LONG-TERM SALBI EFFECTS OF THE COVID-19 PANDEMIC ON THE HEALTH OF EXISTING RESIDENTS OF ALCOHOL ADDICTION

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Abstract. *A year after the pandemic was announced, it had greatly exaggerated death predictions with a widespread low mortality rate completely rejected. Initial estimates suggested that restrictive measures would do more harm than good. They are estimated to have a negative impact on millions of people around the world, with significant losses to current and future well-being due to deteriorating mental health, increased mortality from addiction, morbidity, etc.*

Keywords: *Covid-19 pandemic, alcohol addiction, mental health, addiction.*

Introduction. In March 2020, the World Health Organization (who) declared the spread of the new coronavirus disease a pandemic and called on the governments of important states to take "urgent and aggressive measures" to mitigate the spread of the disease and "buy valuable time for health systems". As a result, countries have imposed previously unseen restrictions, known as the "general regime of self-isolation" and the "general quarantine". However, these measures can be a "double-edged sword" [1]: on the one hand, they can slow the spread of infection, on the other hand, leading to various unexpected negative social and economic consequences, as well as negative health outcomes that have not yet been fully determined [2,3].

The purpose of the study: alcohol dependence of the Covid-19 pandemic has a long-term salbi effect on the health of the existing population.

Materials and methods. To accomplish this goal, PubMed searched for limited editions containing news sources in Google Scholar databases and with articles in Russian and English published from January 1, 2020 to March 1, 2021. Search keywords include" COVID-19"," SARS-CoV-2", terms related to mass quarantine (e.g." pandemic"," quarantine"," social isolation"," social distancing"), which correlate with various consequences (e.g." mental disorders"), depression, reduced access to health services, alcohol, etc. Due to the lack of space, it is impossible to include all publications that study the relationship between a new coronavirus infection and health outcomes. Thus, literature review is not a meta-analysis. Instead, at least one article was given for each of the health outcomes resulting from restrictive measures during the pandemic COVID-19.

Research results and discussion. Literature analysis has shown that the benefits of quarantine to prevent the death of covid-19 have not been established [1]. At the same time, there are a huge number of publications every day, which indicate that strict restrictive measures have seriously damaged Health, which has a long-term effect.

The fear and uncertainty associated with the Virus, along with the anxiety and stress caused by isolation and restrictions, exacerbated the mental health problems of the population [2]. According to the Institute's study Psychology of the Russian Academy of Sciences in 2020, every third citizen of Russia complained of symptoms of depression [3]. During the pandemic, the number of Russians who used psychological or psychiatric care increased. The growth was 10-30%, depending on the region, in Moscow and St. Petersburg, the city's population needed help more often than others [4]. Service services YouDo.com and Profi.ru a 3-4-fold increase in demand for the services of psychologists was reported [5]. According to VTsIOM, 14% of Russians in 2020 often had to talk from the heart, "cry with a vest" and receive psychological help. In women (19% and 9% in men) and at ages 18-24 (25% and 19% years old 15-34; 11% - 35-44; 12% - 45-59; 12% - 60 and greater) [6]. Young people turned out to be the most anxious group to face the events of the 2020 crisis with the most concern [7].

The impact of excessive social restrictions on mental health is expected to be catastrophic [8], given the impact observed during previous pandemics [9]. Mental disorders are associated with a 2-fold higher risk of death from all causes, with potentially lost life years averaging 10 years [10].

It can be difficult or impossible to recover a large part of the damage caused by Stress problems, leading to constant suffering that is expected to last much longer than the impact of the pandemic on physical health [17].

The data collected since the beginning of the pandemic cannot be denied that irreparable harm has been done to the mental health of children, adolescents and young people [18]. The survey is almost 30 thousand. In April-may 2020, Russian students of grades 5-11 from 79 regions , conducted by the Research Institute for the protection of Hygiene and health of children and adolescents, showed that the stressful situation in self-isolation and distance education negatively affected the psychosomatic state of children: 83.8% recorded dysfunctional mental reactions at the borderline level. Physical distance and isolation requirements mean that children and young people have lost social contact with others, lack of structured procedures, and low physical activity [20,21].

