



COMPARISON OF DEPRESSION AND RESILIENCE AMONG THE CARETAKERS OF PATIENTS WITH SCHIZOPHRENIA AND BIPOLAR AFFECTIVE DISORDER

Rameshwar S Manhas	Senior Resident, Department of Psychiatry, Government Medical College, Jammu, J&K, India.
Gaurav S Manhas*	Resident Scholar, Department of Radiodiagnosis, Government Medical College Jammu, J&K, India *Corresponding Author
Angli Manhas	Senior Resident, Department of Ophthalmology, Government Medical College Jammu, J&K, India.
Jagdish R Thappa	Prof & HOD, Department of Psychiatry, Government Medical College, Jammu, J&K, India.
Rakesh Banal	Lecturer, Department of Psychiatry, Government Medical College, Jammu, J&K, India

ABSTRACT

Background: Schizophrenia and bipolar affective disorders (BPAD) are two mental illnesses with different features. Moreover the care of burden and financial difficulties are high whereas quality of life is low among the caretakers of schizophrenia when compared to other mental illnesses.

Aims: To compare depression and resilience among the caretakers of patients with schizophrenia and bipolar affective disorder.

Materials & Methods: The present comparative study was conducted among the caretakers of patients with schizophrenia and bipolar affective disorder (BPAD) who accompany their patients for psychiatric consultations in the psychiatric OPD of a tertiary care hospital, Jammu. The caretakers of the patients were assessed by HAM-D Scale and 25 Item Resilience Scale at the time of interview.

Results: Mean HAM-D score of caretakers of patients of bipolar affective disorder is 17.42 (± 8.21) whereas the mean HAM-D score of caretakers of patients with schizophrenia is 16.37 (± 8.68). The difference between the mean HAM-D score of the two groups was highly significant. The mean resilience score of caretakers of patients with schizophrenia is 119.83 (± 25.10) and that of bipolar affective disorder is 119.45 (± 24.73). The difference between the mean resilience score of the two groups was non significant.

Conclusion: From present study, it has been concluded that depression is significantly higher among caretakers of patients with bipolar affective disorder but there is no difference in resilience of the caretakers of patients with schizophrenia and bipolar affective disorder.

KEYWORDS : Depression, Resilience, Schizophrenia.

INTRODUCTION:

Mental disorders are one of the leading causes of disease and disability in the World as around 450 million people currently suffer from such conditions. Gradually it has been recognized that mental disorders are a public health problem and the burden of which is increasing throughout the world. At some point in their lives, one in four people in the world will be affected by mental or neurological disorders. Mental disorders accounted for 13 % of the world's burden of diseases in 2001 and by 2020 this figure is projected to increase to 15 %. As the individuals with psychiatric illnesses remain ill for many years, they were unable to perform daily roles in society normally expected of individuals of their age.¹ Moreover there have been negative attitudes regarding psychiatric disorders among different societies. An important determinant of the psychological health of an individual is interpersonal relationships.²

As humans are social beings, they live in a family setup and during illness the family members are automatically assigned to take care of the patient. During present times there is increase in the shift of psychiatric care to the community care due to de-institutionalization and thus the role of family caregivers has gained importance. Moreover the responsibilities of the caregivers increase tremendously as they have to take care of the patient's medical, financial and social needs along with lot of burden and stress in managing the individual diagnosed with the disorder.³ Talsma AN had done a cross-sectional study in which she had evaluated the

theoretical model of resilience. In her study she had suggested that chronic strain was a risk factor which had a detrimental effect on an individual's resilience and the social support and behavioural ways such as physical activities were mediating the impact of chronic strain.⁴ Schizophrenia and bipolar affective disorders (BPAD) are two mental illnesses with different features. Schizophrenia is a continuous illness with deteriorating course⁵ whereas BPAD is an episodic illness with intermittent episodes of relapse and remission with functioning during the remission phase equivalent to that of pre-morbid levels.⁶ Moreover the care of burden and financial difficulties are high whereas quality of life is low among the caretakers of schizophrenia when compared to other mental illnesses.⁷ Hence the present study is conducted to compare depression and resilience among the caretakers of patients with schizophrenia and bipolar affective disorder.

METHODOLOGY:

The present comparative study was conducted among the caretakers of patients with schizophrenia and bipolar affective disorder (BPAD) who accompany their patients for psychiatric consultations in the psychiatric OPD of a tertiary care hospital, Jammu. The caretakers of the patients were assessed by HAM-D Scale⁸ and 25 Item Resilience Scale⁹ at the time of interview.

STATISTICAL ANALYSIS:

Analysis of data was done using statistical software MS Excel / SPSS version 17.0 for windows. The statistical techniques t

test and Pearson correlation coefficient were used. The $p \leq 0.05$ was considered to be statistically significant whereas $p \leq 0.001$ was considered highly significant.

Observations and results:

Table 1 shows that mean HAM-D score of caretakers of patients of bipolar affective disorder is 17.42 (± 8.21) whereas the mean HAM-D score of caretakers of patients with schizophrenia is 16.37 (± 8.68). The difference between the mean HAM-D score of the two groups is 1.05 with a p-value of 0.001 which is highly significant.

Table 2 shows that the mean resilience score of caretakers of patients with schizophrenia is 119.83 (± 25.10) and that of bipolar affective disorder is 119.45 (± 24.73). The difference between the mean resilience score of the two groups is 0.38 and the p-value of comparison between the groups is 0.42 which is non-significant.

