

Abstract

Objective of the current study was to investigate behavioral risk factors, clinical and psychosomatic state in patients with chronic noncommunicable diseases (NCDs).

Materials and Methods. This multicenter simultaneous study included 351 patients from 10 cities and 5 countries (Russia, Azerbaijan, Kazakhstan, Lithuania, Kyrgyzstan. Men and women aged 30–69 years with at least one NCD who were self-quarantining during COVID-19 were included. NCDs included arterial hypertension (HTN), coronary artery disease (CAD) with or without history of acute myocardial infarction, cancer treated with radiation and/or chemotherapy, type 2 diabetes (T2D), chronic obstructive pulmonary disease (COPD) or asthma. All patients were asked to fill special questionnaires. We also performed routine physical exams that included blood pressure and heart rate measurement and body mass index calculation (BMI).

Results. Most patients (n = 236, 68 %) had HTN, 30 % had CAD (n = 103), 25 % had T2D (n = 88), 12 % had COPD (n = 40) and only 7 % had cancer. In general, one in four patients with at least one NCD self-isolation was associated with decreased quality of life and health. Hypertensive emergency happened in 78 patients, and 21 % required higher doses of antihypertensive medications. Angina symptoms worsened in 6 %. Among patients with T2D, 34 % required higher doses of diabetes medications. Only 5 % of patients with COPD and cancer noted any worsening of their symptoms. 138 people (40 %) stated that they had less physical activity and 34 (10 %) — that they were more active during the quarantine. 35 % (n = 122) stated that they ate more often during self-quarantine and 4 % (n = 14) stated that they were more successful in sticking to a diet. 55 % (n = 192) stated that they had mild stress during quarantine and self-isolation; moderate level of stress was identified in 39 % (n=137) and severe stress — in 7 % (n = 22) of all the respondents. 43 % (n = 151) suffered from mild depression and anxiety and severe depression and anxiety were identified in 5 % (n = 15) of all patients.

Conclusion. During quarantine and self-isolation patients with CNDs had some worsening of their clinical status requiring higher doses of medications. Most people exercised less and had worse diet during self-isolation. One in two patients with CNDs had moderate levels of chronic stress and mild depression and anxiety.

Keywords. Risk factors, psychosomatic status, CNDs, COVID-19 pandemic.