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Disaster Medicine and Public Health Preparedness - Decision on Manuscript ID DMPHP-21-3263.R2

Disaster Medicine and Public Health Preparedness <onbehalf@manuscriptcentral.com>

16 Oktober 2021 pukul
21.35

Balas Ke: ssm20@columbia.edu
Kepada: firasfarisialkaff@fk.unair.ac.id

16-Oct-2021

Dear Mr. Alkaff:

Thank you for submitting the final version of your manuscript titled "The impact of facilitated quarantine on mental health status of non-severe COVID-19 patients". I am pleased to inform you that your manuscript has been accepted for publication in Disaster Medicine and Public Health Preparedness. Your accepted manuscript will be processed and then sent to production.

The accepted manuscript will first be available online as an e-publication.

A typescript (proof), showing editor's changes and edited according to AMA style will be sent to you (by e-mail) for review in due course (about 2 weeks after the e-publication). You may also be asked to respond to questions (author queries) about your article.

Your submission is accepted with the understanding that it may later be necessary to consider some changes in text or ancillary material, and that its contents, all or in part, have not been published elsewhere and will not be published elsewhere in print or electronic format except in abstract form or by the consent of the editor.

All information regarding the content and publication date of the accepted manuscript is confidential. Information about or contained in accepted articles cannot appear in any media outlet (print, broadcast, or electronic) until the date specified for that issue.

When you receive the typescript (proofs), please verify and confirm that all financial disclosure information for you and all coauthors is accurate, complete, and up-to-date. Our policy requires that "all conflicts of interest, including specific financial interests and relationships and affiliations relevant to the subject matter or materials discussed in the manuscript (e.g., employment/affiliation, grants or funding, consultancies, honoraria, stock ownership or options, expert testimony, royalties, or patents filed, received, or pending), in the Acknowledgements section of the manuscript".

We appreciate your submitting your article for our consideration, and look forward to seeing it published soon in Disaster Medicine and Public Health Preparedness.

Kind regards,
Steve Morse

Dr. Stephen S. Morse
Deputy Editor & Guest Editor for Coronavirus Special Editions
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Disaster Medicine and Public Health Preparedness - Decision on Manuscript ID DMPHP-21-3263.R1

Disaster Medicine and Public Health Preparedness <onbehalf@manuscriptcentral.com>

14 Agustus 2021 07.20

Balas Ke: ssm20@columbia.edu

Kepada: firasfarisialkaff@fk.unair.ac.id

14-Aug-2021

Dear Mr. Alkaff:

Thank you for your submission titled "The impact of facilitated quarantine in healthcare facility on mental health status of non-severe COVID-19 patients" which you submitted to Disaster Medicine and Public Health Preparedness, and has now been reviewed. Your contribution is significant and important to our readership. However, the manuscript has concerns as noted by our reviewers.

We do agree that the Journal audience deserves discussion of this topic, so please consider revision and resubmission although there will be no guarantee of acceptance for publication.

In your revision, we would recommend a concluding statement that clearly addresses the clinical implications of these findings and emphasizes that these findings can be generalized primarily to asymptomatic individuals who need to be quarantined. We believe that would help strengthen the rationale for this research. We suggest that it might also be helpful if you can go over the manuscript with a colleague experienced in English language scientific writing, to ensure that your points are clear.

To revise your manuscript, log into <https://mc.manuscriptcentral.com/dmp> and enter your Author Center, where you will find your manuscript under "Manuscripts with Decisions." Under "Actions," click on "Create a Revision." Your manuscript number will be appended to denote a revision. You may also click this link to start your revision:

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Do not share this encrypted link with others, as it will automatically log you into your account for Disaster Medicine and Public Health Preparedness's Web-based system.

Because we are trying to facilitate timely publication of manuscripts submitted to Disaster Medicine and Public Health Preparedness, your revised manuscript should be uploaded as soon as possible. We hope to receive your revision as soon as feasible for you, please, but no later than 13-Oct-2021. If it is not possible for you to submit your revision by this date, please contact me or the Editorial Office to rearrange the due date. Otherwise we may have to consider your paper as a new submission.

We are proceeding with the understanding that the contents of your manuscript, all or in part, have not been published elsewhere and will not be published elsewhere in print or electronic format except in abstract form or with the permission of the editor.

Once again, thank you for submitting your manuscript to Disaster Medicine and Public Health Preparedness. We look forward to receiving your revision.

Kind regards,
Steve Morse

Dr. Stephen Morse
Deputy Editor, Disaster Medicine and Public Health Preparedness
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The impact of facilitated quarantine on mental health status of non-severe COVID-19 patients

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#These authors contribute equally and are shared first author in this work.

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Dear Editor,

It has been shown that quarantine is important to reduce the incidence and mortality during COVID-19 pandemic [1]. However, quarantine has consequences towards mental health. From previous outbreaks, several negative psychological effects such as post-traumatic stress symptoms, confusion, and anger were observed [2]. In Indonesia, several cases of suicide committed by COVID-19 patients in quarantine facilities have been reported, and being quarantined in quarantine facilities is suggested to be the main cause. Nevertheless, no study has confirmed whether being quarantined in quarantine facilities in fact worsen the mental health status of COVID-19 patients.

We did a prospective observational study involving confirmed non-severe (asymptomatic and mild) COVID-19 patients who were quarantined at Indrapura Emergency Field Hospital, the largest quarantine facility in East Java province, a province with the highest mortality rate for COVID-19 in Indonesia [3]. All patients over 18 years who started their quarantine in this quarantine facility between 1st and 14th November 2020 were included. The respondents were asked to fill in the questionnaire two times: 1) prior to their admission (pre-quarantine), and 2) prior to their dismissal from the quarantine facility (post-quarantine).

Mental health status was evaluated using validated Indonesian version of Depression, Anxiety, and Stress scale (DASS-21) [4]. A detailed explanation of DASS-21 has been described elsewhere [5]. Collected data were analyzed using IBM SPSS Statistic for Windows version 25.0 (Armonk, NY: IBM Corp.). This study was approved by relevant Institutional Reviewer Board (201/EC/KEPK/FKUA/2020). All respondents gave written informed consent prior to their inclusion.

From 232 patients that started their quarantine during the study period, 206 respondents were included in the analysis (**supplementary table 1**). Pre-quarantine, there were 8 (3.9%) respondents with depression, 30 (14.6%) with anxiety, and 16 (7.8%) with stress. Post-quarantine, there were 11 (5.3%) respondents with depression, 20 (9.7%) with anxiety, and 17 (8.3%) with stress. The prevalence of depression, anxiety, and stress between pre- and post-quarantine was not significantly different (all $p > 0.05$) (**supplementary table 2**). Compared to pre-quarantine, anxiety and stress subscales scores and total DASS-21 scores post-quarantine were significantly lower (all $p < 0.001$) (**supplementary table 3**).

To our knowledge, we are the first to prospectively evaluate the mental health status of

COVID-19 patients pre- and post-quarantine. Contrary to popular opinion, we found that being quarantined in quarantine facilities did not worsen the mental health status of asymptomatic and mild COVID-19 patients. Therefore, in the event of suicide committed by asymptomatic and mild COVID-19 patients in quarantine facilities, being quarantined is less-likely to be the main cause of suicide. However, future study still needs to be done to evaluate the impact of facilitated quarantine in COVID-19 patients with more severe condition.

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The impact of facilitated quarantine on mental health status of non-severe COVID-19 patients

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Keywords:	COVID-19, depression, anxiety, stress, Quarantine
Abstract:	-

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