



EXPERIENCES OF COVID-19 CONFIRMED PATIENT DURING TREATMENT IN A COVID-19 ISOLATION ROOM: SYSTEMATIC REVIEW

Rafika Nur Siregar^{1*}, Mula Tarigan², Jenny Marlindawani²

¹Sekolah Tinggi Ilmu Kesehatan Malahayati Medan

²Universitas Sumatera Utara, Medan, Indonesia

*Corresponding author: rafikanur47@gmail.com

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ABSTRACT

Isolation is an unpleasant experience. Changes in the environment, physical isolation from loved ones and boredom cause negative effects that can deteriorate the health of confirmed COVID-19 patients. Explorasi of the experiences of COVID-19 confirmed patient from several research articles aims to help identify the quality of life of patient with confirmed COVID-19. Methods: PRISMA is used for evaluation of research results. SPIDER to formulate research question with the database used by PubMed, CINAHL, Proquest, and Google Scholar. JBI is used to extract analyze data. Results: 6 qualitative studies included in the review. The experiences of 108 COVID-19 confirmed patients with 32 findings resulted in 7 categories based on similarities in meaning and three themes that were synthesized from categories, namely the physiological response of patients with confirmed COVID-19, the psychological response of patients with confirmed COVID-19, and treatment in health facilities. Conclusion: patients with a confirmed COVID-19 experience various responses while undergoing treatment in the COVID-19 isolation room. In response to this response, patients with confirmed COVID-19 apply different coping mechanisms. In this condition, social support is an important factor in supporting the recovery of patients with confirmed COVID-19. Providing services in the COVID-19 isolation ward needs to rely on and understand the natural conditions of patients with confirmed COVID-19 by developing appropriate intervention strategies.

Keywords: *Experience, patient confirmed, COVID-19, isolation room*

ABSTRAK

Isolasi merupakan pengalaman yang tidak menyenangkan. Perubahan lingkungan, isolasi fisik dari orang terkasih, dan kebosanan menimbulkan dampak negatif yang dapat memperburuk kesehatan pasien COVID-19 terkonfirmasi. Eksplorasi pengalaman pasien terkonfirmasi COVID-19 dari beberapa artikel penelitian bertujuan untuk membantu mengidentifikasi kualitas hidup pasien COVID-19 terkonfirmasi. Metode: PRISMA digunakan untuk evaluasi hasil penelitian. SPIDER untuk merumuskan pertanyaan penelitian dengan basis data yang digunakan PubMed, CINAHL, Proquest, dan Google Scholar. JBI digunakan untuk mengekstraksi dan menganalisis data. Hasil: 6 studi kualitatif disertakan dalam tinjauan. Pengalaman 108 pasien terkonfirmasi COVID-19 dengan 32 temuan menghasilkan 7 kategori berdasarkan kesamaan makna dan tiga tema yang disintesis dari kategori tersebut, yaitu respons fisiologis pasien COVID-19 terkonfirmasi, respons psikologis pasien COVID-19 terkonfirmasi, dan perawatan di fasilitas kesehatan. Kesimpulan: pasien COVID-19 terkonfirmasi mengalami berbagai respons saat menjalani perawatan di ruang isolasi COVID-19. Menanggapi hal ini, pasien COVID-19 terkonfirmasi menerapkan mekanisme coping yang berbeda-beda. Dalam kondisi ini, dukungan sosial merupakan faktor penting dalam mendukung pemulihan pasien COVID-19 terkonfirmasi. Pelayanan di bangsal isolasi COVID-19 perlu mengandalkan dan memahami kondisi alami pasien COVID-19 terkonfirmasi dengan mengembangkan strategi intervensi yang tepat.

Kata kunci: Pengalaman, pasien terkonfirmasi, COVID-19, ruang isolasi



INTRODUCTION

February 11, 2020, WHO officially established the novel coronavirus disease in humans as COVID-19 with the virus named SARS-CoV-2 by ICTV (Dhama et al., 2020). March 11, 2020. WHO declared COVID-19 a global pandemic (Yang et al., 2020). Based on WHO data, cases of COVID-19 globally reached 140.332.386 and 3.004.088 cases died (WHO, 2021).

