



ABSTRACTS OF 20TH INTERNATIONAL CONFERENCE OF PPS HELD IN KARACHI IN DECEMBER 2014

Child and adolescent mental health

PREVALENCE OF DEPRESSIVE SYMPTOMS IN ADOLESCENTS OF ACADEMIC INSTITUTIONS OF KARACHI

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OBJECTIVE:

Our study was designed to explore the depressive symptoms among adolescents' because to our knowledge this is rather neglected area in Pakistani context.

DESIGN

Cross sectional, validated questionnaire based interview.

PLACE AND DURATION OF STUDY:

15th September 2013 to 15th May 2014 in different academic institutions of Karachi City.

SUBJECT AND METHODS:

357 adolescent students, aged 12-20 years across gender were included. Pakistani version of Reynolds Adolescent Depression Scale, Second Edition (RADS-2U; Sami, Ahmad, & Khanam, 2013) was administered with Demographic information sheet. The prevalence estimate of depression was obtained through the use of descriptive statistics on SPSS 17 version.

RESULTS:

The overall prevalence of depressive symptoms among adolescents was 11.76%. Results indicate that male adolescents have slightly higher overall prevalence rate (12.66%) than female adolescents (11.06%). Prevalence of depressive symptoms increases with the age (12-14 years, 9.45%; 15-17 years, 11.82%; and 18-20 years, 14.17%).

CONCLUSION

Findings suggest more than 10% of adolescents had depressive symptoms. Over all depressive symptoms were slightly higher in males as compare to females. Future research is needed to reconfirm this finding and explore the cause of these gender differences in Pakistani context. Addressing these symptoms at this critical point might have huge implications for the future of adolescents.

KEY WORDS

Depression, Adolescents, Academic institutions.

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OBJECTIVE:

We hypothesize that the fear of an impending marriage leads to depression, anxiety and stress among female medical students. This study hopes to gauge the psychosocial and psychosomatic effects.

DESIGN

Cross-sectional study.

PLACE AND DURATION OF STUDY

Liaquat University of Medical & Health Sciences, Jamshoro (LUMHS), from March 2014 to June 2014.

SUBJECTS AND METHODS

This observational cross sectional psychosocial analysis was carried out on a total of 100 female medical students of Liaquat University of Medical & Health Sciences and ISRA University from March to June 2014. Informed consent was obtained and complete anonymity guaranteed. "Google docs" was used to collect data via online structured questionnaire forms. The data obtained was analyzed in SPSS. v. 16.0.

RESULTS

43 percent of the sample confessed that their families had, at least once, been approached for purpose of marriage. 16 percent admitted that they had themselves received marriage proposals. 88 percent of the sample held negative views regarding early marriage before graduation. Upon inquiry, 78 percent of those who had encountered prospects of marriage before graduation admitted to have felt depression, anxiety and stress along with mild psychosomatic symptoms.

CONCLUSION

Females constitute a significant majority of medical students in Pakistan and early marriage is known to adversely affect the prospects of a successful career. On the basis of our result, we conclude that even the fear of impending marriage is inducing depression, anxiety and stress among female students and can potentially harm their education and health.

Key words: Psychosocial, Marriage, Depression, Anxiety and Stress.

CLINICAL CHARACTERISTICS AND PATHWAYS TO CARE AMONG CHILDREN WITH CHRONIC UNEXPLAINED SOMATIC SYMPTOMS IN PAKISTAN

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OBJECTIVE

To compare clinical characteristics and pathways to help-seeking between children with unexplained somatic symptoms and peers with diagnosed chronic paediatric medical conditions.

DESIGN

Comparative study.

PLACE AND DURATION OF THE STUDY

Lahore, Pakistan.

