**Depression, COVID and migrants**
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**Abstract**

**Background:** Mental pain is more dramatic and painful than physical pain. It is more common and harder to bear as we know it’s more comfortable to complain my leg is paining despite "my head feels like hammered or poked". The aim of this study on migrant laborers working in Kazakhstan conducted aiming to discover their suffering due to the COVID outbreak. We interviewed Indian migrant workers associated with our university, were selected, questioned, and physically examined. And found whereas, in depression, a person suffers feelings of loss; we can say it is something more significant than the feeling of sadness. Depression is a severe terminology it expands for 14 days, and we clinically label a person depress when the person has at least 2 of the following three symptoms, as a medical student I remember it by pneumonic "EMI" (energy, mood and interest respectively ). Not only can these other symptoms be seen in a depressed patient like loss of concentration, guilt, sleeplessness etc.

While examining the migrants, we also try to find whether it is hereditary or not as we know the first cause of depression can be biological, and it can be due to genes of depression or abnormality in the frontal lobe of the brain. In a patient suffering from depression, it observed that their frontal lobe is smaller than usual and shrink hippocampus are present in them.

The remaining causes of depression also so that we can get a bigger picture of our topic, so the other causes of depression are malfunctioning of Neurotransmitter to be more definite lack of Serotonin, dopamine and non-epinephrine can cause depression but not to worry we have tablets which can increase its level in our body. We can say till now we have discussed all the causes of depression.

Coming back to our research, we not only determine the depression we also focused on its severity, it’s possible reasons, outcomes, and we assisted them with treatment too.

Almost 60% were depressed since they suffer hopelessness, loss of interest, sadness, lack of knowledge about the pandemic. 20% suffer excess sleepiness, and around 20% suffer fatigue, loss of appetite, all suffer weight gains, job insecurity. No one was observed as healthy as before due to depression. We conclude by this study demonstrates that urgent need for health and mental health care for migrant laborers needs to be provided and knowledge related to pandemic shall also be provided by the personalized conference, especially for central Asian laborers.

**Biography:**

Ryan Zia Arslaan is student of 3rd year General Medicine Studying in Karaganda Medical University, Kazakhstan. He worked on publications related to coronavirus and aimed to continue it.


**Abstract Citation:**