



## ROLE OF LIFE EVENTS IN DISSOCIATIVE DISORDERS AMONG FEMALE PATIENTS

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Submitted: May 05, 2019

Accepted: September 17, 2019

### ABSTRACT

#### OBJECTIVE

To determine the mean number of stressful life events in one year prior to the development of dissociative disorder in female patient.

#### STUDY DESIGN

Cross Sectional Study

#### PLACE AND DURATION OF STUDY

Psychiatry department, DHQ Hospital, Faisalabad from 16-02-2013 to 15-02-2014

#### SUBJECTS AND METHODS

After taking approval from Institute Ethical Review Committee, patients were taken from the outpatient and inpatient units of Psychiatry Department, DHQ/Allied Hospitals, Faisalabad. Inclusion and exclusion criteria were strictly followed. Patients having physical disorders were excluded by history and physical examination, and psychiatric disorders were excluded by history and mental state examination. All patients fulfilling the inclusion criteria were taken. After explaining risks and benefits of the study, informed written consent was taken from them. Literate patients were handed over the booklets containing Presumptive Stressful Life Events Scale (PSLES) and bio data Performa to be filled in a self-administered form; on illiterate patients, booklets were administered by the researcher in an interview format with the help of glossary of local language.

#### RESULTS

Total 200 patients were enrolled in our study according to the inclusion criteria of the study. Mean age of patients was calculated in terms of mean and standard deviation. It was 25.51+5.63, with ranges from 15 to 35 years. The outcome of the study was to determine the mean number of stressful life events one year prior to the development of dissociative disorder in female patients. The mean number of stressful life events in our study was 2.73+1.02. Stressful life events are determined by Presumptive Stressful Life Events Scale (PSLES).

#### CONCLUSION

The study concluded that there was burden of stressful life events in female dissociative patients, which could help in early diagnosis and treatment. Furthermore was the study helpful in educating the families, teachers and friends of such patients to offer emotional and social support during those life events.

#### KEY WORDS

Stressful Life Events, Conversion Disorder, Life changes

### INTRODUCTION

Dissociative (conversion) disorder is a group of disorders having common theme in which there is partial or complete loss of the normal integration between memories of the past, awareness of identity, immediate sensations, and control of bodily movements. Diagnosis of dissociative disorder is made when there must be no evidence of a physical disorder that can explain the characteristic symptoms of this disorder and being associated closely in time with traumatic events or disturbed relationships<sup>1</sup>.

During the 5 years period from 2002 to 2007, 27 % of all the admitted patients to indoors of psychiatry ward at Lady reading Hospital, Peshawar were diagnosed as conversion or dissociative disorder<sup>2</sup>.

Temporal relationship of a stressful event is very common in dissociative disorders<sup>3,5</sup>. Life events are changes that occur suddenly in someone's life. They do not necessarily be bad, but viewed as either desirable or undesirable. Life events stress is found in most of the psychiatric disorders. In majority of cases stressful life events are found as precipitating factor in onset of the disorder<sup>6</sup>. A study had concluded considerably higher number of life events experienced in one year prior to the onset of dissociative disorders. Mean number of life events in patients of dissociative disorders prior to its onset was found to be  $(2.21 + 1.86)^7$ .

Few studies are found on the subject in indigenous setting and on the relationship between stressful life events prior to the onset of conversion disorder<sup>8</sup>.

This study is designed to determine the burden of stressful life events in female dissociative patients; hence it would help in early diagnosis and treatment. Furthermore, the evidence would also be helpful in educating the families, teachers and friends of such patients to offer emotional and social support during those life events. Objective of the study is to determine the mean number of stressful life events in one year prior to the development of dissociative disorder in female patient.

**SUBJECTS AND METHODS**

**Participants**

This cross sectional study collected data from Psychiatry department, DHQ Hospital, Faisalabad. The study duration was 06 month after the approval of ethical review committee. Total 200 patients were selected in this study through non-probability consecutive sampling technique. Inclusion Criteria followed as patients diagnosed as case of Dissociative Disorder, from both indoor and outdoor departments, only females and between 15-35 years of age. Exclusion Criteria were patients suffering from comorbid medical disorder or patients suffering from comorbid psychiatric disorder.

**Instruments**

Stressful life events are determined by Presumptive Stressful Life Events Scale (PSLES) by Gurmeet Singh. Number of Life events means how many life events are reported by a particular patient and reconfirmed by one of the family member. It was evaluated in one year prior to onset of Dissociative Disorder. Scale has 1-51 items (item no 1 has mean score of 95 and item 51 has mean score of 20).

**Procedure**

After taking approval from Institute Ethical Review Committee, patients were taken from the outpatient and inpatient units of Psychiatry Department, DHQ/Allied Hospitals, Faisalabad. Inclusion and exclusion criteria were strictly followed. Patients having physical disorders were excluded by history and physical examination, and psychiatric disorders excluded by history and mental state examination.

After explaining risks and benefits of the study, informed written consent was taken from them. Literate patients were handed over the booklets containing Presumptive Stressful Life Events Scale (PSLES) and bio data Performa to be filled in as self-administered form; on illiterate patients, booklets were administered by the researcher in an interview format with the help of glossary of local language.

The life events reported by the patient was reconfirmed by one of the members of the family. Number of life events were recorded on separate Performa for each individual.

All the collected data were entered and analyzed with the help of Statistical Package for Social Sciences (SPSS). Mean and standard deviation was calculated for quantitative variable like age and mean number of stressful life events according to Presumptive stressful life events scale (PSLES). Frequency and percentages were calculated for qualitative variables like most common stressful life events.

**RESULTS**

Total 200 patients were enrolled in our study. Mean age of the sample in our study was 25.51+5.63 (Table 1).

