



PREVALENCE OF HEADACHE AMONG PATIENTS WITH PSYCHOTIC DISORDER: A CROSS SECTIONAL COHORT STUDY.

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ABSTRACT

Prevalence of headache among patients with psychotic disorder: a cross sectional cohort study.

Aims—We plan this study to explore the prevalence of headache among psychotic disorders.

Methods— It was a cross sectional observational study. All subjects were assessed for inclusion – exclusion criteria, and on qualification they were requested to fill up Socio-demographic data sheet or asked verbally and filled up by investigators.

Results— A total of 245 subjects with mean age of 35.38 years (\pm 5.17 years) with mean duration of psychotic illness of 2.32 ± 0.54 Years, 53.87% males and mostly belonging to hindu religion 80.40% and 64.08 % were unemployed. There was headache among 189 (77.14 %) of the sample, Migraine consisted 22.85%, Tension headache consisted 43.26 %, Cervicogenic headache 7.75% and remaining was others or unspecified types of headache 3.26%.

Conclusions— This study finds a prevalence of 77.14 % of headache among psychotic patients, that includes migraine among 22.85%; tension headache 43.26%; cervicogenic 7.75 % and others or unspecified 3.26%.

KEYWORDS : Prevalence; Psychosis; Headache.

INTRODUCTION

Headache is one of the most common complains across all population, the presence of headache impacts on a person's function and quality of life. People with headaches recorded significantly worse scores for physical, social and role functioning components of quality of life and had worse mental health than people with chronic diseases such as arthritis and diabetes, even can be as bad as patients with myocardial infarction [1].

There can be various primary headache, which may be present alone or may be present as co morbid conditions. There is considerable overlap of clinical symptoms across migraine, tension type, cervicogenic and other headache [2,3]. Headache is the most frequent somatic symptom in children and adolescents referred for emotional and behavioural disorders, as well as in patients with depression and/or anxiety psychosis [4]. There are studies that suggests that cognitive impairments can be attributed to a decrease in behavioural responses to pain [5], Similarly one more significant study reported that poor communication and cognitive impairments as well as negative symptoms such as blunted responses experienced by this population group could contribute to altered pain expression [6].

Based on these findings, we plan this study to explore the prevalence of headache among psychotic disorders.

MATERIALS AND METHOD

The aim of the present study was to assess the prevalence of headache among psychotic disorders. This study was conducted at department of Psychiatry at Hi-Tech Medical College and Hospital, Bhubaneswar, which is a tertiary care medical college hospital of Odisha, India. The study protocol was approved by the institutional review board of Hi-Tech Medical College and Hospital, Bhubaneswar. All participants provided informed consent and all procedures adhered to the declaration of Helsinki. It was a cross-sectional study carried out over a seven months period (January 2018 – July 2018). All consenting men and women, who attended this hospital for psychiatric consultation either as new patients or follow up old psychotic patients. All recruited subjects who satisfied

the inclusion criteria for the study, presence of any major co morbid medical or other illness was kept as exclusion criteria. Included patients were examined clinically after taking detailed history and their socio demographic variables. They were requested to complete a questionnaire about their socio-demographic data sheet.

Participants were not selected according whether they experienced headache or not rather they were selected with a confirmed psychiatric diagnosis of schizophrenia or schizoaffective disorder with age over 18 year. The exclusion Criteria included a history of affective psychosis or presence of catatonia or gross cognitively impairment resulting inability to complete the questionnaire.

Tools

Socio-demographic Data Sheet: The socio demographic data sheet included age, religion, occupation, education and clinical information were recorded.

Procedure: It was a cross sectional observational study. All subjects were assessed for inclusion – exclusion criteria, and on qualification they were requested to fill up Socio-demographic data sheet or asked verbally and filled up by investigators.

Statistical Analysis:

The collected data of all patients was statistically analyzed, using Statistical Package for Social Sciences (SPSS, Inc., Chicago, Illinois) version 10.0. Data analysis included means and standard deviations for complete sample. Frequency analysis was used to determine the prevalence of headache in psychosis.