Isolation is an unpleasant experience, especially for people who live it. This is influenced by factors of environmental changes, physical isolation from loved ones, acceptance, confusion and curiosity which can have a negative effect on patient with confirmed COVID-19 (Ndejjo et al., 2021). The negative effects experienced by patients with COVID-19 can cause a decrease in the immune dysregulation which can worsen the health condition of patient with COVID-19 (Kaligis et al., 2020).

Patients with confirmed COVID-19 tend to experience stress related to conditions experienced which can affect their physical, emotional, mental, social and spiritual conditions (Kasapoğlu, 2022). Systematic reviews related to exploration of experiences of COVID-19 confirmed patients from several articles can help in identifying the quality of life of patients with COVID-19.

METHOD

Systematic reviews were carried out to synthesize evidence of patient experience with confirmed COVID-19. Systematic review evaluations are carried out using the PRISMA checklist of items which is recognized as a systematic review report.

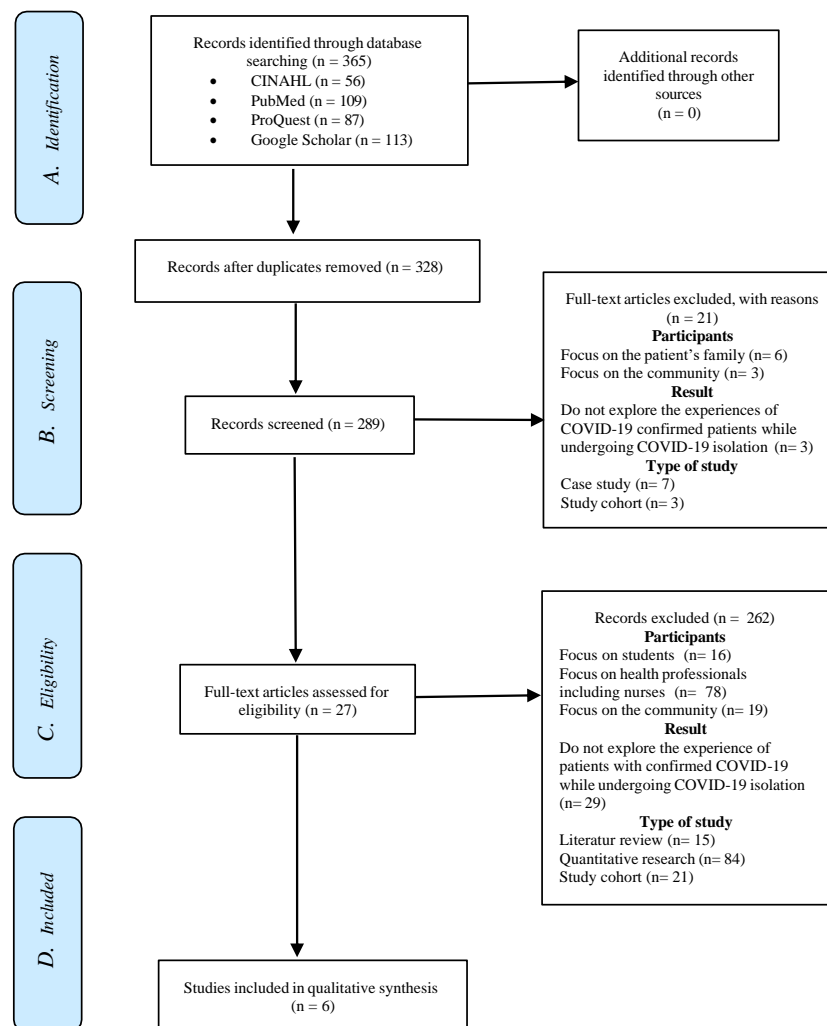
Search strategy

Electronic databases namely PubMed, CINAHL, ProQuest, and Google Scholar were searched in January 2021 to identify relevant studies. SPIDER format used in the formulation of research questions tailored to the inclusion and exclusion criteria. The search strategy in the database is carried out with four groups of keywords that are adjusted to SPIDER and combined with boolean operator AND, OR and NOT. The search strategy is (experience AND patient COVID-19) AND (infection) (lived experiences AND patient with COVID-19) (clinician experience AND patient) OR (COVID-19) (life experience AND patient COVID-19) NOT (quantitative). Qualitative studies published in English in 2020 and 2021. The deadline set due to the COVID-19 pandemic occurred in December 2019.

