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Original Research Paper

Psychiatry

ASSESSMENT OF CAREGIVER BURDEN OF THE PATIENTS SUFFERING FROM ALCOHOL DEPENDENCE.

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ABSTRACT

Objectives: Primary: Assessment of Caregiver Burden of the patients Suffering from Alcohol dependence. Secondary: Evaluate factors associated with the caregiver burden. **Material And Methods** Site of study: Department of Psychiatry, MGMMC, Indore and associated hospital. Study of design: Cross-sectional observation study. Study duration: From October 2022 to September 2023. Sample size: The study sample consisted of a minimum of 100 subjects and their accompanying caregiver. Sample Size calculation $Z^2 \times p \times (1-p)\ d^2$ z = 1.95 d = 0.1 P = proportion/prevalence p = 4.5% n ~ 96 We are including 100 subjects in our study **Inclusion Criteria** Caregivers 1. Caregivers of the patients diagnosed with alcohol dependence as per ICD-10. 2. Only one caregiver who has the primary responsibility of the patient is included in the study for each patient. 3. Staying with the patient during the last year. 4. Caregivers who are 18 years or older 5. Giving written informed consent for the study. **Exclusion Criteria** Caregivers 1.Caregiver of the patient with organic disease or any other psychiatric disorder that affects their cognitive or mental functions. 2.Caregivers who are not willing to participate STUDY TOOLS 1. Informed Consent Form. 2. Socio-demographic and Clinical Data Sheet. 3. ICD 10 Criteria of Alcohol Dependence 4. Burden assessment scale (BAS). 5. Severity of Alcohol Dependence Questionnaire (SADQ). **Statistical Analysis:** Data were encoded and analyzed using Microsoft Office Excel and the Statistical Package for the Social Sciences (SPSS) trial version 20. Financial funding was Nil. Ethical approval has taken by institutional ethical committee before conducting any study-related procedures. **Results:** In our Study Majority of subjects was in age group of 31-40 years of age group. Study also depicted majority of subjects has mild alcohol dependence (59%), followed by moderate alcohol dependence (40), and severe dependence (1%) in the study. Participants with Low Burden exhibit a majority of mild Alcohol dependence (76.0%), followed by moderate Alcohol dependence (22.0%), and a smaller proportion of severe Alcohol dependence (2.0%). In contrast, individuals experiencing High Burden display a more balanced distribution between moderate Alcohol dependence (58.0%) and mild Alcohol dependence (42.0%), with severe Alcohol dependence absent. The chi-sqare tests indicate statistically significant differences in the distribution of the severity of alcohol dependence (p=0.001). **Summery:** Caregiver of alcohol dependent patients often grapple with depression, adopt maladaptive coping mechanisms, and Physical and Financial Burden. **Abbreviations:** AUD: Alcohol use Disorder BAS: Burden Assessment Scale SADQ: Severity of Alcohol Dependence Questionnaire

KEYWORDS :

INTRODUCTION:-

Alcoholism is characterised as a pathological state stemming from the excessive consumption of alcoholic beverages. As delineated by the American Psychiatric Association, the diagnostic criteria for alcoholism comprise three main facets: firstly, the manifestation of physiological symptoms such as hand tremors and blackouts; secondly, an insatiable compulsion to consume alcohol; and thirdly, the emergence of behavioral disruptions that significantly impede occupational functioning. Concurrently, alcohol dependence syndrome is conceptualised as a constellation of physiological, behavioral, and cognitive manifestations where in the consumption of alcohol supersedes other behaviors previously deemed of greater significance to the individual.[1] The surveys focusing on alcohol and drug use yield valuable data regarding current alcohol consumption. According to Ambekar and colleagues (2019), the prevalence of current alcohol use in india is reported at 14.6%.[2] The National Survey on Extent and Pattern of Substance use in India (NNCDMS) 2017-2018 conducted during the same period reported a similar prevalence of 15.9%, indicating that current alcohol use in india is significantly lower than the global average reported by the World Health Organization (WHO) which estimated nearly 57% of the global population reporting alcohol consumption in the past 12 months.