During the period of self-isolation, 68,3% of Russian schoolchildren showed a decrease in walking time and 55,2% showed a decrease in physical activity. In contrast, the time for homework (59,7%), training with a computer or other gadget (46,7%), communication time on social networks (35,4%) increased. Lack of exercise is not only harmful to the child's physical health, but also increases his risk of anxiety, insomnia and depression [22]. Prolonged use of electronic devices can increase the feeling of difficulty, sadness, and irritability in concentrating, which leads to depression [23].

Many children may have difficulty adjusting to school after quarantine has ended, and have difficulty building relationships with their teachers and peers. Therefore, the restrictions placed on them can have a long-term negative impact on their overall psychological well-being [24].

According to experts, the mental health of children and adolescents in an isolated world is the"time bomb" [25]. This pandemic has long-term negative consequences for children and adolescents compared to adults [26]. Stressful events in early life are known to be associated with neurodevelopmental disorders; social, emotional, and cognitive problems; medical and mental disorders in adulthood; disability; and even previous deaths [27]. Child depression - one of the

most serious consequences of COVID-19-is associated with 66 diseases and a lifetime risk of early death [28].

Many people have been accepted by "fear psychosis" [29], similar to global mass hysteria, which manifests itself in different ways:

- Suicide. Social isolation and feelings of loneliness are associated with the risk of suicide [30]. In Japan, for example, it is estimated that more people (2,153) died from suicide in October 2020 than in covid-19 (2087) [31]. Compared to 2019 rates, the number of Japanese women who committed suicide in October 2020 increased by 82.6 percent. Japan is one of the few countries that publishes statistics that allow you to understand how the pandemic and the measures associated with it affect people's mental health. At the same time, Japan did not even have quarantine, and the spread of COVID-19 itself is not as common as in other countries. According to experts in other states, the suicide rate may be the same or even higher [32]. In Russia, for example, according to the ATC in Nizhny Novgorod, if 2-3 suicides per week were recorded before the period of self - isolation, then 7-8 such cases were recorded [33].

- Self-isolation. Many people almost isolated themselves after quarantine and live in constant fear. According to a VTsIOM poll conducted in the fall of 2020, a quarter of Russians had restricted contact/stayed at home/left for remote locations [34]. Under the influence of the pandemic, Russians kissed less than in 2019 (27% and 40%), pressed each other's hands (35% and 50%), hugged (42% and 55%) and even smiled less when meeting relatives and friends (34% and 41%). and with colleagues (27% and 46%) [35].

- Stigma and discrimination. Stigma and reports of discrimination are associated with fear psychosis. The disease caused social stigma towards groups of infected people and their families [6].

-Fear of COVID-19 testing. Many people are not tested for fear of the consequences of a positive result (forced isolation/quarantine, and ostracism by others) [7].

In addition, the endless news of the media made the situation more complicated [8]. Fear and panic from misinformation related to Covid-19 can have long-term effects on people's mental health.

The decline in access to health care services during the pandemic saw other non-COVID-19 related diseases fall to the side of the road. Operations were delayed due to reassignment of medical facilities to treat patients with new infections or quarantine closure. In addition, patients who feared hysteria in the media, including those with life-threatening illnesses, avoided hospital visits and operations, thus endangering their health and life.

According to a survey of doctors during the period of COVID-19 restrictions in 6 countries in may-June 2020, 78% of participants recorded a decrease in the number of patients visiting the clinic [9]. From mid-March, hundreds of thousands of planned operations in Russia were delayed. There is no official data, but it is clear that this number will be at least six-digit [10]. For example, in England, weekly hospitalization for coronary syndromes decreased by 40% only from mid-February to late March 2020 [11]. About 1 million mammograms were passed in the UK. It is estimated that the pandemic will also affect other primary prevention programs. Delay in diagnosis and treatment can lead to the development of the disease and affect the survival of patients. For example, in the United Kingdom, the number of deaths due to delayed diagnosis is expected to increase by 7,9-9,6 percent for breast cancer, 15,3–16,6 percent for colorectal cancer, 4,8– 5,3 percent for lung cancer, and 5,8–6,0 percent for esophageal cancer [12].