DISCUSSION:

Caring for a mentally ill person is a stressful experience which is acknowledged universally.¹⁰ Caretakers of people with mental illness report feeling stigmatized which is associated with withdrawal of social support.¹¹ The concept of resilience was introduced as the caretakers of the mentally ill patients face difficulty in dealing with symptoms of mental illnesses which includes social isolation, wandering tendencies, paranoia, violent episodes, impaired sleep, excessive spending of money, disorganized sleep, social withdrawal etc.¹² Since schizophrenia and bipolar affective disorders are two different mental illnesses, hence the present study is conducted to compare depression and resilience among the caretakers of patients with schizophrenia and bipolar affective disorder.

The mean HAM-D score of caretakers of patients with bipolar affective disorder is 17.42(± 8.21) which is higher than the caretakers of schizophrenic patients who have a mean HAM-D score of 16.37(± 8.68). The difference between the two groups is 1.05 which is highly significant (p -value=0.001). The finding in present study suggests that the depression is significantly higher in caretakers of bipolar patients as compared to those of schizophrenic patients. This could be explained by the fact that majority of schizophrenic patients in our study were chronic and relatively stable patients on medication, who were largely asymptomatic at the time of assessment whereas in case of bipolar group majority of the patients were cases of acute mania who were violent and were beating their family members. Moreover there is strong association of depression among the caretakers who are beaten by their patient.¹³ To the best of our knowledge we didn't find any study which had compared depression among caretakers of patients with schizophrenia and bipolar affective disorders.

In the present the mean resilience score of caretakers of schizophrenic patients is 119.83 (± 25.10) whereas that of caretakers of patients with bipolar disorders is 119.45 (± 24.73) with an insignificant difference of 0.38 between the two groups (p -value=0.42) which shows that resilience in caretakers of patients with schizophrenia is almost similar to that of caretakers of patients with bipolar disorders. Families of patients with bipolar disorder and schizophrenia suffer from nearly same problems and stigma. Both being severe mental illness, which are chronic in nature and with passage of time the perceived stress on the caregivers may be reduced as they may get adjusted to changing behaviour patterns of the patient and because of habituation they become more resilient individuals over the years.³ Our finding is in accordance with Jain A et al who found no significant difference in resilience among the caretakers of patients with schizophrenia and bipolar disorders.³

CONCLUSION:

From present study, it has been concluded that depression is significantly higher among caretakers of patients with bipolar affective disorder but there is no difference in resilience of the caretakers of patients with schizophrenia and bipolar affective disorder. However very little research is available regarding this field, hence more research is recommended.

Acknowledgement:

Thanks from the core of my heart to GOD and my parents for their blessings.

Declaration:

Funding: No funding sources

Conflict of interest: None declared

Table 1 shows mean HAM-D score of caretakers of patients with schizophrenia and bipolar affective disorder

	Number of caretakers	Mean HAM-D score	Difference in mean HAM-D score	P-value
Schizophrenia	150	16.37 (± 8.68)	1.05*	0.001
Bipolar disorder	130	17.42 (± 8.21)		

*P-value significant at the level of 0.05

**P-value highly significant at the level of 0.001

Table 2 shows mean Resilience score of caretakers of patients with schizophrenia and bipolar affective disorder

	Number of caretakers	Mean Resilience score	Difference in mean Resilience score	P-value
Schizophrenia	150	119.83 (± 25.10)	0.38	0.42
Bipolar disorder	130	119.45 (± 24.73)		

*P-value significant at the level of 0.05

**P-value highly significant at the level of 0.001

REFERENCES:

- Vijayalakshmi K. Depression and associated factors among caregivers of patients with severe mental illness. The international journal of Indian psychology 2016;36:46.
- Uddin MMJ, Alam MT, Ahmed HU et al. Psychiatric Morbidity among Caregivers of Schizophrenia Patients – A Study in Tertiary Care Psychiatric Hospital in Dhaka. J Curr Adv Med Res.2015;(1):12-17.
- Jain A and Singh DC. Resilience and quality of life in caregivers of schizophrenia and bipolar disorder patients. Global journal of human social science (A) 2014;14(5):24-28.
- Talsma AN. Evaluation of the theoretical model of resilience and select predictors of resilience in a sample of community based elderly. Dissertation abstracts international 1995;56(8):4246.
- Sadock BJ, Sadock VA. Brain Stimulation Methods in: Kaplan & Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry. 10th ed. Lippincott Williams & Wilkins; 2007;Chapter13:467-497.
- Sadock BJ, Sadock VA. Brain Stimulation Methods in: Kaplan & Sadock's Synopsis of Psychiatry: Behavioral Sciences/Clinical Psychiatry. 10th ed. Lippincott Williams & Wilkins; 2007;Chapter15:527-561.
- Gururaj GP et al. Family burden, quality of life and disability in obsessive compulsive disorder: An Indian perspective. Journal of postgraduate medicine 2008;54:91-97.
- Hamilton M. A rating scale for depression. J Neurol Neurosurg Psychiatry 1960; 23:56-62.
- Wagnild GM and Young H M. Development and psychometric evaluation of the Resilience Scale. Journal of Nursing Measurement 1993;1(2):165-178.
- Nehra R et al. Caregiver-coping in bipolar disorder and schizophrenia. A re-examination. Soc Psychiatry Psychiatr Epidemiol (2005) 40 : 329-336.
- Perlick DA et al. Perceived stigma and depression among caregivers of patients with bipolar disorder. British journal of psychiatry 2007; 190:535-536.
- Abelenda J and Helfrich CA. Family resilience and mental illness: The role of occupational therapy. Occupational therapy in mental health 2003;19(1):25-39.
- Rodrigo C, Fernando T, Rajapakse S, Silva VD and Hanwella R. Caregiver strain and symptoms of depression among principal caregivers of patients with schizophrenia and bipolar affective disorder in Sri Lanka. International Journal of Mental Health Systems 2013;7:2:2-5.