RESULTS

A total of 245 subjects were included for the study, Table 1 summarizes the sample characteristics and finding of the study. The mean age of the sample was 35.38 years (\pm 5.17 years) with minimum age of 21 years to a maximum age of 55 years in our sample. The mean education years for the sample were found to be 10.21 ± 2.12 years. The mean duration of illness was 2.32 ± 0.54 Years.

There were 132 male consisting 53.87% and 113 female participants consisting 46.12 % of the sample. The sample consisted of mostly Hindu religion (n=197, 80.40%) and other non Hindu consisted only 19.60 % (n=48). Among the total sample size of 245 patients 157 patients (64.08 %) were unemployed, and 35.9% were working class (n=88) (Table -1).

There was reporting of headache among 189 (77.14 %) of the sample where as only 56 patients did not complained about headache, consisting 22.86%. Using the algorithm developed in the study investigators independently classified all the headaches into migraine (MH), tension type (TTH), cervicogenic (CGH) and other (OH) headache. Among the patients who reported headache were mostly mixed type of headache but we attempted to clarify the predominant pattern of headache and classified accordingly. The headache was categorized as Migraine that consisted n=56 (22.85%); Tension headache, that consisted 106 sample (43.26 %); Cervicogenic headache n= 19 (7.75%) and rest of the sample were either others or unspecified types of headache n=8 (3.26%). (Table -1)

DISCUSSION

The aims of this study were to determine the prevalence of headache in people with psychosis including schizophrenia, delusional disorder and schizoaffective disorder.

We found a 77.14 % of prevalence of headache, It is found to in accordance with many other studies reporting almost similar prevalence rate for headache among psychotic patients [2- 3, 5]. We found prevalence of headache on slightly higher side of this range of these referenced studies. On sub typing most of the clinical presentation was of mixed types of headache but on clarifying the predominant pattern of headache we classified them as migraine, tension type, cervicogenic and other or unspecified headache. Usually mild variation in prevalence may be attributable to sample selection and different criteria used for diagnosis.

On comparing from general population prevalence of tension-type headache were 63 and 86% respectively for men and women for last one year. The point prevalence of headache was 11% in men and 22% in women. Prevalence of migraine in the previous year was 6% in men and 15% in women. [7]

In specific types of headache for migraine, ours finding of 22.85% prevalence was similar to the earlier reported 19.4% prevalence of migraine by Kuritzky et al. [8] that exactly assessed the prevalence of headache among psychotic illness. One more similar study reported 17.8% prevalence is comparable to our study.

Similarly for Tension type headache the prevalence was found to be 43.26% in ours study, in accordance Kuritzky et al. [8] found prevalence for TTH of 28.7%, which was significantly lower than ours study. The 5% prevalence of CGH in our study was comparable to that the 4.6% determined by Knackstedt et al. [9] in the general population. Painful dysfunction of somatic structures in the cervical spine drives the experience of CGH and can be triggered by sustained awkward neck postures, neck movement or pressure over the occipital area [10].

In ours study we excluded patients with significant head injury in past and any diagnosed epilepsy that may be the primary cause for headache. In future we need larger samples size, along with a matched control group, simultaneous assessment of quality of life, disability and burden of various other psychological problems, and follow-up studies to know the longitudinal course of these problems of headache and prognostic association with status or actual recovery of psychosis.

CONCLUSION: This study finds a prevalence of 77.14 % of headache among psychotic patients, that includes migraine among 22.85%; tension headache 43.26%; cervicogenic 7.75 % and others or unspecified 3.26%.

TABLE 1: Sociodemographic profile of the sample and findings (n= 245)

	Mean ± SD	Min	Max
age	35. 38 ± 5.17	21	55
Years of education	10.21 ± 2.12	5	15
Duration of Illness (Years)	2.32 ± 0.54	0.6	8
		n	%
Gender	Male	132	53.87
	Female	113	46.12
Religion	Hindu	197	80.40
	Others	48	19.60
Occupation	unemployed	157	64.08
	Working	88	35.92
Presence of Headache		189	77.14
Absence of Headache		56	22.86
Headache -Types Predominantly	Migraine	56	22.85
	Tension	106	43.26
	Cervicogenic	19	7.75
	Others / Unspecified	8	3.26

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