Tilman Wetterling et al. (1999)[3] have classified drinking pattern in to three categories according to frequency of drinking (during the previous six months) and amount of alcohol intake : (1) continuous drinkers = (almost) daily alcohol consumption without binges; (2) frequent heavy drinkers = frequent alcohol consumption (more than 3 days/week) with frequent intoxication (more than one/week); (3) episodic drinkers = less frequent, irregular alcohol consumption with longer (>5 days) sober periods, and some binges (less than one/week).

Caregiver:

An individual, such as a family member or guardian, who takes care of a child or dependent adult.

Caregiver burden In many families, individuals who assume the role of caregivers for patients with alcohol dependence syndrome experience profound repercussions. Caregivers often grapple with familial conflicts, economic turmoil, and even instances of abuse perpetrated by the affected patients, culminating in a loss of purpose and feelings of hopelessness. Caregiver burden is characterised as the strain or stress experienced by caregivers in response to the challenges and difficulties inherent in their role as caregivers to the recipient of care. This condition arises from the demanding nature of care giving tasks and the limitations it impose on the caregiver, leading to discomfort.[4] The impact of caregiver burden extends across multiple domains, affecting caregivers physical, psychological, emotional, and functional well - being.[5] Frequently , caregivers experience symptoms of depression, resort to maladaptive coping mechanisms, and express apprehension about their overall quality of life.

Alcohol dependence is commonly referred to as a "family disease" due to its far reaching impact, extending beyond the individual afflicted to encompass their immediate social circle. This impact manifests in various forms, including occupational and social dysfunction, physical and emotional distress, and financial hardship, all of which significantly disrupt the lives of those closely associated with the affected individual.

MATERIALS AND METHODS

This was a cross- sectional hospital based study to assess the caregiver burden in alcohol dependence patients. Ethical approval has taken by institutional ethical committee before study.Patients and caregivers attending the psychiatry opd in Mental Hospital and MY Hospital, Indore (MP) were recruited. All the diagnosed patients of alcohol dependence as per the International Classification of Disease 10 (ICD-10), and age more than 18 years with history of alcohol dependence were included while those with other mental illness and additional organic disease or intellectual disability were excluded. The caregivers who assisted the patients in their daily functions, were performing their medical monitoring and treatment, who do not perform this work as a professional job, and who are more than 18 years of age are included in the study. Total 100 alcohol dependence patients with their caregivers included in the study. The study excluded caregivers not willing to participate, with an intellectual disability or disease affecting their cognitive or mental functions. After obtaining written informed consent from all the participants they were enrolled in the study. The assessment was done by preformed semi-structured proforma. After obtaining data clinical assessment of patient group was done using severity of alcohol dependence questionnaire (SADQ) while those of caregivers with Burden Assessment Scale (BAS). The SADQ is twenty item questionnaire and for mild dependence the score was from 8-15, for moderate dependence the score was 16-30, and for severe dependence the score was >30. The Burden assessment scale has 19 items questionnaire and each item has score from 1 to 4.The optimal cut-off point for the BAS was 19–39 for low burden and 40–76 for high burden. The maximum score for burden assessment scale was 76 and minimum was 19. There was no financial funding in study.

Statical Analysis:

Data was analyzed with IBM SPSS statistics version 26 Chicago, IL statistical software. Data were presented as frequencies, percentages, mean, And standard deviation. Correlation between severity of alcohol dependence and caregiver burden and duration of alcohol dependence with caregiver burden and sociodemographic of subjects and caregiver with caregiver burden were assessed using Pearson's correlation coefficient.

RESULTS

In our Study Majority of subjects was in age group of 31-40 years of age group.

Study also depicted majority of subjects has mild alcohol dependence (59%), followed by moderate alcohol dependence (40), and severe dependence (1%) in the study.

