19 pandemic has caused severe threats to the lives and physical health of people around the globe. (Qui. et al, 2020). Besides the physical problems the Covid-19 gave rise to lockdown and Lockdown led to Lockdown-syndrome affecting social and psychological wellbeing of humans.

METHODOLOGY

The main purpose of the study was to understand of impact of lockdown during COVID-19 in different sections of the Indian society. The objective of current research was to define and describe changes in few of human behaviour patterns. Interviews were conducted as per suggestion made by Jane Agee, and systematic review was conducted as per frame work suggested by Arksey and O'Malley. Several in-depth interviews and based on observation, qualitative interviews were done to understand the current situation better. Referring to many social media and research article on Covid -19, questionnaires were framed for online. The online survey conducted from May 9, to May 20, 2020, using an anonymous Google form via social media. The questionnaire includes items like for financial stress, mental stress, emotional stress, depression, health wellness, anxiety, anger, sleeping disorders/ insomnia, digestion, food intake, domestic violence and social trust. The survey included 740 Indian. As per their roles and purpose of study society was divided in eight categories. 1-Corporates 2- Middle Class having fixed and regular salaries 3-Doctors /medico-professionals 4-Police/home guards /enforcement agencies 5- Children 5-14 years 6-Housewives7-Aged above 70 years and 8-Migrants workers.

The researchers combined a structured survey with variant groups and personal interviews. While the structured survey supported the systematic data collection over the social media platform. Personal interviews were conducted over the phone. The impact factor was calculated with total of 120 points with maximum 10 impact factor point (IFP) in each category.

Survey implementation

The survey was implemented in the different cities of India with help of academicians and friends The questionnaire was designed based on the research questions, after which the stratification and identification of respondent done by team of research groups.

Efforts were made to ensure that all respondents were appropriately informed about the study and thoroughly understood their participation in the study was voluntary. Participation and interviewers ensured that participants knew that refusal to participate would not lead to any adverse consequences. During our surveys, we found that lockdown caused greater damage than COVID-19, sets of symptoms were different in different selected categories. Each category was asked to rank Between 1 to 10 as per negative impact on human behaviour /mental health /physical health or physiological health. Observation of present study will certainly provide a base for descriptive research to analyse societal loss of Lockdown in India.

RESULTS

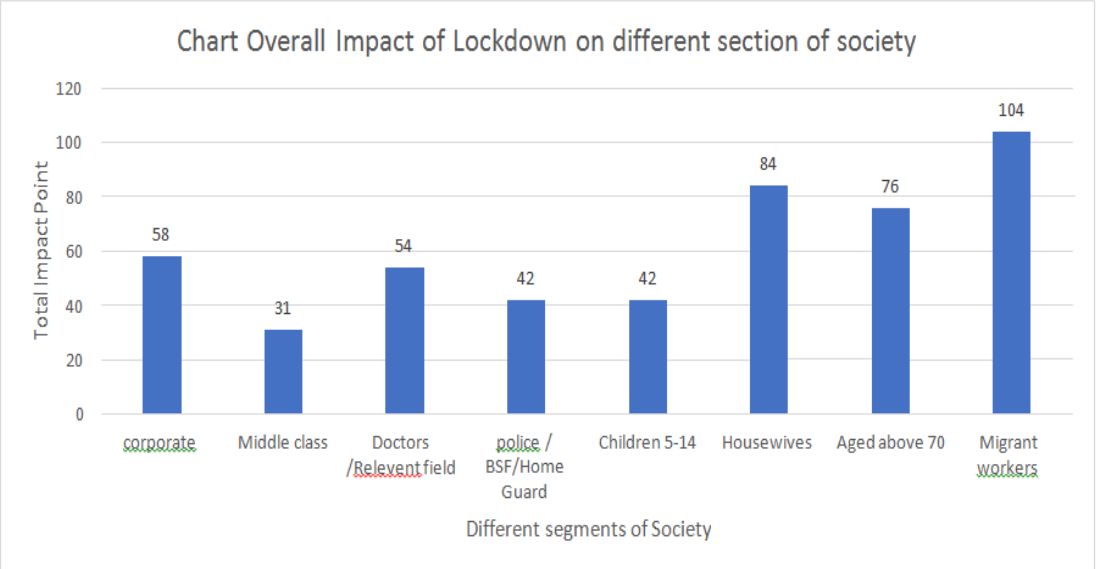
After 3 months of lockdown our results were very astounding; it was not COVID-19 but lock-down, causing great uncertainties hopelessness and disturbance in society. 63% of People above 70 years of age with impact factor of 76 facing a toxic level of stress, mental depression and social trust leading to hypertension, heart attack, sickness, mental trauma, hopelessness. An extreme level of phobia we have witnessed in old aged people and most of them were passing through great mental stress, the researchers regret to mention here few of them got stroke and passed away, neither we can prove it nor we want to include in our present study. Depressive symptoms were independently associated with a history of loneliness and depression, and found in all the categories. Depression was also correlated to high Internet addiction.

86.6% of migrant workers have lost their appetite and suffering from insomnia, the migrant workers faced severe depression of returning to hometown, financial stress, health wellness ultimately directing towards Mental shock, uncertainty, home sickness, withdrawal syndrome, suicide, confusion, sickness.

