## Dr Munish Saroch

Dr Amit Saini*
Dr Harjitpal Singh

Professor, Department of ENT, Dr Rajender Prasad Government Medical College, Tanda, Kangra, Himachal Pradesh, India-176001.
Medical Officer, Department of ENT, Dr Radhakrishnan Government Medical College, Hamirpur, Himachal Pradesh, India-177001. *Corresponding Author
Assistant Professor, Department of ENT, Dr Radhakrishnan Government Medical College, Hamirpur, Himachal Pradesh, India-177001.

ABSTRACT Objective: To measure the negative emotional state in allergic rhinitis patients using DASS scale.
Material \& Methods: Two hundred patients suffering from allergic rhinitis who visited Out Patient department of Otorhinolaryngology were presented 42 item DASS questionnaire and their negative emotional state was measured.
Results: On applying DASS total of $49.6 \%$ of the patients of allergic rhinitis were having symptoms of severe and extremely severe depression, $42.7 \%$ were suffering from severe and extremely severe anxiety and $6.2 \%$ of patients were suffering from severe and extremely severe stress.
Conclusion: Allergic Rhinitis is strongly associated with depression and anxiety. DASS is a simple tool which can be easily used in outpatient setup.

## KEYWORDS : Allergic Rhinitis, Depression Anxiety and Stress Scale, Depression, Anxiety, Stress

## INTRODUCTION

Allergic Rhinitis (AR) is a very common problem seen in routine Otolaryngology clinics. The prevalence of AR differs in different parts of the world and stands at $20 \%$ to $30 \%$ in Indian population which amounts to substantial number of patients ${ }^{1}$. Allergic Rhinitis is clinically associated with nasal itching, sneezing, watery and mucous nasal discharge and nasal obstruction. Allergic rhinitis may be classified as seasonal (i.e., symptoms occur during a specific time of the year) or perennial (i.e., symptoms occur year round). Regardless of the nature of the allergen, the symptoms of allergic rhinitis are notably discomforting ${ }^{2}$. In addition to nasal discomfort, there appears to be enough evidence for a relationship between allergic rhinitis and negative emotional symptoms as depression, anxiety and stress. ${ }^{3}$ The DASS is a 42-item questionnaire which includes three self-report scales designed to measure the negative emotional states of depression, anxiety and stress ${ }^{4}$. In the present study we aim to quantify the symptoms of negative emotional state in patients of AR using the DASS.

## Depression Anxiety and Stress Scale (DASS)

The Depression Anxiety and Stress Scale ${ }^{4}$ (Lovibond \& Lovibond, 1995) is a self reported questionnaire which includes three self-report scales designed to measure the negative emotional states of depression, anxiety and stress. Each of the three scales contains 14 items. The Depression scale assesses dysphoria, hopelessness, devaluation of life, self-deprecation, lack of interest/involvement, anhedonia, and inertia. The Anxiety scale assesses autonomic arousal, skeletal muscle effects, situational anxiety, and subjective experience of anxious affect. The Stress scale (items) is sensitive to levels of chronic non-specific arousal. It assesses difficulty relaxing, nervous arousal, and being easily upset/agitated, irritable/over-reactive and impatient. Respondents are asked to use 4-point severity/frequency scales to rate the extent to which they have experienced each state over the past week which is as follows:

0 Did not apply to me at all
1 Applied to me to some degree, or some of the time
2 Applied to me to considerable degree, or a good part of the time
3 Applied to me to very much, or most of the time

## Scoring:

Scores of Depression, Anxiety and Stress are calculated by summing the scores for the relevant items.
The depression scale items are $3,5,10,13,16,17,21,24,26,31,34$, 37, 38, 42.
The anxiety scale items are $2,4,7,9,15,19,20,23,25,28,30,36,40$, 41.