SUBJECTS AND METHODS

We conducted a matched case-control study of 124 children aged 8-16 years in Lahore, Pakistan. Cases were 62 children with chronic somatic symptoms for which no organic cause was identified after investigations. The control group were 62 children with chronic paediatric medical conditions. Cases and controls were matched for gender, age, and school class. Somatization was measured with the Children's Somatization Inventory (CSI-24) translated into Urdu.

RESULTS

Mean age was 11.7 years (SD = 2.1). Cases scored significantly higher on somatization (CSI-24) than controls. The most common somatic symptoms among cases were headache (75.4%), convulsion (60.1%), fainting (31.1%), and visual impairment (31.1%). The median symptom duration was 60 days (interquartile range 248). A higher proportion of cases had consulted faith healers (39.3% vs 1.6%), religious scholars (65.5% vs 43.6%), and family physician (87.5% vs 53.2%) compared with controls. Cases who experienced fainting had significantly longer symptom duration before referral to child psychiatry. Cases were significantly less likely to be enrolled in school (77.4% vs 91.9%), more likely to have experienced physical abuse (29.0% vs 9.7%), changed school (50.0% vs 30.4%), and have more siblings. For the combined cohort, experience of physical abuse was the only predictor of higher CSI-24 scores.

CONCLUSION

This is the first study in South Asia to explore the help-seeking pathways for children with medically unexplained symptoms. It highlights prolonged duration of symptoms and more frequent help-seeking for a variety of traditional and western treatment before referral to child psychiatry. Experience of physical abuse may be a significant promoting factor for unexplained somatic symptoms. These findings could be used to promote public education to improve appropriate help-seeking for children with unexplained somatic symptoms in this region.

Key words: Pathway to care, Children, Unexplained symptoms.

SOCIAL SUPPORT AS A DETERMINANT OF DEPRESSION AMONG ADOLESCENTS OF MINORITIES IN PAKISTAN

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OBJECTIVE

To analyze the role of social support in determining depression among minority adolescents of Pakistan.

DESIGN

Correlation study.

PLACE AND DURATION OF STUDY

The sample was drawn from different schools and locality areas in the city of Karachi over a period of one year.

SUBJECTS AND METHODS

A total of 144 religious minorities (Christian, Hindu and Parsi) ranging from 11-20 years was selected. The Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet & Farley, 1988) and Reynolds Adolescents Depression Scale, 2nd Ed (RADS-2 Reynolds, 2004) was administered. After detailed literature review it was hypothesized that perceived social support would predict depression in minority adolescents. Linear Regression analysis was carried out for statistical analysis.

RESULTS

The results were consistent with hypothesis intended and it is analyzed that perceived social support is a significant predictor of depression in minority adolescents ($R^2 = 0.355$, $F(1, 142) = 78.241$, $p < .001$). Further the three domains of perceived social support such as significant others ($R^2 = .344$, $F(1, 142) = 74.438$, $p < .001$), family ($R^2 = .287$, $F(1, 142) = 57.153$, $p < .001$), friends ($R^2 = .244$, $F(1, 142) = 45.902$, $p < .001$) were significant predictors of depression.

CONCLUSION

It is concluded that lack of social support play a significant role in developing depression in adolescents especially in minority background. The finding of the present study also highlight the problems faced by minority adolescents and would be helpful for professional as well as educational figures and parents to enhance their awareness and give attention for the psychological health especially with minority adolescents.

Key Words: Social support, Depression, Minorities.

PARENTING STRESS RELATED TO BEHAVIOR PROBLEMS OF CHILDREN WITH HEARING IMPAIRMENT

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OBJECTIVE:

The aim of this study is to measure parenting stress in mothers related to the behavior problems in children with hearing impairment.

DESIGN

Comparative study.

PLACE AND DURATION OF THE STUDY

Karachi, year 2012.

SUBJECTS AND METHODS

Sample was comprised of 109 mothers ($n = 53$ mothers of hearing children and $n = 56$ mothers of hearing impaired children). Mother's qualification was at least intermediate. Children's age ranged from 5 to 12 years old (Mean age = 8.9 years). Sample was collected from the deaf section of special education schools. Child domain of parenting Stress Index (Abidin, 1995) was administered to measure stress related to child's behavior problems.

