



Prevalence of Psychiatric Illness and Their Correlation with Clinical Predictors and Patient Characteristics among Medical out Patients in a Rural Medical College

Dr.Syed Bahavudeen Hussaini M.D., Dr.M.Venkatesh M.D.*,

Associate professor of General Medicine.

* *Associate professor of General Medicine (Corresponding Author)
Government Theni Medical College, Theni, Tamilnadu*

Submitted: 05-06-2021

Revised: 18-06-2021

Accepted: 20-06-2021

ABSTRACT: Background: Psychiatric disorders are common among general medicine outpatients but often not detected by primary care physicians. High index of suspicion, certain patient characteristics and some clinical predictors are needed to detect it.

AIM OF THE STUDY: To study the prevalence of psychiatric disorders and their patient characteristics and clinical predictors to detect them in patients attending general medicine out patient department.

METHODS: Observational cross sectional study. All the patients attending general medicine out patient department in the month of November 2020 at Govt. Theni Medical College Hospital were studied.

RESULTS: Psychiatric disorders prevalence were estimated in 6220 male and 6015 female patients out of which 9% of male (560) and 11% of female (662) were affected. Most affected age group was 18-39 years (64%). Females were more affected (58%). Alcoholism, recent stress, poverty and poor socioeconomic status, adjustment disorders were some of the top most causes.

CONCLUSION: Even though psychiatric disorders prevalence are high in general medicine out patients they are undiagnosed & undetected. Patients having multiple somatic complaints, recent stress, sleeplessness, poor socioeconomic status, patients of 18-40 years age group are to be evaluated.

KEYWORDS: General Medicine OPD, Mental Health, Clinical predictors.

I. INTRODUCTION

Mental Health is an inherent element of Health and wellbeing. Mental Health problems are very common among patients attending the general medicine out patients department. Unfortunately most of the cases go undetected and untreated. 50% of mental illness begins by the age of 14. Most of

the psychiatric disorders are treatable. This study was meant to find out the prevalence of psychiatric disorders in general medicine OPD, the patient characteristics and their clinical predictors.

II. MATERIALS OF METHODS:

STUDY POPULATION: Patients attending general medicine OPD in the month of november 2020 were selected.

INCLUSION CRITERIA: Patient having recent stress, multiple physical and somatic complaints, frequent hospital visits or low rating of over all health, sleeplessness were included after obtaining informed consent.. Above patients are subjected to physical examination, lab investigations, ECG to rule out systemic diseases based on the symptoms. If test result do not show the presence of physical illness, a psychiatry opinion was obtained. Institutional Ethical Committee clearance was obtained.

EXCLUSION CRITERIA:

Patient with frank, upper and lower respiratory infection, acute gastroenteritis, sepsis, COPD, CCF, PUO, Organ & soft tissue infection, Diabetes Mellitus/ Systemic Hypertension, etc., and having a final working diagnosis are excluded from the study.

METHODS: In our study , patients having multiple physical and somatic complaints (Clinical Predictors) like

1. Chest pain, multiple body pain, low back ache
2. Headaches, fainting, movement disorders.
3. GIT symptoms like abdominal pain, diarrhoea, belching, aerophagia, constipation
4. Pain during sex and painful periods.
5. Hyperventilation were selected and subjected to physical examination, lab investigations, ECG, to rule out physical diseases based on the symptoms. If test results does not show the



presence of illness they are interrogated with some simple questions about depressed mood, stress, anxiety like

- Are you worrying about anything?
- Is there any problem in your home, family, work place?
- Are you suffering from sleeplessness?
- Is there any stress & tensed mood?

If the answer to above questions are yes they are subjected for psychiatrist opinion and evaluation. The diagnosis made by them were noted. Among patients with clinical predictors more than 77% had underlying Psychiatric disorders compared with 3% among patient with no clinical predictors

III. RESULTS:

Mental disorders prevalence were estimated in 6220 Male and 6015 Female patients out of which 9% of Male (560) and 11% of Female (602) were found to be affected. Most affected age group among both the sexes was 18-39 years (63%). Females were more affected (59%)

In men aged 28 to 45years and women aged 19-30 years prevalence of depression is more. Anxiety is more common in men and women aged 40-60 years. Both men and women aged 40-50 had highest prevalence of panic syndrome.

Table 1: MOST COMMON AGE GROUP AND SEX WITH PSYCHIATRIC DISORDERS.

AGE GROUP	AFFECTED	SEX	AFFECTED
18-39	63%	FEMALE	59%
40-59	27%	MALE	41%
>60 YEARS	9%		

Married individuals were more prone for Psychiatric disorders (55%). Patients living below poverty line constitute maximum number of patients (80%) as the study sample is obtained from a rural Government Medical College OPD catering to poor population.

TABLE 2 TOP 5 CAUSES FOR PSYCHIATRIC DISORDERS

MALE	FEMALE
Poverty and poor socioeconomic status	Abuse and stress due to alcoholic husbands
Adjustment disorder with life partner	Recent stress and recent death of family members
Alcoholic addiction	Poverty and low socioeconomic status
Substance Abuse	Physical and Sexual abuse
Work related stress	Over work and domestic violence

Alcoholism is one of the most common precipitating cause of psychiatric disorders in both male and females.

Among patients with clinical predictors, more than 77% had underlying psychiatric disorders compared with 3% among patient with no predictors.

TABLE 3 THE PREVALENCE OF PSYCHIATRIC DISORDERS IN THE ORDER OF FREQUENCY.

