

Short communication

Psychological support via telemedicine for Brazilians affected by the war in Israel

Apoio psicológico via telemedicina aos Brasileiros afetados pela guerra de Israel

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We wish to underscore the burgeoning significance of nuanced healthcare interventions facilitated by telemedicine.¹ Post-traumatic stress disorder (PTSD) is intricately intertwined with the manifold, intricate consequences of terrorism and war.² Numerous Brazilians were impacted by the conflict in Israel that commenced in October 2023. The *Federação Israelita do Estado de São Paulo* identified both direct and indirect casualties of the ongoing conflict, and, at the same time, the Telemedicine Center at Hospital Israelita Albert Einstein, São Paulo (SP, Brazil), provided remote psychological support.

The ongoing endeavor assessed 112 individuals (75% female, 60% below the age of 50) via engagements primarily conducted by psychologists (96%) and supplemented by psychiatrists (4%), with almost half of the encounters carried out voluntarily by professionals. A total of 310 assessments were conducted, with 48% constituting single consultations and 52% involving ongoing evaluations, averaging four sessions per patient. Brazilian patients were dispersed across five countries, with 63% in 24 cities within Israel (**Figure 1**).

Mid-term PTSD is associated with diminished social support levels and severe peri-traumatic



24 cities in Israel (63% of all encounters)

5 countries: United States of America, Brazil, Spain, Italy, Israel

Source: the authors.

Figure 1. Geographical location of patients who received remote psychological support.

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reactions, fostering a propensity for sustained anxiety and depressive disorders. Prompt psychological support targeting psycho trauma treatment holds considerable value, particularly concerning patient education on therapy, discerning intense peri-traumatic reactions, gauging responses, and facilitating proactive and early referrals.³ Though this initiative embodies a modest therapeutic intensity, its timely and comprehensive telemedicine-based approach admirably cost-effectively addresses geographic constraints. Analogous settings characterized by traumatic occurrences have demonstrated that immediate post-event psychological support correlates with improved prognoses, substantiating the rationale behind the virtual strategy.⁴ The outcomes of our evaluations will be subject to further scrutiny.

The health system's response to crises is multifaceted and heterogeneous, yet mental health

imperatives must be accorded precedence. Telehealth has become normalized within the contemporary healthcare landscape's reconfiguration.⁵ In the face of the harrowing realities of war, Telemedicine emerges as arguably the most productive and equitable initial psychological therapeutic strategy.

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