Study selection

There were 365 publications retrieved from the database search. Duplicate publications (n=37) were removed, bringing a total of 328. Next the researchers screened and assessed the titles and abstracts (n=289) and full text (n=27) of each publication that fit the inclusion criteria for full-text review requirements. During the screening process the reasons for exclusion included irrelevance namely focusing on students, focusing on health professionals including nurses, focusing on the community, and focusing on the family as caregiver. Besides this, the study reasons are not relevant because of the type of quantitative research, systematic reviews, cohort studies, and case studies. So that the results of studies that meet the inclusion criteria are obtained, namely 6 studies.

PRISMA 2009 Flow Diagram



Assessment of study quality

Assessment in qualitative studies, namely JBI as evidence and methods used to synthesize various types of research evidence (Button et al., 2022). The JBI critical assesment list for qualitative research consists of 10 assessments. Criteria with a “yes” score are assigned one point. After that the total score was calculated for each study. The critical assessment of eligible studies was carried out independently by three researchers (RNS, MT, JMP). All uncertainties regarding the methodological quality of the studies were discussed and agreed upon. A study is entered on a systematic review if it scores at least 70% on a predetermined critical assessment and is agreed upon by the three researchers.

Data extraction and analysis

Data was retrieved using a standard data extraction tool JBI (Button et al., 2022). Extracted data included country, number of partisipants, participant demographics (age and gender), study design, data collection and analysis, and study findings. The study that extracted only patients with confirmed COVID-19 who underwent COVID-19 isolation. The qualitative findings were assessed based on JBI’s level of credibility (Munn et al., 2014). Finding were collected using the meta-aggregation method. This process involves gathering findings on sub-themes from individual studies and categorizing finding based on similarity of meanings. Furthermore, the synthesized findings are developed and can be used as a basis for understanding the quality of life of patients with confirmed COVID-19.

Table 1. Critical assessment

Quote	Criteria										Result	
	1	2	3	4	5	6	7	8	9	10		
Jesmi, Mohammadzade-tabrizi, Rad, & Hosseinzadeh-Younesi (2021)											Y	8/10 (80%)
Aliyu, Travers, Norful, Clarke, & Schroeder (2021)											Y	9/10 (90%)
Olufadewa et al. (2020)											Y	8/10 (80%)
Wang, Liu, She, Wang, Feng, & Hsiao (2020)											Y	8/10 (80%)
Shaban et al. (2020)											Y	8/10 (80%)
Moradi, Mollazadeh, Karimi, Hosseingholipour, & Baghaei (2020)											Y	8/10 (80%)

*Note: Y = yes, T = no

1. Is there a match between the philosophical perspectives put forward with the research methodology? 2. Is there a match between the research methodology and the question or objective of the study? 3. Is there a match between the research methodology and the methods used to collect the data? 4. Is there a match between the research methodology and data presentation and analysis? 5. Is there a match between the research methodology and the interpretation of the results? 6. Are there any statements that place the researcher culturally or theoretically? 7. Is the influence of the researcher on the researcher, and vice versa, taken into account? 8. Are the participants, and their voices representative enough? 9. Is the research ethical according to current criteria or for recent studies and is there evidence of ethical approval by a customized body? 10. Do the conclusions drawn in the report flow from the analysis, or interpretation, of the data?

RESULTS

Characteristics of the study

The results of 6 qualitative studies involving 108 confirmed COVID-19 patients were included in a systematic review. The study was published in 2020 to 2021 with a research design that is phenomenology. Most of the confirmed COVID-19 patients were women with a total of 56 female survivors of COVID-19 aged > 18-95 years. Study was conducted in China, Australia [10], Nigeria, Iran, and Washington (She et al., 2020; Zhang et al., 2022; Olufadewa et al., 2020; Moradi et al., 2020; Avcı et al., 2023; Yağar, 2021).

The review consisted of 32 research findings that resulted in 7 categories based on similarity of meaning. Based on categorization, three themes were found with the results of the synthesis, namely: the physiological response of patient with confirmed COVID-19, the psychological response of patients with confirmed COVID-19 and treatment in health facilities.