Depression (mild to moderate)	16%
Generalised anxiety disorder	12%
Somatoform disorder	9%
Neurasthenia	5%
Major depression	4.5%
Alcoholism	3.5%
Alcoholic dependence	2.8%
Panic disorder	2%

**TABLE 4: EDUCATIONAL AND SOCIO ECONOMIC STATUS OF STUDY POPULATION.**

		Male	Female
Marital status	Married	92%	94%
	Unmarried	3%	2%
	Divorced/seperated	5%	4%
Occupation	Unemployed	70%	90%
	employed	30%	10%
Educational status	Illiterate	15%	35%
	Literate	85%	65%

IV. DISCUSSION:

Health is defined as complete physical, mental and social well being. Mental health is an inherent element of good health. Mental disorders are an enormous burden to patients and relatives. They have low quality of life, high stress and more worries. They seek frequent consultations from specialities like neurology, cardiology, gastroenterology, rheumatology and other specialities for their symptoms without any valid diagnosis. Patients with psychiatric disorders have higher utilization of healthcare services resulting in waste of time, money and resources. Effective and safe treatment are available for most of the psychiatric disorders.

So our study was meant to find out the prevalence of psychiatric disorders in general medicine OPD by applying certain patient characteristics and clinical predictors for their detection.

Patient Characteristics:

1. Being in the age group of 17 to 40 years
2. H/o Alcoholism in family
3. Being poor, unemployed and coming from low socioeconomic status
4. Having adjustment disorder with life partner and neighbour.

Our study showed a strong correlation (77%) between the clinical predictors and the prevalence of psychiatric illness. Predominant age group affected in our study is 18-39 in both the sexes, and the commonest illness diagnosed was depression (16%) and the presence of female preponderance was more in our study (59%). Major causes for psychiatric illness was found out to be poverty and poor socioeconomic status and adjustment disorder with life partner among males and abuse and stress due to alcoholic husbands, recent stress and recent death of family members among females.

Alcoholism is one the most common precipitating cause of psychiatric disorders in both male and females. The wives of alcoholic husbands undergo intense stress which brings about major

psychological problems like anxiety, depression, neurotism, poor self esteem and psychosomatic disorder.

Although a person with somatic symptom disorder presents with multiple complaints these have no medical explanation. Even if they have a cause, the patient's worry is out of proportion to the symptom. The distress causes the affected persons to visit multiple health care providers and to have unnecessary medical tests and procedures.

V. CONCLUSION:

Psychiatric disorders are common in patients attending general medicine outpatient department. 9% of males and 11% of females attending general medicine OPD have psychiatric disorders. Recent stress, multiple physical complaints, low overall health ratings, sleeplessness are some of the clinical predictors in whom specific probing with questions like,

1. Are you worrying about anything?
2. Is there any problem in your home, family, work place?
3. Is there any stress, tensed mood and sleeplessness?
4. Any recent loss of close friends or relatives?

are particularly warranted and if answer to one or all of the questions is yes, a psychiatric evaluation is needed to identify the underlying psychiatric disorder. If an underlying psychiatric illness is diagnosed, it will lead to avoidance of multiple consultations thereby preventing wastage of precious resources of time and money.

As our medical college caters to rural population mainly with poor socioeconomic status, the study population may not be representative of the general public. More number of unemployed patients attended our OPD during the study period as it was conducted during the post first covid wave period. These may be some limiting factors in our study and we recommend further studies during non pandemic periods and in urban set up to throw more light in this aspect.



REFERENCES

- [1]. <https://www.who.int/about/who-we-are/constitution>
- [2]. Jackson, Jeffrey L., James S. Houston, Steven R. Hanling, Kenneth A. Terhaar, and Joon S. Yun. "Clinical Predictors of Mental Disorders Among Medical Outpatients." *Archives of Internal Medicine* 161, no. 6 (March 26, 2001): 875. <https://doi.org/10.1001/archinte.161.6.875>.
- [3]. Thappa, Jagdish, Harneet Kaur, Sushant Thappa, Rakesh Banal, and Abhishek Chowhan. "Psychiatric Morbidity in Patients Attending Medical OPD at Govt. Medical College Jammu." *Journal of Mental Health*, 2008, 4
- [4]. Barrett, James E., Jane A. Barrett, Thomas E. Oxman, and Paul D. Gerber. "The Prevalence of Psychiatric Disorders in a Primary Care Practice." *Archives of General Psychiatry* 45, no. 12 (December 1, 1988): 1100–1106. <https://doi.org/10.1001/archpsyc.1988.01800360048007>.
- [5]. "PSYCHIATRIC PATIENTS IN MEDICAL OPDs: A PHYSICIANS' DILEMMA." *Khyber Medical University Journal*, March 31, 2018, 40–43. [://doi.org/10.35845/kmuj.2018.17090](https://doi.org/10.35845/kmuj.2018.17090).
- [6]. Jackson, Jeffrey L., James S. Houston, Steven R. Hanling, Kenneth A. Terhaar, and Joon S. Yun. "Clinical Predictors of Mental Disorders Among Medical Outpatients." *Archives of Internal Medicine* 161, no.6 (March 26, 2001): 875. <https://doi.org/10.1001/archinte.161.6.875>.
- [7]. Zahid MA, Razik MA et al : Psychiatric morbidity among the general hospital medical patients in Kuwait Characteristics of Psychiatric Patients. *J Med principles practice* 1998;8:301-308.
- [8]. Prakash O, Gupta LN : Profile of psychiatric disorders and life events in medically ill elderly –Experience from Geriatric clinic in North India. *International Geriatric Psychiatry* 2007;22:1101-11
- [9]. Hemert V, Hengeveld H et al : Psychiatric disorders in relation to medical illnesses among patients of a general inpatient clinic. *Psycholo Med* 1993;23:167- 173.
- [10]. Alam MN. Psychiatric Morbidity in General Practices. *Bang Med Res Coun Bull*. 1981; 4(1) 22-39