Children's disease appeals have been reported to be delayed due to parents ' concerns about COVID-19 infection in medical facilities or public transport, lack of care for other children (especially for single parents), inability to use medical care due to the closure or change in the rules for visiting medical facilities (e.g. parents should visit medical facilities)leaving their children alone in the hospital). In a number of countries, pediatric unit visits and hospitalizations decreased by 73-88 percent during the isolation period compared to the same period in previous years [13].

The closure of medical facilities, combined with parents ' fear of visiting, has led to widespread or delayed regular vaccinations of children, threatening a decrease in herd immunity and the resumption of future preventable infectious diseases. In the spring of 2020, more than half (53%) of the 129 countries with data on vaccine discontinuation or complete discontinuation reported. Thus, a survey of Pediatricians in the United States showed that the number of vaccinations in April 2020. for measles, mumps and rubella, an increase of 50% compared to two months ago, and 42% for diphtheria and pertussis [14].

Death rates have increased in many countries, including Russia [47.48]. The reasons are not known for certain. In addition to the coronavirus death itself, untimely care can contribute significantly to the increase in mortality. For example, in the UK, during the first wave of the disease from late March to early may 2020, 16,000 people died due to this and 25,000 died from coronavirus [15].

Malfunctions in medical care associated with COVID-19 can lead to an increase in the incidence and death of infectious diseases (HIV(AIDS), malaria, tuberculosis) [16]. For example, globally isolation is estimated to cause an additional 6.3 million TB cases from 2020 to 2025 and another 1.4 million deaths from this disease [50].

Restrictions on the use of medical care and food safety are predicted to lead to a catastrophic increase in deaths of children and mothers: in 118 low-and middle– income countries, this can be 9,8-44,8% for deaths of children under 5 years of age and 8,3-38,6% for maternal deaths each month for six months [17].

Physiological and mental harm to health from wearing masks with the advent of the Covid-19 pandemic, we have faced the introduction into our lives of a number of almost scientifically unsupported medical practices to reduce the spread of these and other respiratory infections [18]. However, there are studies that prove the risk of wearing any type of mask, especially for a long time.

One of the most common adverse effects is headache associated with hypoxia (decreased oxygen levels in the body or individual organs and tissues) and/or hypercapnia (increased carbon dioxide (CO2) in the blood) [19]. Hypoxia is associated with immune disorders: it can suppress the type of basic immune cells used to fight viral infections and enhance the effects of these infections. That is, wearing a mask increases the risk of infecting people and leads to a more severe course of the disease. Hypoxia also contributes to the emergence, development and metastasis of cancer, reducing the survival rate of cancer patients [20].

Prolonged use of the mask increases germs, penetrates the lungs, and contributes to advanced lung cancer. Repeated episodes of hypoxia are an important factor in atherosclerosis and therefore increase the risk of cardiovascular and cerebrovascular diseases [21].

Side effects such as rashes and other skin irritations have also been reported [59]. Dermatologists have even developed the term "mascne" to describe the appearance of acne near

the mouth as a result of wearing a mask. Dentists warn about 50% of the risk of gum disease and tooth decay [22] even those who have never had such problems before, this is due to the accumulation of bacteria in a CO2-rich environment that is low in oxygen. Wearing a mask reduces performance, causing disorientation and cognitive impairment. The risk of wearing a mask during exercise was found [23].