The outcome of the study was to determine the mean number of stressful life events in one year prior to the development of dissociative disorder in female patient. The mean number of stressful life events in our study was 2.73+1.02 as shown in Table 1.

**Table 1**  
Descriptive Statistics of Age year of patients

	N	Minimum	Maximum	Mean	Std. Deviation
Age	200	15	35	25.51	5.638
No. of Stressful Life Events (PSLES)	200	1.00	5.00	2.73	1.02

**Table 2**  
Descriptive Statistic of patients as per age group

Age Group	F	%	Mean SLE	
Teenage	15 –18	23	11.5	2.6
Young age	19 –25	79	39.5	2.52
Middle age	26 –35	96	48	2.55

Table 2 described the frequency and percentage of different age groups and mean of stressful life events (SLE) as per age group. Results showed that majority of the patients belonged to young adulthood, 79 (39.5 %). Middle adulthood constituted the half of the patients but when split into further groups of five year each, the proportion of the group decreased in respect to the young adulthood. 96 (48%) patients were in the middle adulthood, 55 (28%) of them were between 26 – 30 years of age while 40 (20 %) were between 31- 35 years of age. The smallest group was the teenage group which constituted 23 (11.5%) of the patients.

**Table 3**  
Stem and leaf table describing stressful life event as per year of age

Age	SLE	f (%)	Mean of SLE
15	2,3,2,2,4,2,2,2,4	8(4)	2.6
16	3,4,3,3,2,2,2,3	8(4)	2.5
17	2,4,2	3(1.5)	2.55
18	3,2,2,2	4(2)	2.63
19	4,4,2,2,2,3,3,4,3,4,2	11(5.5)	2.75
20	3,1,3,4,2,3,4,2,2,2,3,2,4	12(6)	2.75
21	2,2,3,2,4,3,2,4,3,3	10(5)	2.8
22		0(0)	
23	5,3,2,4	4(2)	3.25
24	2,4,3,4,1,4,2,4,2,4,2,3	12(6)	2.92
25	1,2,4,4,2,2,4,3,2,4,3,2,4,4,2,4,2,3,5,2,3,2,5,3,2,2,3,5,3,2,4	30(15)	2.9
26	3,1,3,2,4,2,2,4,4,3,4,4,4,4,2	15(7.5)	3.07
27	2,2,1,4,2,2,2,4,4,2,3	12(6)	2.5
28	2,4,3,4,4,3,2	7(3.5)	3.14
29	2,2,3,2,2,3,1,2,3,1	12(6)	2.17
30	1,4,2,1,2,3,3,1,1,4	10(5)	2.2
31	4,1,2,2	4(2)	2.25
32	4,2,2,2,3,4,1,2	8(4)	2.5
33	1,1,2,3	4(2)	1.75
34	3,4,5,4,4,3,4,2	8(4)	3.62
35	2,3,2,2,2,3,4,3,2,3,1,2,4,2,2,1	16(8)	2.38

*SLE means stressful life events*

Table 3 represented the stressful life event score of each patient as per year of age. The table showed that the mean stressful life events showed an increase in young adulthood that constituted young adulthood. The mean stressful life events were above 2.75 from 19 to 26 years after which the trend showed a decrease. Mean stressful life events got a second boom at around 34 and 35 years. More of the patients were seen on the outdoor basis than in door (see table4).



**Table 4**  
Month wise split up of the patients and mean stressful life events in indoor and outdoor departments

	Indoor patients		Outdoor patient	
	f	Mean	f	Mean
July 2013	19	2.47	10	3.2
August 2013	19	2.89	7	2.57
September 2013	19	2.68	7	2.57
October 2013	19	2.78	7	2.56
November 2013	19	2.73	7	3
December 2013	19	2.68	14	2.85
Jan 2013	16	2.56	18	2.6
	130	3.06	70	2.76

**DISCUSSION**

Although there is vast literature on stressful life events in depression, the phenomenon is rarely studied in Dissociative (conversion) Disorder which is surprising in view of the fact that presence of psychological stressor is considered as important criteria in evolution of conversion symptoms both in DSM-IV and the ICD-10. The latter, for example stipulates, "... an evidence for psychogenic causation, in the form of clear association in time with stressful events and problems or disturbed relationship" as important criterion for the diagnosis of dissociative disorders<sup>1</sup>. A stressful life event being a prerequisite for the diagnosis of Dissociative (conversion) disorders as per ICD-10, we expected that the number of life events and their temporal relationship with onset of symptoms will be more closely related with the Dissociative (conversion) disorders as compared with the depressive illness. However, total number as well as the severity of life events as indicated by scores on Presumptive stressful life events scale (PSLES) was not significantly different between the dissociative (conversion) and depressive illness group. It is also interesting to note that timing of the events that preceded the onset of illness also did not differ significantly between the two disorders. The normal control group had significantly lesser life events as compared with both disease groups, confirming the etiological role of the life events in these disorders<sup>9</sup>.

Voon et al in 2010<sup>4</sup> found that the mean + standard deviation of age of patients with dissociative disorder was 40.56 + 6.32. Similarly in our study, the mean + standard deviation of age of patients was 25.51 + 5.638.


In our study, the mean of stressful life events determined by Presumptive Stressful Life Events Scale (PSLES) was 2.73. Whereas, in a study by Aamir et al<sup>7</sup>, the mean + standard deviation of patients suffering from dissociative (conversion) disorders was 2.21+1.08. Many other studies are in line with our findings and confirmed the temporal relationship between dissociative disorder and stressful life events<sup>3,5</sup>.

**CONCLUSION**

There is considerable burden of life events in patients suffering from dissociative disorders.

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