

The Pattern Of Mental Disorders Among Yemeni Population

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Abstract:

Background: Mental illness are becoming a public health issue in all countries and data in most developing countries including Yemen are scarce.

Objectives: This study aims to explore the pattern of mental disorders among outpatients and admitted patients in the psychiatric hospital. Aden, Yemen.

Methodology: The study employed is a hospital based retrospective analysis study. The data were obtained from the outpatient and admitted patients register in the hospital to capture distribution by age, gender, residency, treatment received and clinical diagnosis. Descriptive statistics used to describe the pattern of mental disorders among patients. Demographic characteristics of the patients were cross tabulated with clinical diagnosis and chi-square test was used to test statistical significance.

Results: Out of 4173 patients registered during the period from January-December 2013. It is found 91.8 % patients were treated as outpatient while 8.2% of patients were admitted to the ward. Male patients were higher than female patients 74.8% and 24.2 % respectively. The most age group affected by mental disorders was between (16-45) years. Schizophrenia and Depression were the most mental illness among patients (55.8% and 15% respectively). Epilepsy was common among patients less than 15 years. Most of admitted patients diagnosed as schizophrenia received electro convulsive treatment (86.3%) .

Key words: Mental disorders , Psychiatric admissions , Morbidity.

نمط الاضطرابات النفسية والعقلية بين أوساط المجتمع اليمني

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الملخص :

تعتبر الاضطرابات العقلية احدى المشاكل الصحية في معظم دول العالم وتفتقر العديد من دول العالم النامي ومن ضمنها اليمن للبيانات والدراسات المتعلقة بتلك المشكلة . تهدف الدراسة الى القاء الضوء حول نمط الاضطرابات العقلية للمرضى المترددين على العيادة الخارجية والمرفقين في مستشفى الامراض النفسية والعصبية في محافظة عدن - اليمن - واعتمدت الدراسة التحليل الاسترجاعي للحصول على البيانات من السجلات الموجودة في المستشفى للفترة من يناير الى ديسمبر 2013م للمتغيرات في العمر - النوع الاجتماعي - مكان الإقامة - العلاجات المتلقاة والتشخيص الكلينيكي للمرضى واعتمد اختيار مربع كاي اساسا لمدى الارتباط بين التشخيص المرضي ومتغيرات الدراسة . اظهرت النتائج زيادة في الاضطرابات العقلية بين المرضى الذكور مقارنة بالمرضى الاناث من بين اجمالي المرضى في العيادة الخارجية والمرفقين بنسبة 74,8% و 24,2 % على التوالي وتركزت الاضطرابات العقلية في الفئة العمرية 45-16 بنسبة 91,8 % للمرضى في العيادة الخارجية و8,2 % للمرضى المرفقين في المستشفى وتلقى معظم المرضى في العيادة الخارجية العلاجات بالأدوية اما بالنسبة للمرضى المرفقين فقد تلقى اغلبهم العلاج بالهزات الكهربائية 86,3 % .

كانت امراض الفصام الذهني والاكتئاب من ابرز الامراض التي يعاني منها المرضى بنسبة 55,8 % و 15 % على التوالي بينما تفاوتت باقي الامراض بنسب مختلفة وظهرت الاستنتاجات النهائية للدراسة وجود نسبة عالية للإصابة بالاضطرابات العقلية بين اوساط المجتمع اليمني وعلى الاخص بين الفئات العمرية المتوسطة .

الكلمات المفتاحية: الاضطرابات العقلية - ادخال الامراض النفسية - المراضة

Introduction:

A mental disorder or mental health is a psychological pattern or anomaly, potentially reflected in behavior, that is generally associated with distress or disability, and which is not considered part of normal development in a person culture. Mental disorders are generally defined by known a combination of how a person feels, acts, thinks or perceives.¹ According to the World Health Organization (WHO), over a third of people in most countries report problems at some time in their life which meet criteria for diagnosis of one or more of the common types of mental disorders.² In developing countries where 80% of humanity lives, only a minority who suffer from mental illness tend to seek psychiatric treatment under the umbrella of biomedical model.³ Studies have shown that the failure and delays in initial help seeking for mental health problems are a common phenomena worldwide.⁴⁻⁶ In one study comparing the international trend, it was reported that the majority of people with recent episodes of mental illness continue to go untreated.⁷ Various barriers to utilization of mental health services in developing countries have been identified including inaccessibility to the services, stigma attached to psychiatric settings,^{8,9} and the largely ignored factor they may nonmedical treatments including traditional healings are perceived in many societies to integrate distressed individuals back to community.¹⁰ The social stigma associated with mental disorders is a worldwide problem. Efforts are being undertaken worldwide to eliminate the stigma of mental illness.¹¹ It is well known that quality of life for people with mental disorders could be dramatically improved, but provision of such services have yet to be made available globally.¹² The 2009 US National Academic publication stated that: "A number of promotion and prevention programs are now available that should be considered for broad implementation."^{13,14} Recent calls to improve the provision of mental health for its relationship with the quality of life and the tendency for mental illness to heighten other physical diseases or vice versa.¹⁵ Researches shows that half of all lifelong mental illness develop before age of 14 and that the earlier that a child develops a mental illness and their families members participate in treatment, the better the outcome.¹⁶ During the past decades increasingly stronger evidence has been available documenting that disorders of the brain are not only much more frequent than previously thought but also contribute to a greater burden of diseases than previously

thought, and should therefore be considered as a top global health challenge of the 21st century according to the World Health Organization (WHO).¹⁷⁻²⁰ It is estimated that about 20% of the population suffer from behavioral and emotional disturbances which means that there are potentially up to four million people in Yemen who need mental health supports, while only one psychiatrist per 100,000 residents exists to meet this need.²¹ In Yemen, mental health issues have close connections with myths, superstitions and distorted religious concepts relevant to witchcraft, jinns or devils.²¹

In order to explore the situation of mental health disorders in Yemen, the researchers was motivated to conduct this study.

Objectives:

This study aims to explore the pattern of mental disorders among outpatients and admitted patients in the Neuro-psychiatric hospital. Aden, Yemen.

Methodology:

Study design:

This is a cross sectional study conducted among outpatient and admitted patients to the Neuro-Psychiatric Hospital in Aden Governorate, Yemen. During the period Jan. to Dec. 2013

Study Population:

The study included patients who were attending the outpatient and those who were admitted to the hospital during the period Jan.-Dec. 2013.

Sample size :

All patients with complete files who were attending the outpatient and admitted to the hospital during the study period were included in the study. Incomplete files with missing variables were excluded.

Data collection:

Data were collected from file review to complete the semi structural list that was designed to include information concerning age, gender, residency, treatment received and clinical diagnosis.

Data analysis:

Statistical Package for Social Sciences (SPSS) version 15 was used for data entry and analysis. Demographic characteristics of the patients were cross tabulated with clinical diagnosis and chi-square test was used to test statistical significance to achieve the objectives of the study.

Administrative Approval:

An approval to conduct the study was obtained from the general director of the Neuro-Psychiatric Teaching Hospital, Aden, Yemen.

Results:

The study covered 4546 patients attended to Neuro-Psychiatric Hospital during the period from Jan.2013 to Dec.2013. They were both outpatients 4173 (91.8%) and admitted patients 373 (8.2%). Regarding gender number of male patients was 3368 (74.1 %), and female patients was 1178 (25.9 %). In outpatients 3038 (72.8) was male and 1135 (24.2) was female while in admitted patients 330 (88.5) male and 43 (11.5) was female. Distribution of patients according their age present in the table one, it is found that 388 patients under 15 years old all of them treated in outpatient clinic, 3065 patients between 16 and 30 years old 2013 of them treated in outpatient clinic and 52 admitted to hospital, 1660 patients in age between 31 and 45 years old from them 1407 patients treated outpatients and 52 patients admitted to hospital, patients with age ranging between 46 and 60 were 431 of them 363 patients treated in outpatient and 68 patients admitted, and finally 52 patients more than 60 years old of them treated in outpatient clinic. About 3623 (79.7 %) of patients was from Aden governorate, 3345 (80.2 %) and about 923 (20.3 %) patients from other governorates. In outpatients 3345 (80.2 %) was from Aden and 828 (19.8 %) was from outside Aden while in admitted patients 278 (74.5 %) from Aden and 95 (25.5 %) was from outside Aden.