RESULTS

T-test indicate insignificant difference among the mothers of children with hearing impairment and hearing children, on the variable of parenting stress due to behavior problems of children, $t = 1.57$, $p > .05$.

CONCLUSION:

Result signifies the presence of behavior problems in children in general population as well as in children with hearing impairment.

KEY WORDS

Parenting stress, Behavior Problems, Hearing Impairment.

PREVALENCE OF LANGUAGE AND SPEECH PROBLEMS AMONG CHILDREN WITH REFERENCE TO DEMOGRAPHIC FACTORS IN KARACHI PAKISTAN 2011 TO 2013

SYEDA RAZIA BUKHARI, RAHEELA KHATOON

OBJECTIVE

Present study aims to examine the prevalence of language and speech problems among children and the role of Demographic factors (gender, family structure and socioeconomic statuses) in language speech problems in Karachi Pakistan from year 2011 to 2013.

DESIGN

Cross sectional study.

PLACE AND DURATION OF RESEARCH

The research was established in Karachi, Pakistan Jan 2011 to December, 2013.

SUBJECT AND METHOD

In current study 423 out patients' data was collected from Institute of Clinical Psychology, university of Karachi and Al-Khidmat. Participants age ranged from 2 years to 12 years (Mean = 5.72, SD = 2.757) Data was collective through convenient sampling method. All participants visited for treatment of language and speech problems. Intake form which is based on detailed diagnostic history of language and speech problems were administered on all participants.

RESULTS

Percentage method of descriptive statistics was utilized for statistical analysis of data. Result reflect following percentages of language and speech problems; Articulation problem, 7.1% Expressive language problem, 3.5% Fluency problem, 4.5% Language problem, 45.4% Phonological problem, 15.6% Pragmatic Language problem, 1.4% Receptive problem, 7.1% Stuttering and 13.5% Voice problem 1.9%. Further, result revealed 70.4% male and 29.6 female children having language and speech problems. Prevalence language and speech problem in joint family setup = 56.0% and nuclear family setup = 44.0% lower socioeconomic status = 16.8%, middle socioeconomic status = 74.9% and upper socioeconomic status = 8.3%.

CONCLUSION

Overall results depict that language speech problems are higher in children. Proper treatment for language speech problems should be provided to them through language and speech therapeutic interventions.

KEY WORDS

Language, Speech problems, Children.

SOCIAL ANXIETY AS A PREDICTOR OF ANTISOCIAL BEHAVIOR IN ADOLESCENT STUDENTS

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OBJECTIVE

The present study examines the significance of social anxiety in the prediction of antisocial behavior in adolescent students.

DESIGN

Descriptive study.

PLACE AND DURATION OF THE STUDY

The sample was gathered from Karachi, Pakistan from July 2012 to October 2013.

SUBJECTS AND METHODS

The sample employed in the study was 500 adolescent (250 male & 250 females) between the age ranges of 12-19 years with mean age 15.65 were collected from different schools and colleges of Karachi, Pakistan. Inclusion criteria included those participants who were regular students, Pakistani nationals, having both parents alive/living together. Physically disable adolescents were excluded in from the study. Demographic information form was filled. Pakistani version of Social Anxiety Scale for adolescents (SAS-A; Bano & Ahmad, 2013) originally developed by (La Greca, 1999) and Reynolds Adolescent Adjustment Screening Inventory (Reynolds, 2001) were used in this study.

RESULTS

Linear regression analysis was applied to test the hypothesis. Results indicated that social anxiety has a significant positive effect in the development of antisocial behavior in adolescents ($r = .202$; $F(1, 498) = 21.224$; $R^2 = .041$, $p < .001$).

