



A STUDY ON OCCURRENCE OF DEPRESSION, ITS SEVERITY AND ITS ATTRIBUTES ON PATIENTS VISITING TERTIARY CARE MEDICAL COLLEGE AND HOSPITAL, KOLKATA, WEST BENGAL

Dr.Subhajit Shyam*	Assistant Professor, Department of Community Medicine, ESI-PGIMSIR, ESIC Medical College and ESIC Hospital & ODC(EZ) Joka, Kolkata. *Corresponding Author
Dr.Ronjoy Majumder	Associate Professor, Department of Community Medicine, ESI-PGIMSIR, ESIC Medical College and ESIC Hospital & ODC(EZ), Joka, Kolkata.
Dr.Kalyan Kumar Paul	Assistant Professor, Department of Community Medicine, ESI-PGIMSIR, ESIC Medical College and ESIC Hospital & ODC(EZ) Joka, Kolkata.

ABSTRACT **Background:** Depression is an extremely common illness affecting people of all ages, genders, different socioeconomic groups and religions in India and all over the world. It is a global burden of disease and affects people in all community across the world. Pressure perceived as acceptable by an individual may even keep workers alert, motivated, able to work and learn, depending on the available resources and personal characteristics. However, when that pressure becomes excessive or otherwise unmanageable, it leads to stress. **Objective:** The study was conducted among adult patients to find out as to whom all are suffering from depression and the severity of it. **Method:** A cross-sectional study was conducted among adult patients visiting ESIC hospitals. Four hundred forty patients were selected. The subjects were then interviewed by using a pre-designed, pre-tested and semi-structured interview schedule for socio-demographic data and PHQ 9 for psychological status. **Discussion:** Most of the patients among the study population were found depressed, i.e. 56.6% out of these 56.6%, 33.9 % were mild, 17.0% were moderate, 4.8% were moderately severe and about 0.9% were severely depressed. **Conclusion:** This study suggested that psychological status among adult patients visiting ESIC hospital during the study period were not good.

KEYWORDS : Depression, Predesigned, Pretested, Severely Depressed,

INTRODUCTION

Depression is a common mental disorder affecting people of all ages, genders, different socioeconomic groups and religions in India and all over the world and presents with depressed mood, loss of interest or pleasure, decreased energy, feelings of guilt or low self-worth, disturbed sleep or appetite, and poor concentration.¹

It includes a spectrum of conditions with episodes, illnesses and disorders that are often disabling in nature, vary in their severity (from mild to severe) and duration (from months to years) and often exhibit a chronic course that has a relapsing and recurring trajectory over time.²

As health is not merely the absence of disease or infirmity but a positive state of complete physical, mental and social well-being³ a healthy working environment is one in which there is not only an absence of harmful conditions but an abundance of health promoting ones.

Research findings show that the most stressful type of work is that which values excessive, demands and pressures that are not matched to workers' knowledge and abilities, where there is little opportunity to exercise any choice or control, and where there is little support from others.⁴

Causes of psychological disorders are Biological, social, economic, cultural, environmental which leads to the consequences like Mood disorders, psychotic disorders, personality disorders, eating disorders. Nobody should be missing out on mental health care because of the cost.⁵

A survey has been done on October, 2001 by WHO and the result was 1 in 4 people in the world were affected by mental or neurological disorders at some point in their lives. Over 80% of the people in the world suffers from -schizophrenia, 60%- depression and 70%-epilepsy⁶

In Chinese population, 91.8% suffers from anxiety and depression. In Indonesia approximately 3.7% (9 million) of the population suffers from depression and anxiety. In Indonesia 6% population of age more than 15 years suffers from depression and anxiety. In Russia 5.5% of population suffers from depression and anxiety.⁷

Another survey has been done on 2008 by WHO and the result was, in Indian population at least 6.5% suffers from some forms of serious mental disorders. In 2014 report, it was low as 1 in 100,000 people, the average suicide rate in India is 10.9 for every lakh people and the majority of people who commit suicide are below 44 years of age.⁸

Thus, observing these factors, there is a need to find out what are the various other causes which lead to depression and what could be the recommendations to curb the same. With these targets in view, a research was done in the hospital of ESI-PGIMSIR & ESIC Medical College and Hospital, Joka, Kolkata, W.B.

Following were the objectives of the study:

To study as to how many adult patients visiting ESIC Hospital, Joka during the study period are suffering from depression and the severity of it.

To study the socio-demographic characteristics of the adult patients visiting ESIC Hospital, Joka during the study period

MATERIAL AND METHODS

This study was conducted among the adult patients visiting ESIC Hospital, Joka, Kolkata. The study period was December 2018 to July 2019 including development of study tools, compilation of data, analysis and presentation of the findings. The sample size was 440 which was calculated using the formula according to Lwanga and Emeshow.⁹

All adult patients visiting the ESIC Hospital, Joka, Kolkata on study period and who were willing to participate in the study and given his/her written and verbal consent were selected. Individual unit (patient) constituting the sample was selected.