The differences between outpatients and admitted patients was statistically significant. Table (1) Regarding treatment received by patients table two showed that 183 (65.8%) of admitted patients from Aden governorate received (Electro Convulsive Therapy) ECT treatment and 95 (34.2%) received other treatment while 82 (86.3%) from outside Aden governorate received ECT treatment and 13 (13.7%) received other treatment. Total number of patients attended the outpatient clinic was 4173 patients 952 (22.8%) were received ECT treatment and the rest received other treatment, from Aden governorate 416 (12.4%) received (Electro Convulsive Therapy) ECT treatment and 2929 (87.6%) received other treatment, while from outside Aden 536 (64.7%) received ECT treatment and 292 (35.3%) received other treatment. The differences between patients from Aden governorate and from outside Aden governorate regarding treatment received by patients either with those who admitted or treated in outpatients clinic was statistically significant. Table (2).

Distribution of patients according to clinical diagno-

sis and gender showed in table three, in general the main diseases recorded in outpatient clinic of the hospital was Schizophrenia (40.3 %) of patient, followed by Epilepsy (25.9 %) of patients then depression (17.9 %) of patients attended to outpatient clinic.

The same arrangement of the main diseases found both with male and female with different percentage were in male Schizophrenia (43.6 %) of patient, Epilepsy (24.3%) and reactive (16.0 %), while in female Schizophrenia (31.6 %) of patient, Epilepsy (30.4 %) and reactive (23.3%).

The differences between male and female patients regarding number of cases of mental disorder was statistically significant.

Distribution of admitted patients according to clinical diagnosis and gender showed in table four, the main diseases recorded among admitted patient in the hospital was Schizophrenia (82.0 %), and depression (18.0 %) of admitted patients.

The proportion of clinical diagnosis found both with male and female were as following: in male Schizophrenia (83.3 %) of patient, depression (16.7%) and among female Schizophrenia (72.0 %) of patient and depression (28.0%)

The differences between male and female patients regarding number of cases regarding clinical diagnosis was statistically significant.

Regarding age group we found that from the total number of outpatients (4173 cases), the majority of cases attended the outpatients and affected by mental disorder was 16–30 years old (48.2%) , followed by 31–45 years old (33.7%).

The main clinical diagnosis among the age group less than 15 years old was epilepsy (78.4%) followed by mental retardation (16.5%), for age group 16–30 years old Schizophrenia was the main disorder (34.6%) followed by Epilepsy (28.9%) , finally those with 31–45, 46–60 and more than 60 years age group the main mental disorder was Schizophrenia (53.4%, 53.2% and 55.8%) followed by depression (25.9% , 20.9% and 15.4%) respectively.

The differences between patients regarding age group and number of cases of mental disorder was statistically significant.

From the total number of admitted patients (373 cases), it is clearly seen that the main clinical diagnosis 82.0% had schizophrenia

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(34.6%) followed by Epilepsy (28.9%) , finally those with 31– 45 ,46 – 60 and more than 60 years age group the main mental disorder was Schizophrenia (53.4%, 53.2% and 55.8%) followed by Depression (25.9% , 20.9% and 15.4%) respectively.

The differences between patients regarding age group and number of cases of mental disorder was statistically significant.

From total 373 admitted patients 349 (93.6%) was Discharged and 24 (6.4%) was escaped from the hospital, table (7).

Discussion:

Mental disorders constitute a major public health problem globally with high burden in low and middle income countries . This is the first hospital based retrospective study conducted with the aim to ascertain the prevalence and pattern of mental disorders among out-patient and admitted patients in the Neuro-psychiatric Hospital, Aden Governorate, Yemen. The study demonstrates that there is higher prevalence of mental disorders among males in the outpatient (72.8%)than females (27.2%) and for those admitted to the ward it was 88.5% were males and 11,5 %were females .A study in Bangladesh concluded similar findings.²² This findings also agree with different study findings in various countries such as in Pakistan,²³ Kenya,²⁴ Bhutan,²⁵ England²⁶ and Bangladesh.²⁷ With the exception of a study conducted in Ethiopia²⁸ which demonstrates that there was high prevalence of common mental disorders among women than men. This high prevalence of males in our study could be explain by considerable level of stress and suffering faced by them due to heavier burden of social responsibilities as a result of high unemployment in our country especially that the majority of the male patients are between the age group (16-45Years) representing 81.9%for outpatients and an age group (31-45Years) representing 67.8% for the admitted patients which is considered as the productive age group; adding to this the stressful living conditions that they are facing in their life.This finding is constituent with a previous study conducted in Nepal where most of the patients were in the age group of (21-40Years).²⁹ Previous studies has consistently demonstrated that most of the patients seeking psychiatric services were younger , more than half of the patients were in the age group (21-40Years).^{30,31} This may be to the fact that initial signs of psychiatric disorders occur mainly in this age group and that psychological stressors

