



## A Study to Assess The Level of Depression Seen Among the Client Diagnosed with Diabetic Mellitus in Krishna Hospital, Karad

### KEYWORDS

BECK DEPRESSION INVOTORY rating: normal =1-10, borderline =17-30, moderate depression=21-30, Severe Depression=31-40, Extreme depression over =40

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**ABSTRACT** **BACKGROUND** - Over 285 million people have diabetic mellitus worldwide because of d diabetic mel- litus increase the risk of developing depression.

**OBJECTIVES:** To assess the level of depression among the client diagnosed with diabetic mellitus in Krishna hospital karad. And to find an association between level of depression and selected Scio demographic variables.

**MATERIAL AND METHODS-** Descriptive survey approach was used, 50 samples was taken by using structured inter- view technique (BECK DEPRESSION INVOTORY) used by convenience sampling technique.

**Results:-** BECK depression Inventory used and out of 50 patients 28(56%) are in moderate depression level, 10(20%) in severe depression level,6(12%) patient in borderline depression level & 5(10%) in mild depression level. Nobody in extreme & normal depression level. 20(33.33%) had moderate depression and 2(3.33%) had severe depression. No- body in very No association between demographic variables Assessing the level of depression in Diabetes patients out of 50 patients in socio demographic variables in age 51-60yrs29(58%), education 25(50%), married 24(84%),in- come low 10,000-15,00026(56%),habit 26 (52%),types of family 26 (52%),religion 46(92%)

**CONCLUSION:** The main outcomes of the study that diabetic patients are always in depression.so many interventional programs on depression were helped to reduce the level of depression .most of the patient were satisfied with com- munication with staff so she must teach them depression management technique an early recognition of symptoms ,family support.

### INTRODUCTION:

Diabetic mellitus is a multi-system disease relate to abnormal insulin production impaired insulin utilization or both. Diabetic mellitus is a serious breath problem throughout the world. Diabetes is the 6<sup>th</sup> leading cause of death worldwide. Diabetes associate with reduce life expectancy, significant morbidity morality and diminished quality of life.

The prevalence of diabetic mellitus has been estimate to vary from 8 to 15% among the urban population in India with a significantly increasing trend over the years. The prevalence of depression and anxiety in diabetes is considerably higher than normal population and ranges between 12 and 28%. high glucose level appears to be associate with negative mood ratings.

Diabetes has been associate with poor quality of life in pre- vious Indian studies. Also, the issues of stress and role of psychosocial factors in Diabetes has also been addressed by Indian authors work diabetes day is the major global aware- ness campaign for patient with diabetes day was introduce in 1991 ,celebrate on 14<sup>th</sup> November each year to co-inside with the birthday of Fredrick Banteng who along with Charles best first conceive the idea that lead to the discov- ery of insulin.

### AIMS & OBJECTIVES:

To assess the level of depression among the client diagnosed

with diabetic mellitus in Krishna hospital karad. And to find an association between level of depression and selected Scio demographic variables.

### Methods and material:

descriptive survey approach was used by using convenience sampling technique. The study was done in Krishna hospital Karad in wards. Ethical Permission taken to conduct study. Purpose of the study was explained to the subject. Informed written consent was taken from each subject. (BECK DEPRES- SION INVOTORY) structured questionnaire was used to assess the level of depression among diabetic patient. Structured questionnaire was prepared to collect demographic data. The data were tabulated an analyze in term of objectives of the study using descriptive an inferential statistics.

### RESULTS:

#### TABLE NO: 1

#### Distribution of frequency according to socio- demo- graphic variables:

sl.no	socio demographic variable	frequency	percentage
1	AGE(years)		
	30-40	0	0%
	41-50	11	22%
	51-60	29	58%
	61-70	06	12%
	71 & above	04	8%

2 MARITAL STATUS			
	Unmarried	03	6%
	Married	42	84%
	Widow	05	10%
	divosed	0	0%
3 RELIGION			
	Hindu	46	92%
	Muslim	02	04%
	Christian	0	0%
	Other	02	04%
4 EDUCATION			
	Illiterate	8	16%
	Primary education	25	50%
	Secondary education	07	14%
	Graduate	10	20%
5 MONTHLY INCOME			
	<5000	01	02%
	5000-10000	02	04%
	10000-15000	08	16%
	15000-20000	26	52%
	20,000 & above	13	26%
6 TYPE OF FAMILY			
	Nuclear family	23	46%
	Joint family	25	50%
	Extended family	02	04%
7 HABITS			
	Alcoholism	07	14%
	Tobacco chewing	09	18%
	Misery	23	46%
	Cigarette smoking	0	0%

TABLE NO-1 shown that patients with age group of 51-60 yrs 29 (58%), primary education 25 (50%), married 42 (84%), 15,001-20,000 26 (52%), in habits Mishary 23 (56%), types of family 25 (50%), Hindu 46 (92%)

Keyes: BECK DEPRESSION INVOTORY rating: normal =1-10, borderline =17-30, moderate depression=21-30, Severe Depression=31-40, Extreme depression over =40

**TABLE NO-2**  
Distribution of level of depression according to (BECK DEPRESSION INVOTORY):scale

Sr.no	Level of depression	score
1	Normal	01
2	Mild depression	05
3	borderline	06
4	Moderate depression	28
5	Severe depression	10
6	Extreme depression	0

**Graph -1** Frequency and percentage distribution of sample according to their level of depression according to (BECK DEPRESSION INVOTORY):

**TABLE NO-3: It shows association between levels of depression according to socio- demographic variables:**

Sr No	socio- demographic variables:	Chi-square value	p-value	Association
1	Age	21.277	0.0465	S
2	Education	9.933	0.6218	NS
3	Marital status	6,635	0.5764	NS
4	Income	19.708	0.2337	NS
5	Habits	27.5	0.0006	S
6	Types of family	6.602	0.5802	NS
7	Religion	5.148	0.7417	NS

S= Significant

NS=Not Significant

According to association between demographic variable and levels of depression, association with age and habits were found because p value is less than 0.05%.

#### DISCUSSION:

According to BECK depression Inventory used and out of 50 patients 28(56%) are in moderate depression level, 10(20%) in severe depression level, 6(12%) patient in borderline depression level & 5(10%) in mild depression level. Nobody in extreme & normal depression level. The aim of study to assess the level of depression. The aim of study to assess the level of depression in Diabetic patient

In the present study levels of depression and socio- demographic variables associate with age and habits and not to associate with education, types of family, religion, marital status, income.

Contradictory finding are found in study conducted on prevalence of depression among the people with type -2 diabetic mellitus Palestine in 2013-2014 at Al-Makhfish primary health care Centre. Statistical significant association were found between high BDI -2 SCORE (>16) a female gender, low educational level, having no current job having multiple additional illnesses, low medication adherence and obesity.

#### CONCLUSION:

Clinically psychosocial assessment is necessary at primary healthcare clinics to improve quality of life and decrease adverse outcomes among diabetic patients. The coexistence of diabetes and depression is associated with significant morbidity, mortality and increased healthcare cost. Coordinated strategies for clinical care are necessary to improve clinical outcomes and reduce the burden of illness.

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