Clinical examination was done using Shorr's height board, weighing machine, aneroid sphygmomanometer to find out height, weight and blood pressure. BMI (WHO classification was used)¹⁴ and blood pressure was measured (JNC VII)¹⁰, respectively.

Predesigned, pretested semi structured questionnaire was used to find out the socio demographic characteristic of the study population and PHQ-9 was used to screen for depression and severity of depression among adult patients. Depression Severity: 0-4 none, 5-9 mild, 10-14 moderate, 15-19 moderately severe, 20-27 severe. Likert scale of 0-1-2-3 was chosen.¹¹ The scores were summed up by adding all the items on the scale.¹²

Data were analyzed using appropriate statistical tests by Statistical Package for Social Sciences (SPSS) version 20 and Epi-info version 3.5.3 software. For proportions, Fisher exact test was applied to find out significant association between independent and dependent variables.

For all the tests, a p < 0.05 was considered significant

RESULT

The study was conducted among 440 subjects. The mean age of the study population was 42.83 years (SD=13.52; min=18 yrs; max=65 yrs) and most of the patients in the study population were among the age group of 42-49 years of age with 19.2%, followed by 58-65 yrs. of age (18%). Majorities were females (56%) and most of the participants were married (92.5%). The predominant occupation was semiskilled (50.5%) in nature and few (7.7%) were unemployed.

The prevalence and severity of depression was assessed by using PHQ-9 questionnaire. Most of the respondents were suffering from depression(56.6%.) out of these 56.6%, 33.9% were mild, 17.0% were moderate, 4.8% were moderately severe and about 0.9% were severely depressed.

The mean PHQ 9 score among the gender was 6.02 (SD=4.9; median=5; min=0, max=23). The mean score was significantly higher in females (p=0.26).

Significant association stastically with Sleep Pattern be it staying asleep or sleeping too much with depression and severity of depression was seen, then with food pattern, interest in doing things and with concentration respectively. All of these independent variable were found to influence the status of depression among the study population.

DISCUSSION

Thus, the results of the present study revealed that the majority of the selected samples were females. Most of the respondents were suffering from depression(56.6%.) out of these 56.6%, 33.9% were mild, 17.0% were moderate, 4.8% were moderately severe and about 0.9% were severely depressed.

Most of the respondents of the age group of 58-65 years were found to be more depressed than others and the 18-25 age group was most severely depressed.

Female patients were found to be more depressed than males in terms of both number and severity. The semiskilled group of patients was found to be severely depressed than other occupational groups similar type of finding was found in a study done by Tushar et al¹⁵ (2008)

Tables

Table 1: Distribution of Study Population According to Socio-Demographic Characteristics and depression and its severity

Socio-demographic		N	Percentage (%)
Age group	18-25	61	13.9
	26-33	60	13.6
	34-41	78	17.7
	42-49	87	19.8
	50-57	75	17.0
	58-65	79	18.0
Gender	Male	193	43.9
	Female	247	56.1
Occupation	Unemployed	34	7.7
	unskilled	19	4.3
	semiskilled	222	50.5
	skilled	91	20.7
	clerk/shop	65	14.8
	semiprofessional	9	2.0
Marital Status	married	407	92.5
	unmarried	21	4.8
	widow	12	2.7
Depression, severity of depression	none		
	mild	191	43.4
	moderate	149	33.9
	moderately severe	75	17.0
	severe	21	4.8
	severe	4	0.9

Table 2: Two sample unpaired T test with equal variance among gender

Group	Obs	Mean	Std.Err	Std.Dev	95% CI
Male	193	5.49	0.292	4.067	4.91 6.06
Female	247	6.44	0.301	4.744	5.85 7.039
Combined	440	6.027	0.2135	4.480	5.60 6.447
diff		-0.9531	0.4265		-1.795 -0.1109