CONCLUSION

Adolescent age is a period of opportunities and challenges for understanding of oneself in social perspective. Furthermore, this period brings a lot of biological changes, emotional and social encounters along with psychological development. Adolescent facilitate themselves in the psychological adjustment to accept all challenges of the environment. This time is crucial as during this phase of life the person is developing his social network, deciding about their career, trying to be autonomous making personal relationship relying more on friends than family. On the other hand, a number of adolescents remain unable to overcome all these difficulties, challenges and requirements of this age and may predispose to pathologies. They also may suffer with psychological problems like social anxiety. Social anxiety hinders in all this process. The resulting relationship problems, social avoidance and detachment with peers characterized by antisocial behavior further makes it difficult to cope with the problems of the developmental period of adolescence effectively.

KEY WORDS

Social Anxiety, Antisocial Behavior, Adolescent.

COGNITIVE CORRELATES OF DEPRESSION IN ADOLESCENTS

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OBJECTIVE

The objective of the study is to determine the relationship between cognitive emotion regulation strategies (such as self-blame and rumination) and depression in adolescents.

DESIGN

A Co relational Study.

PLACE AND DURATION OF STUDY

Karachi, Pakistan.

SAMPLE AND METHOD

Sample of the present study comprised of 334 secondary school students. Among them 179(53.5%) were males and 155 (46.4%) were females. Their age range was from 12-16 years (Mean age 14.55 years, $SD = 1.041$). Participants were approached in group settings. Personal information form, Cognitive Emotion Regulation Questionnaire (CERQ; Garnefski & Kraaij, 2002), and Centre for Epidemiological Studies Depression Scale Children's Version (CES-DC; Weissman, Orvaschel, & Padian, 1980) were administered.

RESULT

To determine the correlation of self-blame and rumination with depression, Pearson Product Moment Correlation (r) was applied. The results revealed a significant positive relationship between self-blame and depression ($r = .291$, $p < .01$) and a significant positive relationship between rumination and depression ($r = .273$, $p < .01$).

CONCLUSION

Results indicate that significant positive relationships exist between self-blame and depression, and rumination and depression in adolescents.

KEYWORDS

Self-blame; rumination; cognitive emotion regulation; depression.

KNOWLEDGE AND TRAINING ABOUT CHILD SEXUAL ABUSE: STUDY WITH DOCTORS IN RAWALPINDI ISLAMABAD

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OBJECTIVES:

To assess the knowledge and training of doctors related to Child Sexual Abuse (CSA) and its management in hospitals of Rawalpindi Islamabad.

DESIGN

Both quantitative and qualitative methods were used.

PLACE AND DURATION OF STUDY

Doctors in Rawalpindi Islamabad.

SUBJECTS AND METHODS

For data collection questionnaires were developed to gain more in-depth information on doctors' knowledge of CSA, its dynamics, causes and effects as well as of their role, and training. This was done through questionnaire, Focus Group Discussions (FGD) and in-depth interviews (IDI) with doctors from Benazir Bhutto Hospital (BBH), Shifa International Hospital (SIH), Polyclinic Hospital (PH), Pakistan Institute of Medical Sciences (PIMS) and Rawalpindi Medical College (RMC) in Rawalpindi Islamabad.

RESULTS

Sixty-two percent of the questionnaire respondents reported that CSA had been covered in their medical curriculum. Almost all the participating doctors, including 88% of the questionnaire respondents, strongly expressed the view that doctors needed more support and training to deal with cases of CSA in their work places.

CONCLUSION

The study reveals a number of significant themes in doctors' understanding of CSA and their training needs.

KEY WORDS

Abuse, maltreatment, sexual abuse.

ON THE PATHWAY TO SUICIDE: SUICIDAL IDEATION IN YOUNG PEOPLE IN KARACHI, PAKISTAN

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OBJECTIVE

To estimate the prevalence of suicide ideation in a sample of high school students in Karachi and to examine the relationship of socio-demographic factors and suicidal ideation.

