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Observations on AI-stress in Primary and Psychiatric Care Patients

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Observations on AI-stress in Primary and Psychiatric Care Patients

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Abstract

This study explored AI-related stress among patients in primary care and psychiatry. In a clinical audit of 28 patients, 42.9% reported AI-related stressors with chatbot interactions commonly cited. Three patients attributed worsened suicidal ideation to chatbot use. These findings highlight an emerging clinical phenomenon with potential implications for digital health regulation and clinical practice.

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Research Letter

Title: Observations on AI-Related Stress in Primary and Psychiatric Care Patients
Author's Name: Dr. Shemarah Lindo
Affiliation: Bridging the Gap Between Medicine and Research. Nigeria
Abstract: In a clinical audit of 28 patients presenting with mental health complaints, 42.9% (n=12) reported AI-related stressors as a significant contributor to their distress, highlighting an emerging clinical phenomenon.

Introduction

Artificial intelligence (AI) is transforming healthcare, yet its potential psychological harms are poorly understood. While the link between social media and mental health is established [1], the specific impact of AI-driven technologies—such as chatbots and algorithmic systems—remains largely unquantified in clinical practice. A recent review by Wang et al. (2025) highlighted the dual potential for benefit and harm from AI in mental health, calling for empirical studies [2]. We aimed to describe preliminary observations from a clinical audit.

Methods

We conducted a clinical audit of consecutive patients presenting with anxiety, depression, or stress-related symptoms at a combined primary care and community psychiatry clinic between April and August 2025. Patients with acute psychosis or severe cognitive impairment were excluded. As a service evaluation, the audit was exempt from formal ethical approval but adhered to institutional data protection protocols.

During routine consultations, clinicians used standardized open-ended questions to screen for technology-related stress, specifically probing distress linked to AI or chatbot interactions. Data on demographics, presenting complaints, and reported stressors were anonymized and analyzed descriptively.

Results

Among 28 patients screened (mean age 32.4±12.1 years; 60.7% female), 19 (67.9%) reported technology-related stress. Of these, 12 (42.9% of total cohort) identified AI-specific stressors. The clinical characteristics are summarized in Table 1.

Characteristic	n	%
Clinical Presentation		
Anxiety Disorder	7	58.3 %
Depressive Episode	5	41.7 %
Type of AI-Related Stressor		
Distress from Chatbot Interactions	7	58.3 %
Anxiety about Job Displacement	3	25.0 %
Distress from AI-Generated Health	2	16.7 %

Misinformation		
Notable Severe Outcome		
Worsened Suicidal Ideation Attributed to Chatbot	3	25.0 %

Discussion

Principal Findings: In this clinical audit, AI-related stress was present in nearly half of patients reporting technology-related distress. The most significant observation was the attribution of worsened suicidal ideation to chatbot interactions, aligning with concerns about iatrogenic harm from unregulated AI mental health platforms [3, 4]. These data suggest that AI introduces distinct psychosocial stressors.

Comparison with Prior Work: Our findings extend the literature on digital stress [1] by specifying AI as a novel determinant of distress. The prevalence of chatbot-related harm is consistent with analyses demonstrating safety lapses in AI responses to suicide inquiries [3].

Implications: These observations underline the need for validated screening questions in primary care, clinical pathways for patients experiencing chatbot-related harm, and stronger regulation of AI health tools to mandate safety checks and crisis escalation protocols.

Limitations: The study is limited by its small sample size, single-center design, and reliance on patient self-report. Despite these limitations, these observations provide preliminary evidence justifying larger, prospective studies.

Conclusion: AI-related stressors are emerging in primary care and psychiatry. Clinicians should remain alert to this phenomenon, and policymakers must ensure that AI integration in health does not inadvertently contribute to rising mental morbidity.

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