# Effects of the COVID-19 pandemic on the consumption of anxiolytics and antidepressants in a community pharmacy in Minas Gerais, Brazil

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# Effects of the COVID-19 pandemic on the consumption of anxiolytics and antidepressants in a community pharmacy in Minas Gerais, Brazil

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Abstract

This study analyzed the impact of the COVID-19 pandemic on the consumption of anxiolytics and antidepressants in a community pharmacy in the state of Minas Gerais, Brazil. Controlled medication dispensing records were evaluate, comparing the pre-pandemic period (January 2019 to February 2020) and the pandemic period (March 2020 to December 2021). The results showed a significant increase in the dispensing of these drugs, especially fluoxetine and bromazepam, associated with changes in population behavior, in response to social isolation and fear of illness. The study highlights the role of community pharmacies as important spaces for observing and addressing mental health demands, and reinforces the need for public policies aimed at promoting post-pandemic mental health.

Keywords:

Antidepressants, Anxiolytics, COVID‑19, Mental health, Pharmaceutical dispensing.

## INTRODUCTION

The first cases of the novel coronavirus (SARS-CoV-2) were reported in Wuhan, China, on December 31, 2019, and on January 30, 2020, the disease was declared a Public Health Emergency of International Concern by the World Health Organization (WHO) (SEIXAS et al., 2021). SARS-CoV-2 belongs to the Coronaviridae family, order Nidovirales, and is classified as a large, positive-sense, single-stranded RNA virus that infects not only human cells but also a wide range of animal species. It was first identified in 1966, when its morphology was described as spherical virions containing a central core. Its name derives

from the Latin word “corona”, meaning “crown,” owing to the crown-like appearance produced by spike projections on its surface (LEMOS, 2020; VELAVAN et al., 2020).

There are four genera of coronaviruses: alpha-coronavirus, beta-coronavirus, gamma-coronavirus, and delta-coronavirus. SARS-CoV-2 belongs to the B lineage of beta-coronaviruses (ZHICONG et al., 2020). According to LEMOS (2020), each spike protein contains S1 and S2 subunits that bind to membrane receptors on human host cells, releasing the viral genome into the cytoplasm. The S1 subunit binds to angiotensin-converting enzyme 2 (ACE2), triggering cleavage and exposure of the S2 subunit, which enables viral entry. Coronavirus infection is considered the most severe viral respiratory illness since the 1918 Spanish flu (SCHMIDT et al., 2021).

While alpha- and beta-coronaviruses originate mainly from mammals, particularly bats, gamma- and delta-coronaviruses are commonly found in birds and pigs. SARS-CoV-2 shares approximately 96% genomic identity with a bat coronavirus, suggesting bats as the most likely natural host. Its genome ranges from 26 kb to 32 kb. Beta-coronaviruses can infect humans and cause severe disease and death, whereas alpha-coronaviruses are typically associated with mild or asymptomatic infections. SARS-CoV-2 infects alveolar epithelial cells in the lungs through ACE2-mediated endocytosis (VELAVAN et al., 2020). The emergence of new coronaviruses in humans may occur periodically due to high viral prevalence, broad genetic diversity, and frequent genomic recombination (WU et al., 2020).

Researchers from the Oswaldo Cruz Institute (IOC/Fiocruz) and the Fluminense Federal University (UFF) have reported that SARS-CoV-2 affects the mental health of the general population and frontline workers, causing neural and endocrine alterations and psychological disorders triggered by loneliness, social distancing, and intense workloads. A contributing factor to psychiatric disorders is systemic inflammation, which affects the production of cortisol, a hormone involved in stress regulation (MELO; TONIN, 2020; MENEZES, 2020). According to the United Kingdom’s National Health Service (NHS), between April and September 2020, antidepressant prescriptions reached 38,609,032—a 94% increase compared to 2019 (ARMITAGE, 2021).

Data from the Brazilian Federal Pharmacy Council (CFF) show that between January and July 2019/2020, sales of psychiatric medications in Brazil increased from 56.3 million units in 2019 to 64.1 million in 2020 (CFF, 2020). This rise suggests that COVID-19 is not solely a physical disease but also has major emotional consequences, intensifying psychological disorders. Reports indicate that the pathogen may trigger inflammatory responses capable of altering neuronal plasticity, disrupting neuronal development, and reducing neurotransmitter levels essential for cellular communication (MENEZES, 2020).