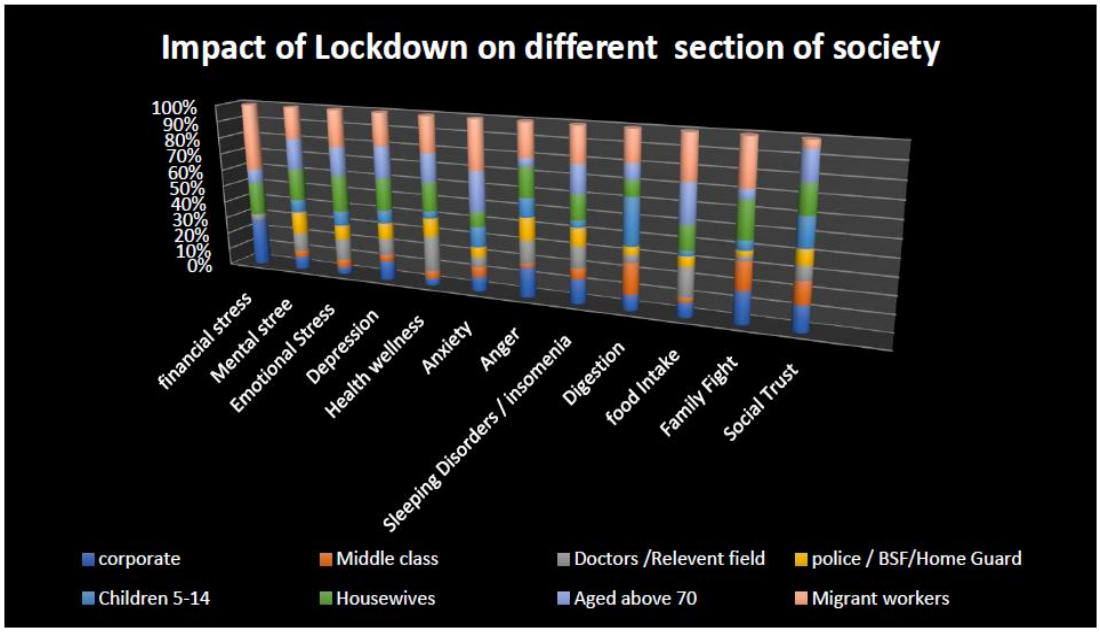
The study revealed 48.3% of corporate with impact factor 58 facing bankruptcy, withdrawal syndrome, suicide, health issues, physiological and psychological problem, losing confidence in business, agony and high blood pressure whilst 35% of police / BSF/Home Guard (front line workers) with impact factor 42% played a very crucial role in implementing the lockdown across India facing mental and physical tiredness and getting expose to Covid-19.

The researchers found out that 56% housewives experienced exceptional and added stressors of dealing with toddlers, serving family, Health issues, mental pressure, hypertension, domestic violence suicide, divorce which impacted psychological wellbeing," as a result of the lockdown. The health care workers 45% of them with impact factor 54 are suffering from physically and mentally tiredness and home sickness due to constant battle against Covid -19 and dealing with Covid -19 patients.

25.8% of middle class salaried individual with impact factor of 31 is dealing with family issues and financial stress whereas 35% children under 14 years of age with impact factor 42 spend most of their time with mobile, watching TV, lacking social trust leading to Loneliness, increase TV screen time, mobile addiction, low confidence, no or less physical activities etc. The use of internet and the change in sleep patterns to survive with the lockdown lead to lockdown syndrome, leaving behind a lasting unsympathetic impact even after the lockdown.



Graph 1: Bar diagram showing total impact point in different section of Indian society during lockdown.



Graph 2: Distribution of various social, psychological and health disorders in different sections of Indian society during lockdown.

Recommendations

Conversely, the qualitative part of the study reveals that pliability and well coping strategies helped even high-risk individuals such as people above 70 years of age to stay optimistic. People with old age requires Continuous counselling, engaging in family get-together is good way to reduce mental stress and depression in aged people.

Doctors should be provided training for pandemic management. Incentives, insurance and extra care should be provided to these warriors.

For migrant workers; the study reveals the only positives support they have with them is social trust. Assurance of continuous work and payment during lockdown or partial monetary support and fulfilment of basic need would have been certainly more effectively than anything else.

House hold work should be shared by every member in family. Morals of housewives should be high enough and support message should go from celebrity or politician. (Generally, it is ignored by society), For children under 14 years of age, Schools should broadcast participative online mind exercises class wise, as all the children are familiar to each other, their participation will keep them engage and entertain. story development, quiz, painting competition, singing, mono acting etc. can be introduce apart from awareness about pandemic during lockdown. Thus, lockdown should be viewed as a good time to cogitate on their personage and social identity, and motivating to improve their associations with their families and loved ones.

CONCLUSION

The researchers found that lock down exaggerate impact of COVID-19. Every segment in our research suffering from mental research and 50% of people opted lockdown more dangerous than COVID-19. Lock- down itself an abnormal forceful situation for human causing many social, mental and physical abnormalities can be cover a separate umbrella- the Lock-Down Syndrome (LDS). Our mental health system is bare to handle the requirements of the population of various background, the general population needed a better mental health system soon. With the help of social media, tele-consultations, online consultations, supported counselling's, developing family associations and interactions can promote resilience in housewives, older aged people and healthcare workers, and make them more convinced in their capability to administer stressors in the future. The mental health system and mental health professionals needs to address various problems with solutions. When the Covid-19 catastrophe comes to an end, the psychological health emergency is going to surface, and we must be prepared. Sometime in future human might be preparing for lock-down to safeguard human species from disease, war or disaster will take care of impact of LDS.

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