The stress scale items are $1,6,8,11,12,14,18,22,27,29,32,33,35$, 39.
classified into normal, mild, moderate, severe and extremely severe as given in table 1. ${ }^{4}$

Table 1. Classification Of Depression, Anxiety And Stress As Per DAS Scale

|  | Depression (D) | Anxiety (A) | Stress (S) |
| :--- | :--- | :--- | :--- |
| Normal | $0-9$ | $0-7$ | $0-14$ |
| Mild | $10-13$ | $8-9$ | $15-18$ |
| Moderate | $14-20$ | $10-14$ | $19-25$ |
| Severe | $21-27$ | $15-19$ | $26-33$ |
| Extremely Severe | $28+$ | $20+$ | $34+$ |

## METHODS

The current study included two hundred patients suffering from allergic rhinitis who visited the outpatient department of otolaryngology in a tertiary care centre of mid Himalayan region.

## Inclusion Criteria

1 Age between 15 to 60 years
2 Clinical symptoms of AR

## Exclusion Criteria

1 Age $<15$, $>60$
2 Nasal polyps on Anterior Rhinoscopy
$3 \mathrm{H} / \mathrm{o}$ cough/SOB
A questionnaire was prepared to enquire about the presenting symptoms (nasal congestion/blockage, sneezing, itching, running nose), duration of symptoms, aggravating factors and whether the symptoms were relieved in between attacks was filled up. All the patients were given the DASS questionnaire to assess the cooccurrence of depression/anxiety/stress amongst sufferers of allergic rhinitis.

## RESULTS

The mean age of study participants was $34.0( \pm 12.4)$ years with $51 \%$ of female participants. The demographic characteristics in Table 2 show that $40.6 \%$ of the study population was unskilled worker by occupation followed by students ( $25.0 \%$ ). All the participants belonged to rural area. The median duration of symptoms of allergic rhinitis with which the patients presented was 36 months. The patients presented with one or more of the symptoms. Majority of them complained of sneezing ( $95.8 \%$ ) followed by running nose ( $90.6 \%$ ) (Table 3). Dust, smoke and pollutants were reported to be aggravating factors by most of the patients ( $66.7 \%$ ) followed by season changes or cold weather ( $63.3 \%$ ).

Table 2: Demographic Characteristics

| Age (in years), Mean ( $\pm$ SD) | $34.0( \pm 12.4)$ |
| :--- | :--- |
| Sex, |  |


| Males (\%) | 49 |
| :--- | :--- |
| Females( \%) | 51 |
| Occupation |  |
| Unskilled (\%) | 40.6 |
| Semiskilled and skilled (\%) | 13.6 |
| Semiprofessional and professional (\%) | 14.6 |
| Self employed/ business | 6.3 |
| Student | 25.0 |

Table 3: Clinical Symptoms And Aggravating Factors

| Symptoms present | Percentage (\%) |
| :--- | :--- |
| Nasal congestion | 80.2 |
| Sneezing | 95.8 |
| Itching | 55.2 |
| Running nose | 90.6 |
| Aggravating factors |  |
| Season/cold | 63.3 |
| Dust/smoke/pollution | 66.7 |
| Strong odour | 13.3 |
| Early morning | 10 |

The DASS was applied to these patients and the scores were added. In the present study $49 \%$ of the patients were found to be suffering from depression (Mild, moderate, severe \& extremely severe). The incidence of patients suffering from severe depression was $22.9 \%$ and those suffering from extremely severe depression was $16.7 \%$. So in total $49.6 \%$ of the patients of allergic rhinitis were also having symptoms of severe and extremely severe depression on applying DASS. This amounts to substantial number of patients (Table 4).