Consumption of anxiolytics for relief of anxiety symptoms also increased. According to the Brazilian subsidiary of Aspen Pharma, sales of Passiflora, a natural anxiolytic, increased by 59%, rising from 118,000 units sold in May 2019 to 188,000 units in 2020 (CFF, 2020). An online survey conducted by the Brazilian Ministry of Health with 17,491 participants during

the COVID-19 pandemic reported that 12.4% of respondents were unemployed, 74% exhibited symptoms of anxiety, and 26.8% presented moderate depressive symptoms.

Although antidepressants and anxiolytics are therapeutically effective, their inappropriate or excessive use carries risks. These medications should be used only under medical supervision and for the necessary duration. The significant increase in consumption is concerning, as these drugs may cause severe adverse reactions, dependence, and, when misused, acute intoxication (MELO; TONIN, 2020). The pandemic has been described as a period of insecurity and uncertainty, contributing to heightened anxiety characterized by excessive anticipation, catastrophizing thoughts, guilt, feelings of personal inadequacy, tension, restlessness, tremors, muscle pain, and other symptoms linked to autonomic hyperactivity (MACIEL et al., 2015).

Self-medication with these drugs is especially worrisome, given the risk of intoxication due to misuse. These substances may exhibit stimulant effects similar to amphetamines, potentially causing abnormal states ranging from sedation to agitation. Associations between the use of these medications and suicidal behavior have been reported (SOUZA, 2017). Excessive serotonergic stimulation may also provoke adverse effects and worsen depressive states (GOODMAN; GILMAN, 2019).

In this context, the aim of this study was to evaluate the possible increase in consumption of antidepressants and anxiolytics during the COVID-19 pandemic in a pharmacy located in the interior of Minas Gerais, Brazil. Specifically, the study sought to quantify dispensing frequencies of antidepressants and anxiolytics during 2019 and 2020, identify the most frequently dispensed drugs, and highlight the risks of dependence and intoxication associated with their use.

## METHODS

This study consisted of a documentary research with a descriptive and quantitative approach, aiming to analyze concrete and quantifiable data. In quantitative research, validity is ensured by numerical data obtained from collected samples, establishing a precise relationship between the researcher and the data, thus achieving a high degree of accuracy (OLIVEIRA; PICCININI, 2008).

The research was conducted following prior authorization from the Research Ethics Committee (CEP) of the Centro Universitário de Patos de Minas – UNIPAM, under approval number 46381021.2.0000.5549, as well as authorization from the legal representative of the partner establishment. After approval, data collection and organization procedures were carried out for subsequent analysis.

No informed consent form (ICF) was required, as this was an observational and descriptive study that used only information obtained from an internal database report of the establishment. The study complied with all ethical principles of Resolution No. 466, of December 12, 2012. The principal investigator and all collaborators committed

themselves—individually and collectively—to using the data solely for descriptive purposes in the development of the research, ensuring confidentiality and privacy.

The study was conducted in a private pharmacy in the municipality of Serra do Salitre, Minas Gerais, through data extraction from the SNGPC system (National System for the Management of Controlled Medications), referring to the period from January 2019 to December 2020, for the purpose of data analysis and comparison.

In consideration of the pandemic context, preventive sanitary measures against COVID-19 transmission were adopted during all stages of data collection and handling, in order to minimize risks to the researchers and staff involved. The adopted measures followed the protocols of the study site, including the mandatory use of disposable masks and routine sanitization of work surfaces and hands using alcohol-based antiseptics.

All prescriptions included in the SNGPC reports from January 2019 to December 2020 containing antidepressant and anxiolytic medications were included in the study. Prescriptions for other psychotropic drugs listed in the same reports were excluded.