Wearing a mask has negative psychological and psychiatric consequences, as it "loses its sense of deprivation of liberty and autonomy and self-determination", which can lead to suppressed anger, "especially because wearing a mask is required and required mainly by others" [24]. Masks cause anxiety and Psychovegetative stress reactions, increase in psychosomatic and stress-related diseases and depressive disorders, decreased participation, social isolation. In addition, the hypercapnic state causes panic attacks.

Scientists talk about physical, psychological and behavioral harm, the mask is applied to children who are forced to wear it. The first type of study, which collected data on more than 25,000 children, showed that about 68% of them had health problems that forced them to use the mask for an average of four and a half hours a day [25]. Children experience headaches (53%), difficulty concentrating (50%), restlessness (42%), decreased learning ability (38%), drowsiness or fatigue (37%), shortness of breath (29.7%), dizziness (26,4%), fainting (20%). Parents noted that their children were more nervous (60%), less cheerful (49%), did not want to go to school/kindergarten (44%), slept worse (31%). In a quarter of children, new fears appeared.

Thus, masks not only do not protect healthy people from diseases, but can also have fatal consequences for their owners.

A VTsIOM poll in April 2020 found that the majority of Russians (80%) stopped walking or reduced the number of walks due to coronavirus [26]. Lack of walking can be associated with less exposure to sunlight and, as a result, a sharp decrease in vitamin D levels, which can pose a risk to the health of the population. Vitamin D deficiency is known to be associated with Type 1 and 2 diabetes, cognitive decline, malignancy, autoimmune, cardiovascular disease, osteoporosis, and overall death [27].

A sharp decrease in physical activity is one of the most obvious consequences of complete isolation, which leads to serious sleep problems and psychological disorders (stress, anxiety, depression) and subsequently increases the risk of osteoporosis, diabetes, cardiovascular disease, cancer, dementia, overweight/obesity [28].

Studies show negative changes in the population's eating behavior during the COVID-19 pandemic. People in quarantine began to eat larger amounts of food, sweet and fried foods [29]. A VTsIOM survey found that 11% of Russians began to eat less healthy food, more "tasty-unhealthy", and 12% ate less regularly. This problem particularly affected young people aged 18-24 (13% and 18% respectively) and 25-34 (20% and 16% respectively). One of the most important consequences of physical inactivity and negative changes in eating behavior is the risk of weight gain, up to the development of obesity, accompanied by many metabolic disorders, resulting in an increased risk of many pathologies such as diabetes, cardiovascular disease, pulmonary embolism, cancer, osteoarthritis and disability [30].

During the COVID-19 pandemic, alcohol consumption was reported to increase in different countries, both in general and for a separate demographic. Causes of increased alcohol consumption include increased stress (45.7%), increased alcohol (34,4%), and boredom (30,1%) [31]. In Russia, the consumption of strong alcohol (vodka (5,1%) and alcohol with an alcohol

content of less than or less than 25% (5,1% and 7,3%, respectively) increased; the popularity of online alcohol delivery searches (three times and only 25% in April 2020); alcohol crime (12,4%) [32]. The increase in alcohol consumption is of particular concern because it has severe consequences in the short term (e.g. fall or burn injury) and long term (e.g. developing cirrhosis or liver cancer). Alcohol abuse is associated with more than 200 illnesses and deaths due to accidental injuries [33].

In deciding on measures against the pandemic, "a false dichotomy between saving lives and saving lives prevailed" [34]. As a result, the dramatic increase in unemployment and part-time employment has become a characteristic feature of the COVID-19 pandemic in many countries. According to VTsIOM surveys, the number of Russians who reported negative changes in employment status was 16% in early may 2020 and 12% in late June [35]. Losing a job disrupts social interaction and reduces material resources, which are important determinants of Health. In 2020, the poverty rate is estimated worldwide that is 8,8%. It is estimated that an additional 71 million people live in extreme poverty due to COVID-19 [36].