Table 4: Percentage of Allergic Rhinitis Patients suffering from Depression, Anxiety and Stress using DASS

|  | Depression (\%) | Anxiety(\%) | Stress(\%) |
| :--- | :--- | :--- | :--- |
| Normal | 51 | 54.2 | 69.8 |
| Mild | 6.3 | 0 | 13.5 |
| Moderate | 3.1 | 3.1 | 10.4 |
| Severe | 22.9 | 12.5 | 3.1 |
| Extremely severe | 16.7 | 30.2 | 3.1 |
| Total | 100 | 100 | 100 |

The total number of patients suffering from anxiety was $45.8 \%$ (Mild, moderate, severe \& extremely severe) on applying DASS. Of these patients $12.5 \%$ were classified as having severe anxiety and $30.2 \%$ were suffering from extremely severe anxiety. So $42.7 \%$ of patients were suffering from severe and extremely severe anxiety. In comparison to this only $30.2 \%$ (Mild, moderate, severe \& extremely severe) were classified as having stress on DASS and only $3.1 \% ~ \& ~$ $3.1 \%$ were having severe and extremely severe stress respectively ( Table 4).

So it is clear from this study that $49.6 \%$ and $42.7 \%$ patients of allergic rhinitis were concomitantly suffering from severe and extremely severe depression and anxiety respectively and only $6.2 \%$ were suffering from severe and extremely severe stress (Table 4).

## DISCUSSION

Majority of studies ( 9 of 11 studies on anxiety syndromes, 10 of 12 studies on depressive syndromes) indicate associations between allergies and anxiety/mood syndromes, despite a number of methodological variances. There may be a number of allergy-related mediating variables, such as alterations in immunity/cytokines, the effects of nasal obstruction on sleep, disturbed cognitive functioning, and genetic overlap. Regardless, current evidence indicates that individuals with allergies appear to be at a higher risk, of an unknown degree, for developing various types of anxiety and/or mood syndromes ${ }^{5}$.

Cuffel et $\mathrm{al}^{6}$ found that a depression diagnosis was 1.7 times higher and anxiety symptoms were 1.41 times higher in individuals with allergies compared to those individuals without allergies.

Patten and Williams ${ }^{7}$ determined that major depression was more frequent in individuals with allergies $(\mathrm{OR}=1.5)$ than in individuals without allergies. They also stated that allergy sufferers had greater panic disorder $(\mathrm{OR}=1.7)$ and social phobia $(\mathrm{OR}=1.3)$ diagnoses.

According to the findings of a study conducted by Kovacs et al ${ }^{8}$, allergy was associated with an increased prevalence of any anxiety disorder
$[\mathrm{OR}=1.3(1.1,1.6)]$, panic attacks $[\mathrm{OR}=1.6(1.1,2.1)]$, panic disorder $[\mathrm{OR}=1.6(1.01,2.3)]$, GAD $[\mathrm{OR}=1.8(1.1,3.0)]$, any mood disorder $[\mathrm{OR}=1.4(1.1,1.7)]$, depression $[\mathrm{OR}=1.4(1.1,1.7)]$ and bipolar disorder $[\mathrm{OR}=2.0,(1.0,3.8)]$.

Derebery et $\mathrm{al}^{9}$ in 2008 studied 3831 participants with active rhinitis symptoms using a self-report symptom survey and found anxiety disorder to be $9.3 \%$ in rhinitis sufferers vs. $3.9 \%$ in controls and depressive disorder in $17.2 \%$ of rhinitis sufferers vs $8.3 \%$ of controls.

However, Marshall ${ }^{10}$ and Kennedy ${ }^{11}$ separately found no association between rhinitis symptoms and anxiety states.

## CONCLUSION

A great majority of the published studies carried out to determine whether an association exists between allergic rhinitis and negative emotional states indicate that individuals with allergies appear to be at a higher risk for developing various types of anxiety and/or mood syndromes. In the present study we found that $49.6 \%$ of allergic rhinitis patients suffered from severe and extremely severe depression. Strong association was also found between allergic rhinitis and anxiety with $42.7 \%$ of patients suffering from severe and extremely severe anxiety. Stress was found to be less associated with allergic rhinitis as only $3.1 \%$ and $3.1 \%$ of patients were found to be having severe and extremely severe stress. So we conclude that allergic rhinitis has strong association with depression and anxiety. We also found DASS as easy tool to measure the negative emotional state of depression, anxiety and stress.

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