A Retrospective Study Of Sociodemographic Profile And Psychiatric Morbidity In Geriatric Patients Attending Psychiatric Department In A Tertiary Care Hospital In A Sub Urban Population

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ABSTRACT

Globally there is an increase in elderly population. Psychiatric morbidity is also increasing in elderly owing to increased longevity and changing social circumstances.A retrospective study of sociodemographic profile and psychiatric morbidity in geriatric patients attending psychiatric department in a tertiary care hospital in a sub urban population. Mini Mental Status Examination was used to screen for dementia.Psychiatric disorders were more prevalent in individuals aged > 80 years(72%). Predominant psychiatric diagnosis were depression, substance use , substance use with depression , dementia, .Presence of dementia was associated with increased age.Depression was associated with Lowincome, rural background, unemployment, presence of physical illness.Dementia was associated with physical illness and sensory deficit.The study highlights the importance of delivery of structured care facilities in elderly population.

Keywords:Geriatric population, psychiatric morbidity, Sub-urbanpopulation.

1. INTRODUCTION

Globally there is an increase in geriatric population (defined as those aged 60 years or above) owing to increased longevity and better health care facilities [1]. People aged 60 years and above constituted 13percent of the total world population in 2017 .It is projected that the proportion of Indians aged 60 and older will rise from 7.5% in 2010 to 11.1% in 2025 [2].The life expectency of an average indian has increased to 67.3 years in males and 69.6 years in females in 2011 [3] which is likely to increase to 18.4% by 2025 [4].Due to the normal ageing of the brain, deteriorating physical health and cerebral pathology, the overall prevalence of mental and behavioral disorders tends to increase with age [5].Disability arising due to various illnesses, loneliness, lack of family support, restrictedpersonal autonomy, and financial dependency are other important contributing factors for higher prevalence of mental and behavioural disorders [6].Also diagnosis of psychiatric disorders in this population is a challenge owing to comorbidity with other physical illness. A multitude of scales are available to assess the psychiatric morbidity in elderly people [7].Prevalence of psychiatric disorders in elderly population across india varies between various studies. A prevalence of 89/1000 in 1982 [8], rural population in 1975 [9], 43.3% in 2000 [10] and 42.8% in 2010 [11]. Hence a wide variation in prevalence rates exists. Depression,cognitive decline/dementia, anxiety disorders, substance use disorders etc are common psychiatric disorders in this population.In view of scarcity of studies on psychiatric disorders amongold age people in sub urban population.

2. MATERIALS AND METHODS

This was a cross sectional study. After getting necessary permission, medical records of 140 elderly people visiting psychiatry outpatient department   in past 2 years Study proforma containing socio demographic profile were collected, and diagnosis were filled according to ICD 10.For statistical convenience people were divided into diagnostic group. Statistical analysis was done using SPSS24.

Tools used

1. A semi structured Intake proforma designed for this studyfor collecting socio-demographic details was used.

 2. Mini Mental State Examination:(Developed by the Indo-US cross national Dementia Epidemiological Study). Maximumscore 30 [12].

Scores below 24 are supposed to have cognitive decline.

3.Hamilton Rating Scale for Depression:(HAM-D): This is a clinician administered scale to quantify the severity of depression. It consists of 21 items. Only the first 17 will be scored. A score above 7 is considered as depression [13].

8-13 Mild depression,14-18 moderate depression, 19-22 severe depression, >23 very severe depression.

3. RESULTS

Sociodemographic data of the elderly people attending psychiatry opd in past 2 years, Ofthe 150patients data 59(39.3%) were females and 91(60.7%) were males (Table 1). Depression was found to be the most common psychiatric disorder in the old age (70%) followed bysubstance abuse (52.6%), substance with depression (42%),dementia (14 .7%) Dementia was significantly associated with increasing age and physical illness and sensory deficit.Depression was significantly associated Low income, rural background, unemployment, presence of physical illness.Among physical illness, Diabetes mellitus in 51(34.0%), followed by diabetes mellitus along with hypertension 28(18.7%), bronchial asthma 25 (16.7%) (Table 2). Dementia was significantly associated with increased duration of associated physical illness, mainly within duration of 1- 5 years of physical illness (Table 3).Dementia was significantly associated with sensory deficit(Table 4). Depression is significantly associated with rural backgroundas compared to urban background (Table 5).

Table 1.

Socio-demographic variables		Study Group	
		Frequency	N %
Age (In Years)	60-69 years	56	37.3%
	70-79 years	64	42.7%
	80-89 years	30	20.0%
Sex	Male	91	60.7%
	Female	59	39.3%
Socio-economic Status	Upper	0	0%
	Middle	47	31.3%
	Lower	103	68.7%
Religion	Hindu	67	44.7%
	Muslim	32	21.3%
	Christian	43	28.7%
	other	8	5.3%

Table II

PSYCHIATRIC ILLNESS	FREQUENCY	N%
DEMENTIA	22	14.7 (4)%
SUBSTANCE	91	52.6 (2)%
SCHIZOPHRENIA	19	11%
DEPRESSION	105	70 (1)%
OCD	22	12.7%
DELIRIUM	12	6.9%
DEMENTIA +DEPRESSION	15	10%
ACUTE STRESS REACTION	12	6.9%
PSYCHOSIS	14	8.1%
SUBSTANCE +DEPRESSION	64	42 (3)%

Table III

Duration of treatment	Normal	Mild dementia	Moderate dementia	Total	
< 1YR	0	1	0	1	**Pvalue-.000**
1-5 YRS	48	3	14	65	**χ2 =41.43**
>5 YRS	37	2	2	41	
NIL	43	0	0	43	
Total	128	6	16	150	

Table IV

Sensory deficit	Normal	Mild dementia	Moderate dementia	Total	
Present	53	1	14	68	**Pvalue -.001**
Absent	75	5	2	82	**χ2 =14.266**
Total	128	6	16	150	

Table 5.

HAM D	RURAL	SEMI URBAN	URBAN	
NO	26	15	2	**P Value -.021**
MILD	28	20	3	**χ2 =14.266**
MODERATE	13	4	0	
SEVERE	11	25	1	
TOTAL	78	64	6	

4. DISCUSSION

The study population included data of the elderly people attending psychiatry opd in past 2 years Most of the study sample belong to the age group of 70-79 years (42.7%) followed by those 60-69 years (37.3%) and >80 years(20.0%).This could be due to the fact that there is a gradual decline in the number of persons surviving with increasing age [3] (life expectancy in India- 67.3 years).Most common psychiatric disorder was depression, followed by substance, followed by substance with depression.Dementia was associated with increased duration of physical illness and sensory deficit. Depression was associated with lower income people and rural background.The study highlights the importance of delivery of structured care facilities in elderly population.

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