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COVID-19 Lockdown effect: surge of alcohol withdrawal cases in emergency department

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Abstract

States around the world has imposed lockdown to mitigate with COVID-19. This has caused unavailability of commodities including liquor. After lockdown, we observed increase in the number alcohol withdrawal cases in Emergency department of Patan hospital, Nepal. In contrast, during post-earthquake period in 2015 there was increase in number of alcohol intoxication cases. During pandemic time, along with managing COVID-19 cases, other alarming public health concerns should be noticed and necessary health support needs to be planned.

Keywords: alcohol withdrawal, COVID-19, lockdown

As the causation of morbidity of pandemic coronavirus disease 2019 (COVID-19) has been demystifying, various indirect impacts of public health concerns are yet to be known. In an attempt to mitigate COVID-19, states around the globe has stricken measures with lock down and social distancing. This has led to difficult access to food, daily commodities and also liquor. Lockdown was imposed in Nepal on 24 March 2020 following this there was sudden decline of patients in emergency department of Patan hospital, Nepal. On the contrary, we saw increase in the number of patients with alcohol withdrawal after lockdown. Alcohol withdrawal cases comprised 0.16 percent of total cases of emergency visits before lockdown, while it increased to 0.9 % after lockdown.

The Problem- Going back to 2015 earthquake of a 7.8 magnitude in Nepal, there were 22,000 injuries and 9000 deaths reported.¹ In post-earthquake period life was difficult with unavailability of food and daily commodities. At Patan hospital, an increase in alcohol related problems were observed. The number of alcohol intoxication cases increased by 2.6%, however there was a decline in alcohol withdrawal cases by 1%.² The study also emphasized the need of psychiatric care in post disaster planning with the rise of alcohol related complaints which was due to increased psychosocial stressors.

Nature of COVID-19 disaster this time is different. It is long standing, and due to lockdown, the alcohol related problems that we are observing in this outbreak is different than 2015 earthquake in Nepal. There are more withdrawal than intoxication, probably due to unavailability of alcohol. Alcohol withdrawal cases increased from 0.16 percent of total cases of emergency visits before lockdown to 0.9 % after lockdown.

Most governments, including Nepal, have responded to COVID-19 by advising people to wash hands, social distancing , remain indoors to save own and others life. In the meantime, as a consequence of the pandemic there are

other public health conditions like alcohol withdrawal syndrome, which should also be noticed and necessary health support needs to be planned.

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Conflict of Interest

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