Participants with Low Burden exhibit a majority of mild Alcohol dependence (76.0%), followed by moderate Alcohol dependence (22.0%), and a smaller proportion of severe Alcohol dependence (2.0%). In contrast, individuals experiencing High Burden display a more balanced distribution between moderate Alcohol dependence (58.0%) and mild Alcohol dependence (42.0%), with severe Alcohol dependence absent.

The chi-sqare tests indicate statistically significant differences in the distribution of the severity of alcohol dependencee ($^2(2)=13.998$ ($p=0.001$).

DISCUSSION

Alcoholism is characterised as a pathological state stemming from the excessive consumption of alcoholic beverage.In our study age group of patients was 21-70 and most of patients are in the 31-40 years age group. This was well compared with studies carried out: Shanmugam et al. (2021) got majority of subjects in 23-50 age group, Rathee et al.(2022) also matched age wise due to inclusion of alcohol dependence of more than 18 years. Joseph et al. (2023) included majority of caregivers in between 30-60 years age group which is depicting the involvement of adult and younger population. Goit et. al. (2021) were also showing similar data of most of the participants belonging to 31-40 years age group.

In our study the majority of subjects were mild alcohol dependence (59%), followed by moderate alcohol dependence (40%) as per SADQ score.This was similar to study done by Chougule et. al. (2022) included 150 subjects of alcohol dependence and found that 51 (34%) of subjects had mild alcohol dependence as per SADQ score.

Joseph et. al (2023) included 100 alcohol dependence subjects in the study and found 79 subjects of either mild or moderate degree of alcohol dependence.

Ramanujam et. al. (2017) found 52% subjects belonging to mild alcohol dependence as per SADQ score. The dominance (99%) of subjects of either mild or moderate alcohol dependence in our study was also matched by other studies showing more than 80% subjects belonging to mild to moderate category, this could be due to help seeking behaviour among mild to moderate degree of alcohol dependence subjects in our hospital and is attributable to sample limitation.

In this study caregiver burden in alcohol dependence is closely related to the severity of the patient's alcohol consumption. Caregivers of individuals with moderate to severe alcohol dependence, experience significantly higher levels of stess. This shows the importance of providing support and resources to caregivers, especially those dealing with more challenging cases of alcohol dependence.

It also suggests that early intervention and treatment for alcohol dependence could potentially reduce the long-term burden on caregivers. addressing both the patient's addiction and the caregiver's needs is crucial for improving the overall quality of life of both individuals.

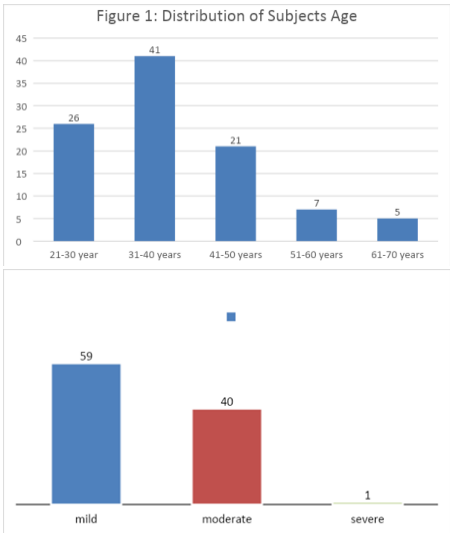

Figure:-2 Severity of Alcohol Dependence of Subjects

Table No. 01:- Association of Severity of Alcohol dependence

of Subject with BAS.

The Severity of Alcohol dependence	BURDEN ASSESSMENT SCALE			
	Low Burden		High Burden	
Mild	38	76.0%	21	42.0%
Moderate	11	22.0%	29	58.0%
Severe	1	2.0%	0	0.0%
	50	100.0 %	50	100.0 %

CHI-SQ TEST	Value	df	P value
	13.99	2	.001

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