become relatively dominant in this age group. In our study ,the majority of outpatients and admitted patients were from Aden Governorate which could be explained by that the psychiatric hospital is located in Aden which is nearby to the majority of patients living in Aden while it is difficult to reach by those outside Aden which is considered as a limitation of our study that it does not reflect the real pattern of mental disorders in Yemen. In regard to the clinical diagnosis, the study revealed that 40.3% of the outpatients was diagnosed as Schizophrenia with more predominant among males while most of admitted patients were diagnosed as Schizophrenia representing 82%. A study in Nepal²⁹ showed that 53.2% of admitted patients diagnosed as Schizophrenia . Another study conducted in mental health hospital in Taif, Saudi Arabia³² showed that the majority of patients were diagnosed as Schizophrenia representing 88.8%.Comparing our results with these studies we observe similarity between them in this clinical diagnosis. Depression is one of the most mental illness. Most of the patients suffering from depressive illness are treated as outpatient but some of the patients may need hospitalization. In our study 17.9% among outpatients and 18% of admitted patients were diagnosed as depressionwith more predominance among females patients. Our finding agrees with other study such as in Pakistan³³ in which 18.7% of the patients admitted were suffering from depression . Another studies were similar to our study findings such as in England²⁶ , India ³⁴ and Chile.³⁵It is differs from one study conducted in Bhuten²⁵ were only 12.8 % of the patients were diagnosed as depression. In general the prevalence estimates of psychiatric disorders are prone to underestimation as majority of patients and their families deny due to strong stigma attached to mental disorders which limits the number of affected patients seeking health care actively.³⁶ Seventy eight percent of patients under 15 years in our study were diagnosed as Epilepsy which is a common finding in different studies. Most of admitted patients were receiving Electro Convulsive Treatment (ECT) while others were under anti depressive treatment and for out- patients, some of them received ECT during outpatient visits.

Conclusions:

1. Schizophrenia and Depression are the most common mental illness among outpatients and admitted patients to the Psychiatric Hospital which is common among males than females.
2. The most age group suffering from mental disorders is (16-45) years.
3. Epilepsy is most frequent in the age group less than 15 years.

Recommendations:

The study emphasized the need to increase the awareness in the general public regarding the impact of mental illness and the need for timely treatment.

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Table 1: Distribution of patients by socio-demographic characteristics.

Patients studied	n= 4546	Outpatients 4173 (91.8%)	Admitted patients 373 (8.2%)	Frequency (%)
Gender	Male	3038 (72.8)	330 (88.5)*	3368 (74.1)
	Female	1135 (24.2)	43 (11.5)	1178 (25.9)
*Pearson Chi-Square test with 1df 43.7 p=.000 (< 0.05)				
Age group	<15	338 (8.1)	---	388 (8.5)
	16-30	2013 (48.2)	52 (13.9)	2065 (45.4)
	31-45	1407 (33.7)	253 (67.8)**	1660 (36.5)
	46-60	363 (8.7)	68 (18.3)	431 (9.5)
	>60	52 (1.3)	---	52 (1.1)
**Pearson Chi-Square test with 4df 65.47 p=.000 (< 0.05)				
Residency	Aden	3345 (80.2)***	278 (74.5)	3623 (79.7)
	Outside Aden	828 (19.8)	95 (25.5)	923 (20.3)
	Total	4173 (100 %)	373 (100 %)	4546 (100 %)
***Pearson Chi-Square test with 1df 6.7 p=.010 (< 0.05)				

Table 2: Distribution of patients according to residency and treatment received.

Admitted patients			
	Aden (%)	Outside Aden (%)	Total (%)
ECT	183 (65.8)	82 (86.3)*	265 (71.0)
Other treatment	95 (34.2)	13 (13.7)	108 (29.0)
Total	278 (100)	95 (100)	373 (100.0)
Outpatients			
ECT	416 (12.4)	536 (64.7%)**	952 (22.8)
Other treatment	2929 (87.6)	292 (35.3%)	3221 (77.2)
Total	3345 (100.0)	828 (100.0%)	4173 (100.0)

ECT: Electro Convulsive Therapy

2 by 2 table Pearson Chi-Square test with 1df **outpatient = 1030 p=.000 (< 0.05) and *admitted patients = 14.4 p=.000 (< 0.05)

Table 3: Distribution of outpatients according to the clinical diagnosis and gender.