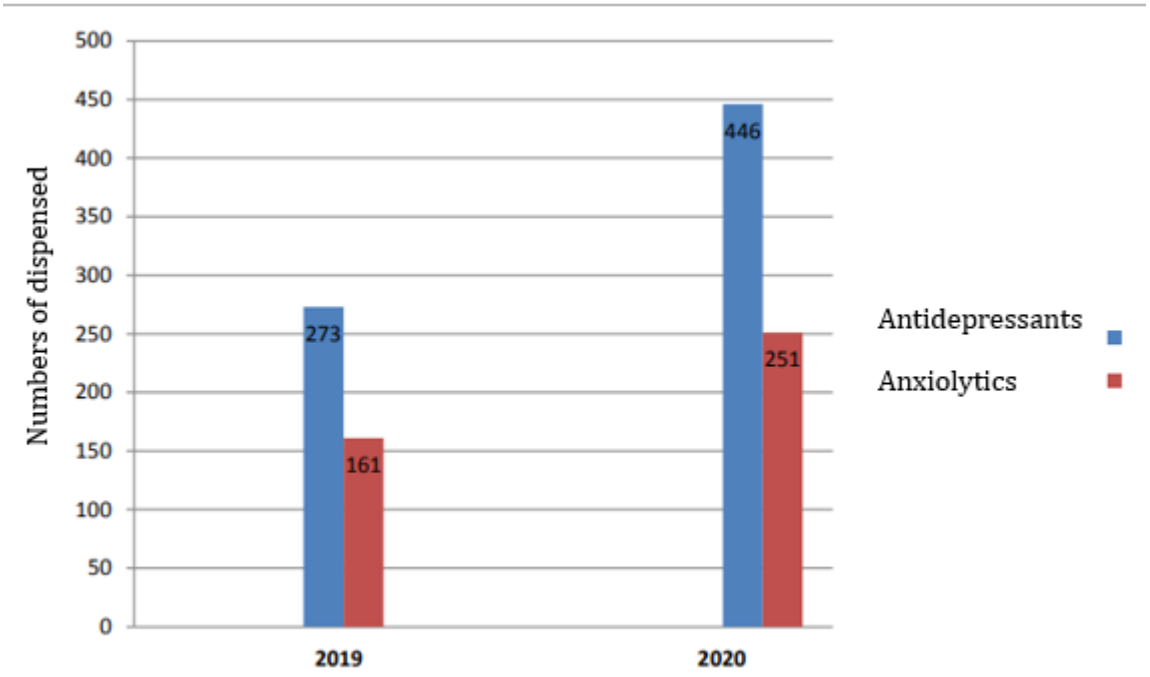
Data collection was performed using SNGPC reports provided by the pharmacist in charge, covering the period from January 2019 to December 2020. This collection was conducted using a documental analysis instrument containing the year of prescription, name of the medication, and prescribed dosage, enabling comparison and quantification of increases in the number of medications dispensed between 2019 and 2020, as well as calculation of relative growth (%). The variables analyzed included absolute growth in antidepressant and anxiolytic prescriptions, individual consumption increases for medications with the greatest variation, as well as decreases in dispensing of certain drugs. Data were processed using Microsoft Excel®.

## RESULTS AND DISCUSSION

The results obtained from the SNGPC dispensing reports were presented in graphs and compared across the study period. Initially, an increase in consumption of antidepressant and anxiolytic medications was observed in the pharmacy evaluated, as shown in Figure 1.

A total of 12 different antidepressant medications were dispensed, accounting for 719 prescriptions across 2019 and 2020. In the case of anxiolytics, 9 different medications were dispensed, totaling 412 prescriptions during the same period.

Figure 1. Absolute number of anxiolytics and antidepressants dispensed in 2019 and 2020.




Source: Research data, 2021.

In 2020, prescriptions for antidepressant medications totaled 446, representing a 63% increase compared to 2019, which recorded 273 prescriptions. Anxiolytic prescriptions also increased: in 2019, 161 prescriptions were issued, while in 2020, prescriptions rose by 55%, reaching 251.

According to the World Health Organization (WHO), more than 350 million people worldwide were affected by depression in 2020 (DIAS et al., 2021). A pandemic is not only a biological phenomenon—it affects individuals at multiple levels (FARO et al., 2020). The impacts of the COVID-19 pandemic were extensive and affected diverse groups, such as children unable to attend school and elderly populations categorized as high-risk. Rising unemployment, financial instability, fear of illness and death, uncertainty, and disruption of daily routines all contributed to increased anxiety and depression, creating greater demand for continuous use of psychoactive medications, including antidepressants and anxiolytics (CARVALHO, 2021).

As described by Santana et al. (2020), social isolation policies were implemented globally to reduce transmission of the virus, given its spread through respiratory droplets expelled when speaking, coughing, or sneezing. In the absence of specific pharmacological treatments, isolation and distancing measures were necessary public health strategies.