The physiological response of the patient confirmed COVID-19

COVID-19 attacks the human body system causing symptoms in the neurological system, respiratory system, digestive system and systemic (Avcı et al., 2023). The manifestations often experienced by patients with confirmed COVID-19 are fever, persistent dry cough, shortness of breath, chills, loss of appetite, sore throat, headaches, loss of smell and loss of taste fatigue and diarrhea (Olufadewa et al., 2020; Yağar, 2021).

The psychological response of the patient confirmed COVID-19

The psychological response consists of four categories, namely anxiety, isolation in the COVID-19 room, social support and coping mechanisms.

1. Anxiety

Undergoing care in a health facility the majority of patients confirmed with COVID-19 have negative emotions (She et al., 2020). Patients with confirmed COVID-19 feel fear and worry about death with the condition they are experiencing (Yağar, 2021). Because shortness of breath is the main manifestation in causing death as a result, patients with confirmed COVID-19 experience sleep disturbances (Avcı et al., 2023). Crying at the thought of passing on the virus, nightmares and thoughts of suicide and worry about family responsibilities (She et al., 2020).

2. Isolation in the COVID-19 room

Patients confirmed with COVID-19 in isolation face negative and positive experiences that are influenced by limiting contact with patients, medical teams, and experience loneliness (Avcı et al., 2023). Prolonged separation from loved ones causes anxiety and depression (She et al., 2020). Lack of social interaction, physical isolation and limited mobility result in negative emotions (Zhang et al., 2022).

3. Social support

Support is a psychological therapy and is an important factor in the recovery of confirmed patients with COVID-19 (Avcı et al., 2023). Support can be provided by families, spouses, children, colleagues, professional clinical teams and government depression (She et al., 2020). Support from family, loved ones, friends makes COVID-19 confirmed patients feel more loved and more enthusiastic about fighting the COVID-19 disease (Zhang et al., 2022; Olufadewa et al., 2020).

4. Coping mechanisms

Overcoming challenges when infected with COVID-19, patients with confirmed COVID-19 apply different coping mechanisms. Overcoming boredom when isolated can spend time watching television, listening to music, studying (Avcı et al., 2023). Surrender to god, pray, and read al-Qur'an (Yağar, 2021). Read the book (Olufadewa et al., 2020). Use a smartphone and contact family and friends (Zhang et al., 2022).

Treatment in health service facilities

Medical professionals in providing medical services to patients with confirmed COVID-19 consist of two categories, namely professional frontline and treatment uncertainty.

1. Front line professionalism

Patients with confirmed COVID-19 feel happy with the care provided and express appreciation to the medical team (Yağar, 2021). Express satisfied with the quality of treatment

given. The intervention provided by the medical team is in accordance with the stage of development of the disease in a confirmed COVID-19 patient (Olufadewa et al., 2020). The professionalism and quality of care provided can fix concern when infected with COVID-19 (Zhang et al., 2022).

2. Treatment uncertainty

The uncertainty regarding medical care for COVID-19 means that patients with confirmed COVID-19 are receiving excessive medical care (She et al., 2020). As a result, patients with confirmed COVID-19 consume additional medication such as vitamins, soup and herbal medicine (Avcı et al., 2023).

Table 2. Study characteristics included

Research er/ year/ country	Participa nts/ age	Research design	Data collection and analysis	Result
A. Jesmi, Z. Mohamma dzade- tabrizi, M. Rad, and E. Hosseinzad eh-younesi/ 2021/ Iran	14 participants (9 girls and 7 boys)/ 20-60 years	Phenomeno logy	In-depth interviews and Colaizzi method	The three main themes consist of mental tension, physical manifest ations, and coping mechani sms
S. Aliyu, J. L. Travers, A. A. Norful, M. Clarke, and K. Schroeder / 2021/ Washington	15 participants (7 girls and 8 boys)/ >18 years	Phenomeno logy	Semistructured interview and content analysis approach (directed)	Three themes were identifie d, namely panic being diagnose d with COVID- 19, feeling the impact of the diagnosi s, and personal assessme nt of risks in an individu al's environ ment
I. I. Olufadewa et a./ 2020/ Nigeria	39 participants (21 girls and 18 boys)/ 20-95 years	Phenomenol ogy	Interview / video and the Colaizzi method	The three main themes are participa nts 'physiolo gical experienc es, mental health experienc es during the participa nts'
S. Wang, Y. Liu, H. She, T. Wang, X. Feng, and C. Hsiao/ 2020/ Cina	15 participant s (8 girls and 7 boys)/ 13-91 years	Phenomenol ogy	Semi-structured interviews and observations using the Colaizzi method	Five main themes, namely misunder standings related to illness before being diagnose d, negative emotions when diagnose d, psycholo gical sufferers during hospitaliz ation, hopes of going home, and

