

PSYCHIATRY MORBIDITY IN PATIENTS ATTENDING NEUROLOGICAL OUTPATIENT DEPARTMENT

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ABSTRACT

Background: Neurological disorders are often associated with psychological, emotional, and other psychiatric disturbances and may impede recovery of patient, making early identification and treatment of potential importance.

Aims & Objective: The objective of the study was to see the psychiatric morbidities in patients attending neurological outpatient department.

Material and Methods: The study was conducted in the Neurological Outpatient department in the Department of Medicine in Shri Maharaja Singh Hospital (SMHS) Hospital of Government medical college Srinagar. This was a cross sectional study. Five hundred cases of neurological patients were taken up for the study. Psychiatric diagnosis was done by using MINI plus scale which was structured interview. Morbidity in were analysed by the Pearson chi-squared test and t test.

Results: Males constituted 46.6% i.e. 233 and females constituted 53.4% i.e. 267 of sample and mean age of the patients was 35.85 ± 9.475 . The maximum number of patients, 40% (n=200) belong to 16-30 years age group, Total patients 300 patients (60%) out of 500 had psychiatric diagnosis. The presence of psychiatric disorder was maximum in age group of 16-30 years.

Conclusion: The results indicate that neurological patients have high levels of psychiatric morbidity. Screening patients with neurological disorders for psychiatric problems and timely psychiatric intervention can go a long way in improving the quality of life of these patients.

Key-Words: Psychiatric Morbidity; Neurological Disorders; OPD

Introduction

Neurological disorders have a significant proportion of psychiatric disturbances of at least moderate severity associated with them and It is well established that conditions such as epilepsy, Parkinson's disease, multiple sclerosis and cerebrovascular disease are associated with increased vulnerability to anxiety disorder, affective disorders and psychoses.^[1] The prevalence of psychiatric symptoms and disorders among neurology patients has been shown to be around 30% for outpatients and 34% for inpatients.^[2,3] The prevalence of all psychiatric disorder among there have been estimated to be greater than 50% Mood and anxiety disorder are present in 40% of patients are associated with greater disability and are persistent.^[3] The predisposition probably results both from the masking functional disability and also from the disturbance of intra cerebral pathway. The overall prevalence of current Psychiatric disorder in new neurological patient is 55.1% The most frequent

diagnosis is somatoform disorder (33.8%) followed by phobias (21.8%) substance use disorder (13.3%) and depression/dysthymia (14.4%).^[4]

This study is aimed at determining the psychiatric morbidity of among neurology patients attending our OPD.

Materials and Methods

We conducted a cross-sectional study for a period of 1 year in SMHS Government medical college associated Hospital. The patients were selected using stratified random sampling choosing every alternate patient attending to the Neurological OPD. A total of 500 patients were included in the study. Patients were informed that the aim of the study is to determine the prevalence of psychiatric comorbidity in hospitalized patients. After formal consent the purpose of study as explained to patients. General description, demographic data and psychiatric history were recorded using the

semi structured interview scale. Patients more than 1 years of age of both sexes were taken as cases. However, if patients had history of DSM Axis I and Axis diagnoses before attending neurological OPD were not taken. Where necessary, the subsequent interview was done for full psychiatric assessment. General description, demographic data and psychiatric history was recorded using the semi-structured interview which was pretested. Selected patients were subjected to Mini International Neuropsychiatric Interview – Plus (MINI) for evaluation of symptoms and diagnosis. The MINI-Plus is a DSM_IV based diagnostic interview with high reliability and validity.^[5] All patients were informed about the nature of the research within the hospital and gave informed consent to participate. Information sheets and preliminary interviews made it clear that the choice to consent or otherwise would have no bearing on the treatment offered.

Results

A total of 500 patients above 15 years were studied. The maximum number of patients, 40% (n=200) belong to 16-30 years age group. The presence of psychiatric disorder was maximum in age group of 16-30 years. Out of total 2008 patients in the age group of 16-30 years, 137 had psychiatric diagnosis. While out of 72 patients in age group 31-45 years, 38 had psychiatric diagnosis. Similarly out of 75 patients in the age groups of 46-60 years, 32 had psychiatric diagnosis. And 93 patients out of 150 in age group of 61 years and above were found to have psychiatric diagnosis. Total patients 300 patients (60%) out of 500 had psychiatric diagnosis. The number of male patients in the study was 233 (46.6%) and the number of female patients was 267 (53.4%). The number of males with psychiatric diagnosis was 128 and number of females with psychiatric diagnosis was 172.