However, these measures triggered significant psychological distress, including fear of infection, frustration, information overload, stress, depressive symptoms, anxiety crises, and heightened uncertainty. The psychological impacts of quarantine may persist even after restrictions are lifted. Concerns about infection among family members—particularly older

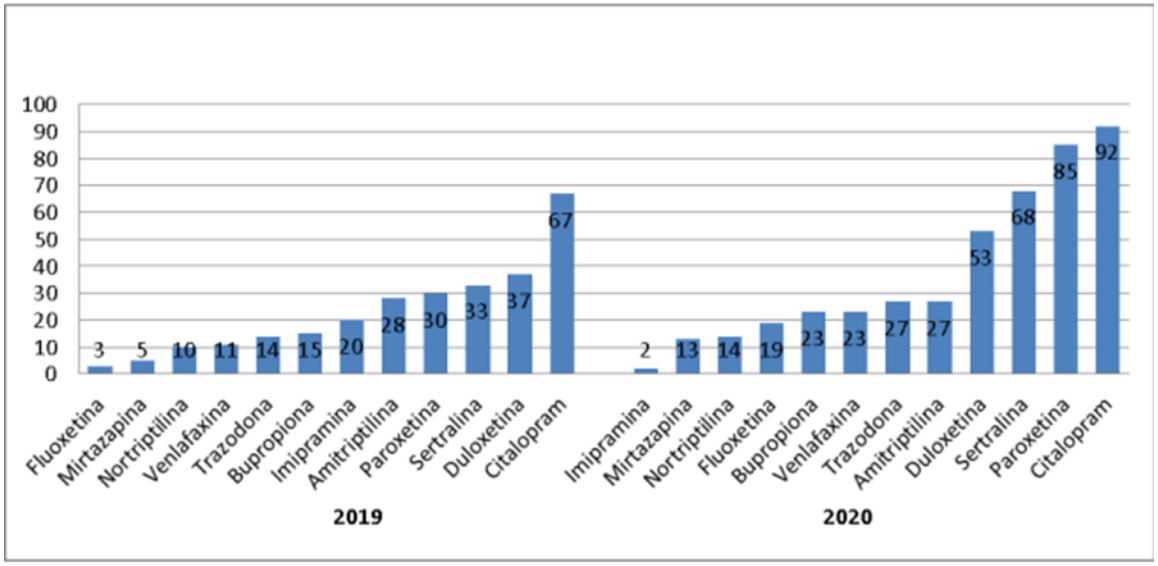
adults and high-risk individuals—further intensified emotional strain. The findings of this study suggest that the increase in antidepressant and anxiolytic prescriptions may reflect these widespread psychological consequences (TASSARA et al., 2021).

Depression is a multifactorial disorder associated with genetic predisposition and deficiency of biochemical neurotransmitters such as noradrenaline, serotonin, and dopamine (DIAS et al., 2021). These neurotransmitters regulate sleep, appetite, mood, and motor activity. Recent evidence shows increasing prevalence of depressive symptoms, including persistent sadness, loss of interest, sleep and appetite disturbances, guilt, and agitation. BARROS et al. (2020), in a study conducted during the pandemic, found that 40.4% of Brazilians reported feeling depressed or sad, and 52.6% reported nervousness and anxiety.

Anxiety is defined by psychological, physiological, and behavioral reactions. It is an inherent human response characterized by anticipation of potential threats, tension, hyperactivity, and heightened alertness, often accompanied by increased heart rate and blood pressure. When these responses become excessive and persistent, normal anxiety progresses to a pathological state (RODRIGUES, 2019).

An online survey conducted by the Brazilian Ministry of Health (2020) showed a 15.7% increase in antidepressant use during the pandemic, with 7.2% of respondents reporting that they initiated antidepressant therapy during this period. The consumption of anxiolytics increased even more, by 22.6% (BRASIL, 2020).

Figure 2. Absolute number of antidepressants by pharmacological class dispensed in 2019 and 2020.




Source: Research data, 2021.

When absolute prescriptions were analyzed, the most dispensed antidepressant in 2019 and 2020 was citalopram, followed by paroxetine, sertraline, and duloxetine.

