

Original Research Paper

Medical Science

TO STUDY SOCIO-DEMOGRAPHIC AND CLINICAL VARIABLE OF STABLE SCHIZOPHRENIC PATIENTS

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ABSTRACT

Background: Schizophrenia is a chronic and severe mental disorder. Begins in late adolescence or early adulthood and characterized by significant disruption in thinking, language, Perception and behavior. Aim: The aim of the present study was to examine sociodemographic and clinical variable of stable schizophrenic patients. Methods: 100 patients under treatment for schizophrenia who are stable for at least 3 month were included in the study. PANSS (positive and negative syndrome scale) was used for the assessment of stability of schizophrenia patients. Sociodemographical data were used to evaluate the related factors. Results: The majority of the patient's were male, 51% were married and belonged to Hindu religion, majority were literate up to various levels, unemployed and belonged to no income group, majority live in urban area. The mean age of the patient was 35.28 ± 10.20 years, Mean of monthly income 865 ± 3473.0 , Mean of age of onset of illness was 25.87 ± 8.82 years, Mean of total duration of illness was 9.49 ± 6.77 years, Mean of number of hospitalization was $.79 \pm 1.43$, the Mean of time spent in the hospital was 12.31 ± 25.49 days, while Mean of PANSS scores were $.44.98 \pm 7.18$. Conclusion: The study gives insight about demographic and clinical variables in stable schizophrenic patients.

KEYWORDS: Schizophrenia, Socio-demographic, Clinical Variable

INTRODUCTION

Schizophrenia is a chronic and severe mental disorder. Characterized by long and progressive illness in various individuals.[1] Typically begins in late adolescence or early adulthood and characterized by significant disruption in thinking, language, perception and behavior that impair daily functioning, and can be disabling and often includes psychotic experiences, such as hearing voices or delusions followed by presentation of inappropriate emotions.[2] Schizophrenia alters individuals' perception of reality, in which the patient loses connection with actuality. It often results in a loss of social functioning in affected individuals. [3] About twenty-one million individuals suffer from schizophrenia globally (WHO). [2] It has been estimated that approximately 7 individuals per 1000 will develop schizophrenia during their lifespan. The prevalence of schizophrenia approaches 1% internationally. The incidence of schizophrenia 1.5 per 10,000 people. Schizophrenia also commonly starts earlier among men. [4,5,6] Most of the studies have focused on active cases of schizophrenia. Here by this study we intended to find profile of stable schizophrenic patients.

MATERIAL AND METHOD:

The study was cross sectional in nature. The study duration was of one year from the date of approval of ethics committee. Purposive sampling technique was used. The study sample consisted of 100 patient of schizophrenia. Patients attending Psychiatry OPD in mental hospital and MY hospital, Indore were recruited in the study. The patients who met the diagnosis of schizophrenia as per ICD-10 and aged between 18-65 years having minimum one year of illness and clinically stable since 3 months were included in the study. Patient of schizophrenia with other mental illness and additional organic disease or intellectual disability were excluded. Written informed consent was obtained from all participants after complete description of the study to the subjects. Assessment of patient group was done as per described methodology. Sociodemographic data was collected. After that clinical assessment of patient group was done using PANSS scales.

Table 1. Socio demographic variable of patient (categorical)

Variable	Frequency (n)	Percentage (%)	
Gender			
Male	59.0	59	
Female	41.0	41	
Marital status		•	
Single	41	41	
Married	51	51	
Widowed	1	1	
Divorced	6	6	
Separate	1	1	
Religion			
Hindu	93	93	
Muslim	6	6	
Christian	1	1	
Education		•	
Illiterate	17	17	
Primary	28	28	
Middle	24	24	
High school	23	23	
Diploma	3	3	
Graduate/postgraduate	5	5	
Occupation			
Unemployed	83	83	
Unskilled	6	6	
Skilled	3	3	
Semiskilled	1	1	
Clerk/shopkeeper/farmer	5	5	
Semiprofessional	2	2	
Professional	0	0	
Income			
No income	84	84	
< = 1802 rs	1	1	
1803-5380 rs	9	9	
5381-8998 rs	3	3	
8989-13494 rs	1	1	
13495-17999 rs	0	0	
18000-36016 rs	1	1	
>36016 rs	0	0	
Locality			
Rural	40.0	40.0	

RESULTS:

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ſ	Urban	60.0	60.0

Table 1.59% were Males, 51% were married, 93% belonged to Hindu religion, 83% were literate up to various levels, 83% were unemployed and majority belonged to urban 60% area.

Table2. Characteristic of patient

	Mean		Range
		deviation	
Age (yr)	35.28	10.20	19-60
Monthly income(Rs)	865	3473.0	0-30000
Age of onset of illness (years)	25.87	8.82	15-57
Total duration of illness (years)	9.49	6.77	2-36
Number of hospitalization	.79	1.43	0-10
Time spent in the hospital	12.31	25.49	0-165
(days in total)			
PANSS	44.98	7.18	31-64

Table 2 shows the characteristic of patient mean age 35.28 \pm 10.20 years. Mean of monthly income 865±3473.0 Rs. Mean of age of onset of illness was 25.87 \pm 8.82 years. Mean of total duration of illness was 9.49 \pm 6.77 years, Mean of number of hospitalization was .79 ±1.43 , the mean of time spent in the hospital was 12.31 \pm 25.49 days, while mean of PANSS scores were 44.98 \pm 7.18.

