

COVID-19 and the Brain

COVID-19 pandemic has presented societies with unprecedented health and social challenges that continue to evolve. There is an accumulating body of evidence that COVID-19 associated stress and fear, economic and social uncertainties, and implementation of strict social isolation strategies cause serious mental health problems, such as depression, anxiety, stress related disorders and addictions among other. Increasing incidence of the COVID-19 associated undiagnosed and untreated mental health disorders can subsequently impair work productivity and post-COVID-19 economic recovery resulting in stress and mental health problems causing a vicious circle. Mental health sequelae of prolonged social isolation and deprivation of meaningful social contacts can also carry its toll for the young generation for years to come. COVID-19 imposed mental health challenges threaten to overburden already limited mental health resources. Thus, there is an urgent need to adapt the existing healthcare systems and to implement novel and innovative approaches to meet the growing demand for mental health services, especially for the most vulnerable populations.

Aside from stress induced mental health problems, there is already some evidence that the SARS-CoV-2 virus can have neuroinvasive potential. For example, a substantial proportion of COVID-19 patients experience neurological symptoms, the SARS-CoV-2 RNA was detected in the cerebrospinal fluid and angiotensin-converting enzyme (ACE) 2, which is used by the SARS-CoV-2 virus to access cells, is expressed in neurons and glial cells. Further research will help to unveil more light whether the SARS-CoV-2 can cause clinically meaningful CNS damage and disturbance of normal brain functioning.

This special issue of the Journal was initiated in the pre-COVID-19 era with goal to review management of depression in Lithuania. As it turned out, the need for this knowledge is more important now than it was before. In this issue, we present a balanced review of epidemiology of depression and suicide ideation in Lithuania, discuss depression assessment scales used in Lithuania, review depression management in primary care setting in Lithuania and Latvia, analyze academic productivity of psychiatrists in Lithuania, and also investigate suicidal ideation in medical students in Lithuania.

I would like to cordially thank authors and editorial team members for their efforts to construct this timely and important special issue.

Please keep safe and well.

Sincerely,

Adomas Bunevicius MD, PhD