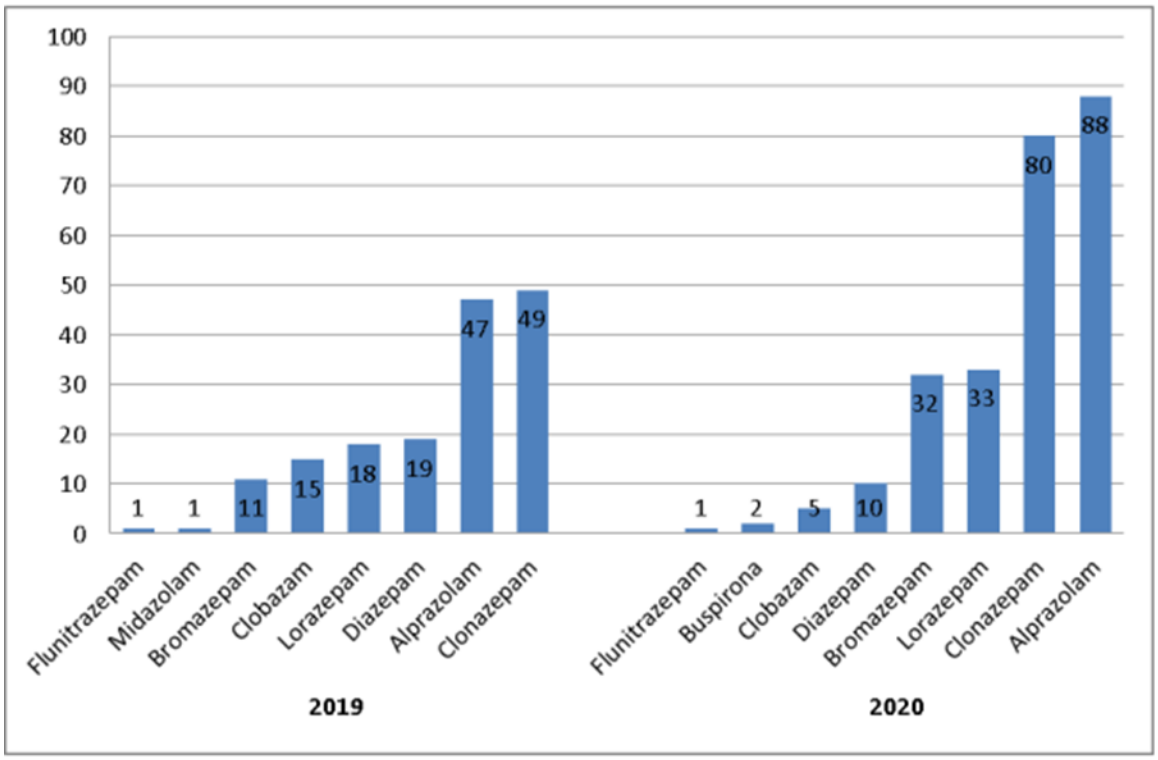
When consumption growth rates between 2019 and 2020 were compared, fluoxetine exhibited the largest increase at 533.3% (3 prescriptions in 2019 and 19 in 2020), followed by paroxetine with a 183.3% increase (30 to 85 prescriptions), and mirtazapine with a 160% increase (5 to 13 prescriptions). In contrast, dispensing of imipramine declined by 90%.

Fluoxetine and paroxetine belong to the selective serotonin reuptake inhibitor (SSRI) class and are considered potent antidepressants (MORENO et al., 1999). Serotonin transporters (SERT) mediate presynaptic reuptake of serotonin, terminating neurotransmission. SSRIs strongly inhibit serotonin reuptake, increasing serotonergic neurotransmission (GOODMAN; GILMAN, 2015).

Before the pandemic, studies by Oliveira et al. (2017) and Soares et al. (2019) reported that amitriptyline—a tricyclic antidepressant (TCA)—was the most frequently prescribed antidepressant. Due to their potential for severe adverse effects, TCAs are not considered first-line agents for depression (GOODMAN; GILMAN, 2015). SSRIs, created to offer higher efficacy, tolerability, and safety, have become preferred options, supporting the findings of this study (PEREIRA; MICELI, 2018).

