Coronavirus: Not all physical health symptoms are physiological
As a primary care physician, you are on high alert for people with flu-like symptoms, which may in fact, be coronavirus (also called COVID-19). Your office is preparing for what that means: altering schedules to allow for more appointments; disinfecting surfaces; taking measures to protect your staff; and more.

However, what may take you by surprise are the behavioral health ramifications of a public emergency such as COVID-19. Patients may be coming to your office with symptoms that on the surface appear to be physical, but really are manifestations of a mental health condition. Chest pain and shortness of breath, for example, may not be a heart-related problem but a symptom of stress and anxiety.

During times such as these, be on the lookout for symptoms that may have a mental health cause. Once you eliminate any physical health explanation, consider referring your patient to a mental health provider. As a reminder, the following are symptoms of stress and anxiety, which may require the help of a mental health specialist.

- Intense worry
- Fatigue
- Panic
- Obsession
- Nightmares
- Muscle tension
- Headaches
- Sleep problems
- Rapid heart rate
- Shortness of breath
- Chest pain
- Sweating

Natural disasters, including pandemics, can lead to mental health problems ranging from 5% to 40% of the population, although most fall in the lower half of this range.[1]

In the meantime, you can provide some common-sense tips to help your patients through any anxiety they may be having about the coronavirus.

1. *Take control of the situation*. People can take proactive steps to limit their susceptibility to the coronavirus, such as hand-washing; not touching their eyes, nose and mouth; and disinfecting their homes and work areas. For more suggestions, refer to the [Centers for Disease Control (](#)CDC) and [World Health Organization](#) (WHO) websites.

2. *Take care of yourself*. Advise your patients to eat nutritious food, exercise, limit alcohol consumption and make sleep a priority and to stay connected with family and friends so that they're not socially isolated.

3. *Stay informed by learning the facts*. The news isn't always accurate. Remind your patients to get their information from authoritative sources, such as the CDC and the WHO.

4. *Think about the impact one has on others*. Patients need to take care of themselves and take preventative measures more seriously. Communicating with family and friends about those measures is a form of positively affecting others.

5. *Limit media exposure to coronavirus news*. Today's news cycle is 24 hours, and the exposure can be overwhelming, regardless of the topic.

6. *Let it go*. Encourage your patients not to dwell on what may or may not happen regarding the coronavirus. Advise them to change what they can and let the rest take its course.

If you have a patient who opts not to see a mental health specialist, you can suggest they call the Substance Abuse and Mental Health Administration's Disaster Distress Helpline at 1-800-985-5990, a 24/7, 365 day-a-year, free national hotline that provides immediate crisis counseling. It is toll-free, multilingual and confidential.