Diff=mean (Male) –mean (Female)
Ho:diff=0

t=-2.224

degrees of freedom=438

Ha: diff<0 Ha:diff=0 Ha: diff> 0
Pr(T<t) Pr(T>|t)=0.0266 Pr(T>t)= 0.98

Illustration

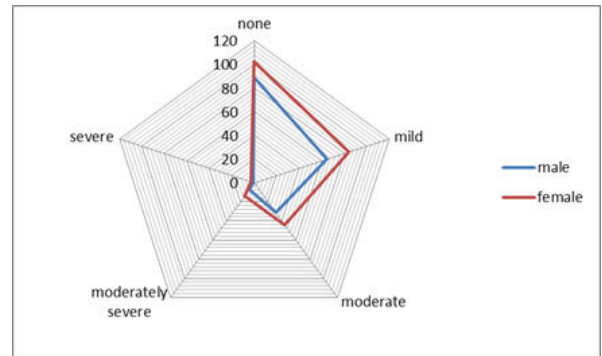


Figure 1: Association of Gender with Depression and severity of depression

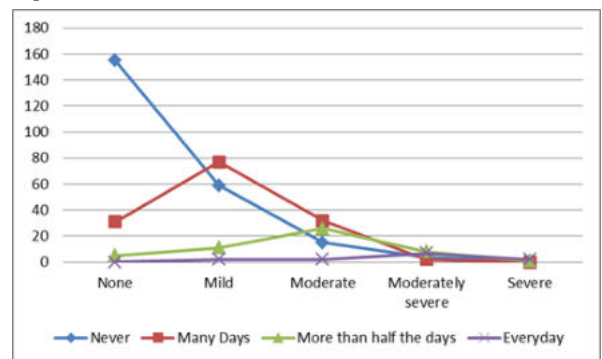


Figure 2: Association of Interest in doing things with Depression and severity of depression

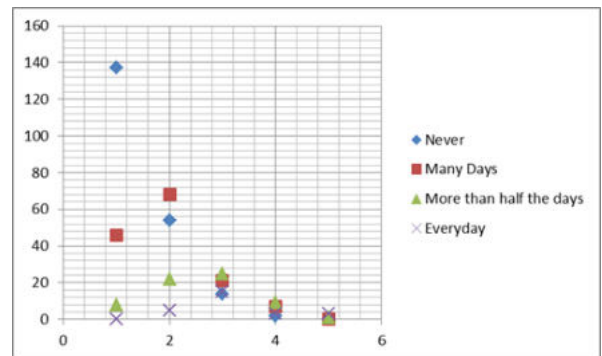


Figure 3: Association of Appetite with Depression and severity of depression

CONCLUSION

Be it stress or depression these are part of emotion that a person shows through his feelings. There are many jobs which are stressful to somebody while for other it can be fun for other.

Acknowledgments

I would like to thank Aditya Joshi and Anwasha Mohapatra for all the support for providing moral support, constructive ideas.

REFERENCES

- 1) Marina Marcus, M. Taghi Yasamy, Markvan Ommeren, et al. Depression: A Global Public Health Concern, WHO Department of Mental Health and Substance Abuse 2012, pg: 6.
- 2) Dr Abdul Nadkarni, Dr Ajay Chauhan, et al. Depression in India: Let's talk, WHO Country Office for India, NIMHANS, 2017, pg: 1-10.
- 3) WHO, 1986. Concept of Health and Disease, Park's text book of preventive and social medicine, 21th ed, pp. 744-59. Chapter 2, publisher Banarasi Das Bannot
- 4) Stress at work place. Available on www.who.int/occupational_ health/ topics/ stressatwp/e (accessed on 15/6/13).
- 5) World health organization>Mental Health Atlas 2017, pg:5,17-04-2019
- 6) World health organization>The World health report 2001-mental health 16-04 2019:https://www.who.int/whr/2001/media_centre/press_release/en

- 7) Kanchan joshi,Speciality medical dialogues:NIMHANS NATIONAL MENTAL HEALTH SURVEY, 2015-16:[https:// www. google. com/amp/s/speciality. medical dialogues.in/nimhans-national-mental-health-survey-2015-2016](https://www.google.com/amp/s/speciality.medicaldialogues.in/nimhans-national-mental-health-survey-2015-2016).
- 8) India today web desk agra /new delhi:17-04 2019 [https:// www. google.com/amp/s/ www.indiatoday.in/amp/education-today/gk-current affairs/ story/ india-is the-most-depressed-country-in-the-world-mental-health-day-2018-1360096-2018-10-10](https://www.google.com/amp/s/www.indiatoday.in/amp/education-today/gk-current-affairs/story/india-is-the-most-depressed-country-in-the-world-mental-health-day-2018-1360096-2018-10-10)
- 9) Lwanga SK, Emeshow S. Sample size determination in health studies: a practical manual. Geneva: WHO; 1991
- 10) World Health Organization. Obesity: preventing and managing the global epidemic. World Health Organization Technical Report Series 894. Geneva: WHO; 2000.
- 11) Chobanian AV, Bakris GL, Black HR, Cushman WC, Green LA, Izzo JL Jr, et al. Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. National Heart, Lung, and Blood Institute; National High Blood Pressure Education Program Coordinating Committee. Hypertension 2003; 42 (6): 1206–52.
- 12) Goldberg DP, Williams P. A user's guide to the General Health Questionnaire. Windsor UK: NFER-Nelson; 1988.
- 13) Tushar KS, Dasgupta AB, Chattopadhyay O. Health status of workers engaged in small-scale garment industry: how healthy are they? Indan J Commun Med 2010; 35 (1): 179–82.