In addition to their antidepressant effects, SSRIs also exhibit anxiolytic activity. Paroxetine and sertraline are commonly used to treat post-traumatic anxiety disorders (GOODMAN; GILMAN, 2015). This may partly explain the increased consumption observed during the COVID-19 pandemic.

Figure 3. Absolute number of anxiolytics by pharmacological class dispensed in 2019 and 2020.




Source: Research data, 2021.

In 2019, only benzodiazepine (BZD) anxiolytics were prescribed. In 2020, buspirone, a non-benzodiazepine anxiolytic, also appeared among the prescribed medications. Bromazepam exhibited the largest percentage increase (190.9%), followed by alprazolam (87.2%) and lorazepam (83.3%).

Conversely, consumption of two benzodiazepines—clobazam and diazepam—declined by 33.3% and 52.6%, respectively. Both drugs are long-acting benzodiazepines with half-lives exceeding 24 hours, increasing the risk of adverse effects (RODRIGUES, 2019).

Benzodiazepines are among the most commonly prescribed drugs worldwide, acting as sedative-hypnotics of the central nervous system (CNS). Their sedative effects reduce neural excitation, while their hypnotic effects induce sleep. These medications also possess anticonvulsant and muscle-relaxant properties but may lead to dependence, tolerance, and toxic adverse reactions when used long term (RODRIGUES, 2019). Their use in older adults requires particular caution due to prolonged half-life and higher risk of adverse effects (NALOTO et al., 2016). Benzodiazepine consumption is estimated to double every five years (MACIEL et al., 2015).

Toxic effects of benzodiazepines typically arise from overdose. Therefore, these drugs should only be used for short periods, as prolonged therapy increases the risk of

dependence and withdrawal effects, which are opposite to the desired therapeutic action. Dependence may develop within days or weeks of continuous use (RODRIGUES, 2019).

Buspirone, approved in 1986, is a piperazinyl derivative with anxiolytic properties belonging to the azapirone class. It is considered effective for anxiety disorders, chronic anxiety, and anxiety in older adults. Unlike benzodiazepines, buspirone does not depress the CNS, nor does it impair alertness, memory, or psychomotor skills, and has minimal risk of dependence (MACIEL et al., 2015). Its mechanism of action is believed to involve partial agonism at 5-HT receptors.

The rapid lifestyle changes imposed by the COVID-19 pandemic likely contributed to increases in stress and anxiety, leading to higher consumption of antidepressants and anxiolytics among the study population. The pandemic and its related containment measures had significant impacts on daily life and mental health (ARO; PEREIRA; BERNARDO, 2021).

## FINAL CONSIDERATIONS

The present study identified an increase in the number of prescriptions and dispensations of antidepressant and anxiolytic medications between 2019 and 2020. Antidepressant consumption increased by 63.0%, while anxiolytic consumption increased by 55.0%. Among antidepressants, the drugs with the highest increases were fluoxetine, with a rise of 533.3%, followed by paroxetine (183.3%) and mirtazapine (160.0%). Regarding anxiolytics, bromazepam showed the greatest increase, with 190.9%, followed by alprazolam (87.2%) and lorazepam (83.3%).

It is plausible that this increase is directly associated with the COVID-19 pandemic, as public health measures implemented to contain viral transmission—such as isolation, financial instability, and social distancing—may significantly heighten the occurrence of depression and anxiety. Ultimately, the findings highlight the magnitude of the pandemic's impact on mental health within the studied population.

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## Author Contributions (CRediT Taxonomy)

Andressa Alves Guimarães – Conceptualization; Methodology; Software; Validation; Formal Analysis; Investigation; Data Curation; Writing – Original Draft; Writing – Review & Editing; Visualization.

Douglas Cardoso Brandão – Methodology; Software; Investigation; Data Curation.

Natália Filardi Tafuri – Conceptualization; Methodology; Supervision; Project Administration; Resources.

## Conflict of Interest

The authors declare that there are no conflicts of interest — financial, commercial, political, academic, or personal — that could have influenced the development or presentation of this manuscript.

## Data Availability Statement

All datasets supporting the results of this study are publish within the article itself.

## Ethics Approval Statement

This study was approved by the Research Ethics Committee of University Center of Patos de Minas under protocol number 46381021.2.0000.5549, in accordance with the ethical principles established by Resolution No. 466/2012 of the Brazilian National Health Council.

This preprint was submitted under the following conditions:

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