Clinical diagnosis	Male Frequency (%)	Female Frequency (%)	Total Frequency (%)
Schizophrenia	1324 (43.6 %)*	359 (31.6 %)	1683 (40.3 %)
Affective psychosis	169 (5.6 %)	33 (2.9 %)	202 (4.8 %)
Organic psychosis	44 (1.4 %)	14 (1.3 %)	58 (1.3 %)
Anxiety	139 (4.6 %)	67 (5.9 %)	206 (4.9 %)
Hysteria	19 (0.6 %)	5 (0.4 %)	24 (0.5 %)
Depression	486 (16.0 %)	264 (23.3 %)	750 (17.9 %)
Epilepsy	739 (24.3 %)	345 (30.4 %)	1084 (25.9 %)
Mental retardation	96 (3.2 %)	35 (3.1 %)	131 (3.1 %)
Others	22 (0.7 %)	13 (1.1 %)	35 (0.8 %)
Total	3038 (100.0)	1135 (100.0)	4173 (100.0)

*Pearson Chi-Square test with 8df 82.7 p=.000 (< 0.05)

Table 4: Distribution of admitted patients according to by clinical diagnosis and gender.

Clinical diagnosis	Male Frequency (%)	Female Frequency (%)	Total Frequency (%)
Schizophrenia	275 (83.3 %)*	31 (72.0 %)	306 (82.0 %)
Depression	55 (16.7 %)	12 (28.0 %)	67 (18.0 %)
Total	330 (100.0)	43 (100.0)	373 (100.0)

*Pearson Chi-Square test with 1df 8.2 p=.000 (< 0.05)

Table 5: Distribution of outpatients according to the clinical diagnosis and age group.

Clinical diagnosis	≤15 No. (%)	16 – 30 No. (%)	31 – 45 No. (%)	46 – 60 No. (%)	> 60 No. (%)
Schizophrenia	7 (2.1)	702 (34.6)	752 (53.4)	193(53.2)	29 (55.8)*
Affective psychosis	4 (1.2)	118 (5.7)	56 (4.0)	18(5.0)	6(11.5)
Organic psychosis	1 (0.3)	27 (1.3)	14 (1.0)	13(3.6)	3(5.8)
Anxiety	0 (0.0)	109 (5.4)	80 (5.7)	16(4.4)	1(1.9)
Hysteria	0 (0.0)	11 (0.5)	12 (0.9)	1(0.3)	0 (0.0)
Depression	2 (0.6)	300 (19.9)	364 (25.9)	76(20.9)	8(15.4)
Epilepsy	265 (78.4)*	581 (28.9)	199 (14.1)	35(9.6)	4(7.7)
Mental retardation	56 (16.5)	54 (2.7)	19 (1.4)	2(0.6)	0 (0.0)
Others	3 (0.9)	11 (0.5)	11 (0.8)	9(2.5)	1(1.9)
Total	338 (100.0)	2013(100.0)	1407(100.0)	363(100.0)	52(100.0)
Total (4173 cases)	338 (8.1)	2013 (48.2)	1407(33.7)	363 (8.7)	52 (1.2)

*Pearson Chi-Square test with 32 df 165.4 p=.000 (< 0.05)

Table 6: Distribution of admitted patients according to the clinical diagnosis and age group.

Clinical diagnosis	16 – 30 No. (%)	31 – 45 No. (%)	46 – 60 No. (%)	Total
Schizophrenia	42 (80.8)	215 (85.0)	49 (72.1)	306 (82.0)
Depression	10 (19.2)	38 (15.0)	19 (27.9)	67 (18.0)
Total	52 (100.0)	253(100.0)	68 (100.0)	373(100.0)
Total (373 cases)	52 (13.9)	253 (67.9)	68 (18.2)	373(100.0)

Table 7: Distribution of admitted patients according to the their outcome.

	Frequency	%
Discharge	349	93.6
Escape	24	6.4
Died	0	0
Total	373	100