The COVID-19 Myth and Phytobezoar

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Dear Editor,

We managed an edentulous adult male patient who ate excessive dietary fiber due to the personal myth that it will reduce his chances of getting COVID-19 disease. He warranted an emergency laparotomy for small bowel intestinal obstruction due to phytobezoar. It is not uncommon to witness such Fear Related Behavior (FRB). FRB is defined as individual or collective behavior or action initiated in response to fear reactions that are triggered by a perceived threat or actual exposure to a potentially traumatizing event [1]. The current global outbreak of the novel Coronavirus SARS-CoV-2 (Coronavirus disease 2019; previously 2019-nCoV) causing the COVID-19 disease has gained widespread attention of all. Due to easy accessibility to social media and rapid dissemination of information, anxiety related to the uncertainties from COVID-19 pandemic is common. Communicable infectious diseases cause exaggerated and disproportionate fear due to rapidity, invisibility and transmission risk [2]. The two most common collective FRBs observed are unexplained dietary changes and panic grocery shopping and hoarding. Our patient ate large amounts of plants and vegetables in a belief that diet fiber will strengthen his immune system to avoid getting COVID-19 disease. Fiber is typically insoluble roughage or gel forming and provides bulk to stool. Plants, vegetables and fruits are ubiquitous source of dietary fiber for humans. Eating fiber rich diet is believed to have many health benefits despite no strong evidence [3]. Institute of Medicine recommends fiber intake of 38 and 25 gram for health adult men and women respectively [4]. In our patient, due to absence of dentition, bezoar was formed. Old age, poor dentition, hypothyroidism and previous gastric surgery are associated with phytobezoars [5]. We conducted a brief search to find any links of dietary fiber to COVID-19 outbreak and did not find any evidence. The World Health Organization (WHO) has published myth busters about COVID-19 to advice the public and garlic is the only food item included. WHO has stated, “There is no evidence from the current outbreak that eating garlic has protected people from the new Coronavirus”. Following the West Africa Ebola outbreak in 2013-2016, Shultz et al. [1] has reported that FRBs increased transmission of Ebola virus, number of cases and death rate, psychological distress, psychiatric disorders, societal stigma and discrimination directed toward peoples of affected nations. Despite high health literacy levels locally, both collective and individual FRBs are witnessed and health education campaigns remain an unmet need.

References