Table-1: Psychiatric Disorder in Studied Population

Psychiatric Disorders	No. of Patients (%)	% of Total Psychiatric Morbidity
Somatoform disorders	93 (18.6)	31
MDE	83 (16.6)	27.8
Anxiety disorders	53 (10.6)	17.66
Substance use	51 (10.2)	17
Psychotic disorders	11 (2.2)	3.66
Hypomania/ Mania	9 (1.8)	3
Total	300 (60.0)	

Table-2: Socio-Demographic of Studied Population

Parameters	No. of Patients	Psychiatric Diagnosis	%	
Age Group	16-30 years	208	137	27.4
	31-45 years	72	38	7.6
	46-60 years	74	32	6.4
	61 and above	146	93	18.6
	Total	500	300	60
Sex Group	Male	233	128	25.6
	Female	267	172	34.4
	Total	500	300	60
Education	Illiterate	301	183	36.6
	Undergraduate	153	90	18
	Post graduate	46	27	5.4
	Total	500	300	60
Occupation	Housewives	245	160	32
	Self employed	95	52	10.4
	Govt.Employed	63	31	6.2
	Unemployed	57	35	7
	Pensioner	40	22	4.4
	Total	500	300	60

Table 3: Various Neurological Disorders in Studied Population

Neurological Disorders	No.	%	Psychiatric Disorders	% of Psychiatric Morbidity
Migraine	196	39.2	89	29.66
Epilepsy -	168	33.6	113	37.66
Stroke (CVA)	35	7	26	8.66
Parkinson Disease	32	6.4	24	10.66
Head Injury	41	8.2	31	10.33
Tumour (intracranial)	9	1.8	5	1.66
Other	19	3.8	12	4.33
	500		300	

Discussion

One of the main objectives of the study was to find out the psychiatric morbidity in patients attending neurological OPD. This study also tried to find out the specific types of psychiatric disorders and possible association of psychiatric disorders with Socio-demographic and relevant parameters. In our study psychiatric morbidity was found in 60% of patients. Our results are in agreement with Fink et al who studied 198 new neurological out patients and found prevalence of current psychiatric disorder was 55.1%.^[4] Even though our study showed the higher prevalence of psychiatric disorders in patients attending neurology OPD, but this morbidity was reflected only in some disorders and not all psychiatric disorders. Somatoform disorders and major depressive disorders were most common diagnosis. Perkin in study of 7836 successive new referrals found some 26.5% had somatoforms disorders.^[5] Similar results were found by Carson (2000) et al in 300 consecutive new referral to neurology OPD.^[6] Major depressive disorders was

found to be common diagnosis. In our study somatoform disorders were most common psychiatric diagnosis. Somatoform disorders were present in 31% of patients. Similar results have been found by Fink et al in 198 consecutive new referral patients to neurology. Somatoform disorders were found in 33.8% of patients in their study.^[4]

Major depressive disorder was second common diagnosis in our study. A total of 25% fulfilled criteria of major depressive episode. Similar results have been found by Carson et al in new and referral to neurology OPD and found MDE in 27% of patients.^[7] Williams et al found 33% prevalence of depression in patients attending Neurological OPD. In our current suicidal ideation was found in 8% of patients.^[8] Similar results have been found by Carson et al and found prevalence of suicidal ideation 9%. In our study almost all of these patients had major depression.^[9]

17.66% of patients fulfilled the criteria of Anxiety disorders and is in tune with study done by Carson et al who found the prevalence of anxiety disorder in 20% of patients.^[7] In our study 17% of patients were diagnosed with substance abuse. The results are in agreement with Fink who found the prevalence of substance abuse disorders was about in 13.3%.^[4] In our study psychoses as diagnosed in 3.66% and Hypo mania/ Mania was diagnosed in 3% of patients. Folstein et al reported that secondary mania can occur at a rate of about of 4.8%- 10% in Huntington's disease.^[10] Starkstein SE et al reported post stroke mania occurs in about in 1% of strokes.^[11]

Studies indicate that even when the psychiatric disorders are recognised by neurologists, patients are reluctant to embark on any form of psychological treatments. They resist psychiatric referral for various reasons, including the perceived stigma of psychiatric illness and also because of their conviction that their symptoms are due to processes. Cultural has a significant impact on the way people perceive their illness and seek treatment. The fact that psychiatric

illness is still considered stigmatic may be reason for higher percentage of people seeking neurologist than psychiatrist. This study needs to be seen in the background of socio cultural milieu of our place which is in contrast to west, where most of studies related to present have been done.

Conclusion

The neurological patients have high levels of psychiatric morbidity. Screening patients with thyroid disorders for psychiatric problems and timely psychiatric intervention can go a long way in improving the quality of life of these patients.

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