

Challenges of COVID 19 for Patients with Atopic Dermatitis

Yen-Hsiang Wang*

Medicine of School, Taipei Medical University, Taiwan

***Correspondence author**

Yen-Hsiang Wang
Medicine of School
Taipei Medical University
Taiwan

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Patient's viewpoint

I am a patient born with atopic dermatitis. From an early age, I have realized that my illness is not just related with the environment and diet. More often, it is my own psychological state that has a strong effect on my condition. Whenever there are huge changes around me, my condition always gets worse due to my mood swings. Worse still, the condition of the disease often affects my emotions, which causes a vicious circle.

Since the outbreak of COVID-19, my mental state had ever became quite terrible. The main reasons included social isolation, fear of being infected by the virus and being unable to go out for a walk. Hence, it is conceivable that my bad mental state also made my condition worse. Even worse, because of the outbreak of COVID-19, I dared not go to the hospital for medical consultation and treatment, which also made my condition much worse. Finally, when the epidemic eased, I decided to go back to the hospital to see a doctor again. My doctor mentioned that the condition of atopic dermatitis was often related to psychological pressure and anxiety, and the condition might also affect the psychological condition of the patients. Therefore, in addition to doing the corresponding treatment, I must also pay attention to my own mental state. In view of this, after seeing the clinic, apart from taking medication regularly, I also paid more attention to my psychological state. I even went to see a psychiatrist, even though it was something I never thought about.

After two weeks of hard work, I found that my psychological condition had gradually improved, and my condition had also improved. Besides, due to the epidemic, many courses had been changed to distance teaching, which also gave me more time to take care of my physical conditions and my mental state.

Based on the above, I feel that COVID-19 can be a crisis for patients with atopic dermatitis, but it can also be a turning point.

Clinician's comments

It is well known that the psychological anxiety and stress of patients with atopic dermatitis often make their condition worse

and even cause a vicious circle (Sanders & Akiyama, 2018; Aihara et al., 2000). In the face of the outbreak of COVID-19, this issue is even more important and obvious (Hossain et al., 2020 Jun 23; Dong & Bouey, 2020). In the face of the arrival of COVID-19, sometimes the treatment of patients with atopic dermatitis is not only a traditional treatment, but psychological adjustment can sometimes be more helpful to the condition of patients. Therefore, in addition to giving relative treatment to the needs of patients, we may also have to consider whether to refer patients to psychotherapists. Only in this way can we truly help patients control their condition.

COVID-19 has more or less corresponding impacts on medical staff and patients themselves (Gold, 2020 May 5), but we also need to think about whether we can use this opportunity to turn the crisis into a turning point and find a way to help our patients live a better quality of life.

Conclusion

The outbreak of COVID-19 has indeed changed our lifestyle, and at the same time, it has brought anxiety and stress to our lives. However, through this clinical case, we want to let everyone know that in the face of this sudden epidemic, sometimes it's not only just a crisis. Maybe we can find a corresponding way and turn it into a turning point just like this clinical case. We not only should give treatment to our patients with atopic dermatitis, but also should help them stable their psychological status through psychological counselor. Only by doing so can we help our patients live a better life and successfully control their condition.

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