Research er/ year/ country	Participa nts/ age	Research design	Data collection and analysis	Result
R. Z. Shaban et al./2020/ Australia	11 participants (4 girls and 7 boys)/ 27-61 years	Interpretive phenomenology	Semi- structured interview and the Colaizzi method	support during hospitaliz ation. Consists of five main themes consisting of: Knowin g about COVID- 19, planning and respondi ng to COVID- 19, being infected, living in isolation, life after recovery
Y. Moradi, F. Mollazadeh , P. Karimi, K. Hosseingho lipou, and R. Baghaei/ 2020/ Iran	14 participants (7 girls and 7 boys)/ 29-48 years	Descriptive phenomenology	Interview and the Colaizzi method	Consists of three main themes, namely: Life in uncertai nty, psycholo gical pressure, psycholo gical burden

DISCUSSION

Summary of result

This systematic review resulted in seven categories with three themes that were synthesized: the physiological response of patients confirmed with COVID-19, the psychological response of patients with confirmed COVID-19, and care in health facilities. These findings synthesize what is known in the literature regarding the experiences of patients with confirmed COVID-19 while undergoing COVID-19 isolation. These themes explained that patients with confirmed COVID-19 experienced various challenges such as clinical manifestations, mild to severe psychological, social relationship and care in health facilities (Avcı et al., 2023). A person's health is a condition from being healthy to sick which is naturally dynamis and constantly in order to achieve an optimal or stable condition which is indicated by all system requirements are met. According to Betty Neuman, humans as a client system consist of tive variables, namely physiological factors referring to body structure and function, psychological factors referring to mental processes and interactive environmental effects both internally and externally, sociocultural factors referring to the combined effects of socio-cultural conditions and influences, developmental factor.

Refers to age-related developmental processes and activities, spiritual factor refers to spiritual beliefs and influences (Alligood & Raile, 2018). From this review, apart from experiencing

physiological responses, patients with confirmed COVID-19 also experience psychological responses such as anxiety, panic, and fear of their conditions emotions, and stress. Besides this, social support plays a very important role in the health of patients with confirmed COVID-19. Factors that can affect the psychological health condition of a COVID-19 confirmed patient while undergoing treatment in a COVID-19 isolation room are related to reporting the number of deaths infected with COVID-19, feeling isolated during treatment and care, not being able to be with loved ones and experiencing financial difficulties. In understanding the quality of life of COVID-19 survivors while undergoing treatment in the COVID-19 isolation room, it is important for nurses to pay attention to all aspects of COVID-19 confirmed patients to achieve optimal health.

Strengths and limitations

The review's strengths include the use of standard JBI critical assessment instruments for qualitative studies to assess the quality of the included study methodology. In addition, the potential for bias is reduced through the involvement of more than one reviewer in quality research, data extraction and data analysis. Validity review with repeatability of study findings. The use of a meta-aggregation approach makes it possible to categorize any findings reported in a study without attempting to reinterpret the findings of the authors. Based on the review conducted, there are several limitations, namely (1) this review only includes studies published in 2020 to 2021 using English. Therefore, studies published in other native languages may be excluded. (2) studies related to the experiences of COVID-19 survivors are still being carried out, because many are still focused on biomedicine, the epidemiology of COVID-19 manifestations and the experience of the front line.

CONCLUSION

Patients with confirmed COVID-19 experience various response while undergoing treatment in the COVID-19 isolation room, such as physiology, psychology and treatment in health care facilities. In response to this, patients with confirmed COVID-19 apply different coping mechanisms such as spending time watching television, listening to music, surrendering to God, praying, and reading al-Qur'an, reading books, using smartphones and contacting family and friends. Apart from this, social support is an important factor in the recovery of patients with confirmed COVID-19. As well as health care providers must be aware of and understand the physiological and psychological experiences of COVID-19 confirmed patients by developing appropriate intervention strategies.

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