DISCUSSION

The male patients were (59%) and female's patients were (41%). Male gender had a slight preponderance among patients, (17%) were illiterate, while (83%) were literate up to various levels. (83%) were unemployed individuals and (17%) were employed. (60%) belonged to urban while (40%) belonged to rural background. In a study done by **Kuchhal**, et al similar finding (61.54%) male, (26.92%) illiterate, (76.92%) of the patients unemployed were found, but majority belonged to rural background. ⁷⁷ The reason could be the site of our study, which is tertiary care centre and mainly urban population.

Among patients (51%) were married, (41%) unmarried and (1%) are widowed, Divorced patient were (6%) and (1%) are separate. A study conducted by **Bhat**, et al patient above (53.3%) were unmarried, (33%) were married and (14.7%) were divorced. In their study the majority of Patient was unmarried. [8]

The mean age of the patients was 35.28 \pm 10.20 years, Mean of total duration of illness was 9.49 \pm 6.77 years. Yazıcı et al in their study found the mean age of the patients was 39.27 \pm 11.70 years, that was similar to current study. However mean of duration of illness was 15.79 \pm 9.18 years, higher than the current study. $^{\rm [9]}$

Mean of monthly income was $865\pm3473.0\,\mathrm{Rs.}$ Mean of age of onset of illness was $25.87\pm8.82\,\mathrm{years.}$ J. M. RIB_E et.al also found similar finding. In their study Mean of age of onset of illness was 25.8 ± 9.7 . As per literature also age of onset in schizophrenia is 10 to 25 years for men and 25 to 35 years for women. $^{(10)}$

Mean of number of hospitalization was 0.79 ± 1.43 . The mean of time spent in the hospital was 12.31 \pm 25.49 days. Yazıcı et al in their study found the mean of number of hospitalization was 3.40 ± 4.38 . Mean of time spent in the hospital was 94.54 \pm 128.16 days. This is different from our study. $^{[9]}$ Similarly mean of PANSS scores was 44.98 \pm 7.18. A study by Mikkilineni et al found the score of PANSS 57.30 \pm 12.74. $^{[11]}$ Mean of PANSS was lower in our study, as we have taken stable patients of schizophrenia.

CONCLUSION

On the basis of available literature and results of present study, age of onset is similar as mentioned in literature, majority were male, Hindu, urban and unemployed.

REFERENCES

- Schizophrenia [Internet]. Who.int. 2020 [cited 23 December 2020]. Available from: http://www.who.int/topics/schizophrenia/en/.
- Opoku-Boateng, Y. N., Kretchy, I. A., Aryeetey, G. C., Dwomoh, D., Decker, S., Agyemang, S. A., Tozan, Y., Aikins, M., & Nonvignon, J. (2017). Economic cost and quality of life of family caregivers of schizophrenic patients attending psychiatric hospitals in Ghana. BMC health services research, 17(Suppl 2), 697. https://doi.org/10.1186/s12913-017-2642-0
- Shamsaei, F., Cheraghi, F., & Bashirian, S. (2015). Burden on Family Caregivers Caring for Patients with Schizophrenia. *Iranian journal of psychiatry*, 10(4), 239–245.
- McGrath, J., Saha, S., Chant, D., & Welham, J. (2008). Schizophrenia: a concise overview of incidence, prevalence, and mortality. *Epidemiologic reviews*, 30, 67–76. https://doi.org/10.1093/epirev/mxn001
- Abel, K. M., Drake, R., & Goldstein, J. M. (2010). Sex differences in schizophrenia. International review of psychiatry (Abingdon, England), 22(5), 417–428. https://doi.org/10.3109/09540261.2010.515205
- GBD 2017 Disease and Injury Incidence and Prevalence Collaborators (2018). Global, regional, and national incidence, prevalence, and years lived with disability for 354 diseases and injuries for 195 countries and territories, 1990-2017: a systematic analysis for the Global Burden of Disease Study 2017. Lancet (London, England), 392(10159), 1789-1858. https://doi.org/10.1016/S0140-6736(18)32279-7
- Ashwini Kumar Kuchhal, Abhinav Kuchhal, Viddur Arya, Pavan Kumar Pardal, Chandra Shekhar Sharma, Mahendra Sharma. A study of psychological stress and burden on caregivers of schizophrenic patients. International Journal of Contemporary Medical Research 2019;6(8):H1-H6.
- Bhat BA, Dar SA, Mir RA, Hussain A. Caregiver burden and quality of life in primary caregivers of schizophrenia patients: A cross-sectional study from a tertiary care hospital. Acta Med Int 2020;7:13-8.
- Yazici, E., Karabulut, Ü., Yildiz, M., Baskan Tekeş, S., Inan, E., Çakir, U., Boşgelmez, Ş., & Turgut, C. (2016). Burden on Caregivers of Patients with Schizophrenia and Related Factors. Noro psikiyatri arsivi, 53(2), 96–101. https://doi.org/10.5152/npa.2015.9963
- Ribé, J. M., Salamero, M., Pérez-Testor, C., Mercadal, J., Aguilera, C., & Cleris, M. (2018). Quality of life in family caregivers of schizophrenia patients in Spain: caregiver characteristics, caregiving burden, family functioning, and social and professional support. *International journal of psychiatry in clinical* practice, 22(1), 25–33. https://doi.org/10.1080/13651501.2017.1360500
- Prathyusha Mikkilineni I, Sabari Sridhar. O.T2*, B Srinivasan3, Kailash S4 A study of psychological distress in caregivers of schizophrenia patients Telangana Journal of Psychiatry, July-December 2019:5(2):108-112