An analysis of the impact of job loss on mental and physical health during the COVID-19 pandemic found that working people who lost their jobs at the beginning of the pandemic reported psychological stress and poor mental and physical health [37]. These negative health consequences were mitigated by financial resources and social interactions. According to researchers, the effects of unemployment associated with COVID-19 will be 2-5 times stronger than usual, which will lead to a significant increase in mortality and a decrease in life expectancy [38].

Losses in education researchers are concerned about the impact of the widespread practice of closing educational institutions during COVID-19. As you know, losses in education are one of the strongest losses determinants of health-lead to a deterioration in long-term health and a decrease in life expectancy [39]. Other mechanisms by which the closure of educational institutions can affect the health and well-being of children and young people include loss of learning ability, distance from social support, decreased social interaction, increased mental health problems, decreased physical activity, loss of access to school nutrition programs for the disadvantaged.

Transportation restrictions caused by mass quarantine have affected every stage of the food supply chain, including production, transportation, storage, as well as declining availability due to declining household income levels and rising prices. Food safety has a negative impact on health [40]. This is associated with a risk of anemia 2-3 times for children, a risk of poor health 2 times and a risk of 1.4-2.6 times depending on the age of asthma; and for adults with a decrease in nutrient intake, an increase in mental illness, the development of depression, diabetes, hypertension and hyperlipidemia, poor health and poor sleep.

Domestic violence has peaked in the trend of increasing cases of domestic violence during COVID-19 quarantine around the world. In Europe, in April 2020, the number of 911 calls of women abused by a partner increased by 60%, while the number of instant calls in support of violence prevention increased fivefold [41]. Similar trends have been observed in Russia. Violence affects the health of people, both victims and rapists [42]. The biological effects of violence include exposure to the brain, neuroendocrine system, and immune response; the risk of depression, anxiety, PTSD, suicide, cardiovascular disease, and early death increases.

Discussion. The study conducted focused on the long-term effects of quarantine, social isolation and social distancing on the health of the population during the spread of the new COVID-19 infection.

A year after the pandemic was announced, it was highly exaggerated, predictions of death were completely disproven by the widespread low mortality rate; restrictions involving the virus were excessive; the consequences were severe.

While the exact figures are unknown and have not yet been assessed, it is clear that the identity of the damage caused by non-covid-19 (isolation and other restrictions) is clearly larger than that of coronavirus. This is a condition in which" the drug is worse than the disease itself. According to preliminary estimates, restrictive measures cause "at least ten times" more harm than profit.

They are estimated to have a negative impact on millions of people worldwide, with significant losses to current and future well-being due to deteriorating mental health, increased deaths from drug use, morbidity, etc.

Deaths from untimely medical care, suspended vaccination companies, unemployment and poverty, food security, closure of educational organizations (affecting the future income potential of children and young people and their life expectancy), domestic violence, etc. Particularly concerned are potential negative effects, including the loss of education during critical years of childhood and the possibility of mental illness causing irreversible effects for the entire generation of children [99]. In addition, widespread violations of human rights [100], misinformation surrounding COVID-19 [38] further enhanced people's mental and physical health and well-being. In conclusion, it is worth mentioning the limitations of this study. Perhaps it does not cover all the consequences for the health of the population because the situation is still developing and most of these consequences are still unknown.

Conclusion. A review of the literature found that restrictive measures during the COVID-19 pandemic have a long-term negative impact on the health of the population: an increase in the burden of mental illness, the development and development of chronic diseases, an increase in disability and early death, a risk of developing behavioral disorders.

Despite the growing number of publications on this topic, political decisions are still not based on a serious assessment and measurement of their harm to the health and well-being of the population. Most of the debate is politicized.

Inter - sectoral cooperation with the participation of specialists - epidemiologists, virologists, economists, sociologists, psychologists is necessary-based on the development of scientifically based programs for the free use of information and scientific results, mitigation of negative side effects, a comprehensive careful assessment of the advantages and disadvantages of measures aimed at the health and well-being of both the individual and the general population Strict measures to prevent the spread of the Virus should be carried out only when there is a significant balance of benefits.

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