DESIGN

Cross sectional survey.

PLACE AND DURATION OF STUDY

Karachi - 06 months.

SUBJECTS AND METHODS

Students of private coeducation school of Karachi served as participants. We surveyed 20% of the entire student population of the high school which served as our reference. Our sample consisted of 127 adolescents out of whom 123 were included in the analysis (4 forms were rejected on account of errors in filling or were left blank). Our main outcome variable was suicidal ideation as measured by the Beck Scale for Suicide Ideation (BSS).

RESULTS

Total of 72/123 (58.54%) subjects had either active ideation (n=26; 21.14%, item 4 on BSS) or passive ideation (n=46; 37.40%, item 5 on BSS) of making a suicide attempt, mean score of 11.92 on BSS (range 0-38), was found for those who expressed "moderate to severe" active suicidal ideation, while a mean score of 6.8 was found for those who expressed passive suicidal ideation. Female gender was significantly associated with having suicidal ideation. Out of the total having active suicidal ideation (N=26), (69.2%) considered suicide or suicidal ideation as "sinful", while (19.2%) regarded suicide or suicidal ideation as "acceptable". More young males than females thought suicide or suicidal thoughts as being sinful.

CONCLUSION

Though limited in generalizability study findings provide areas for active intervention. Since educational institutions provide a unique opportunity for timely intervention, provision of such services can work as a valid preventive step in saving young lives.

Key Words: Suicide, Suicidal ideation, Younger people.

SOCIO-DEMOGRAPHIC CHARACTERISTICS AND ADAPTIVE FUNCTIONING PROFILE OF CHILDREN WITH INTELLECTUAL IMPAIRMENT

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OBJECTIVE

The objective of study is to assess the socio-demographic characteristics and measure adaptive functioning profile of children with intellectual impairment at Department of Psychiatry and Behavioural Sciences, DHQ Hospital, PMC, Faisalabad.

DESIGN

Cross sectional study.

PLACE AND DURATION OF STUDY

The study was conducted at OPD children in Department of Psychiatry and Behavioural Sciences, DHQ Hospital, PMC, Faisalabad from January 2011 to December 2013.

SUBJECT AND METHODS

170 children with intellectual impairment have been included in study who have intellectual disability. Demographic variables were recorded and Portage guide to early education (PGEE) was administered. The results were obtained by using SPSS-17.

RESULTS

Out of 170 ID children, mostly were male 105 (60%) and age range 01-10 years. Most parents have cousin marriages 106 (62.4%). Among mothers majority reported prenatal stress and injury 96 and ID children reported infections 66 postnatally. 98 (57%) shows no physical disability at birth. Among psychiatric co-morbidity %% mostly were epilepsy and movement disorder. 81% shows behavioural issues and communication disorder. While assessing adaptive functioning of ID children, their developmental ages in different areas are cognitive and language is 2 years, socialization and self help 4 years approximately.

CONCLUSION

Predominantly parents' cousin marriages, pre and postnatal complications, highly associated psychiatric co morbidity are found to be the salient features of intellectually impaired children. It is concluded that deficits in adaptive functioning are highest in cognitive and language development; so they need earlier interventional strategies for better outcome.

KEY WORDS

Intellectual Impairment, Adaptive Functioning, Socio-Demographics.

Consultation liaison psychiatry

DEVELOPMENT OF A PSYCHIATRIC CONSULTATION-LIAISON SERVICE IN RAWALPINDI, PAKISTAN

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OBJECTIVE

To document the cases presenting to the consultation-liaison psychiatry service at the Institute of Psychiatry, to assess the changes in usage of the service over the first two years and to determine the types of problems that present through this service.

DESIGN

Longitudinal descriptive study.

PLACE AND DURATION OF STUDY

The study was conducted at the Institute of Psychiatry, Benazir Bhutto Hospital, Rawalpindi.

SUBJECTS AND METHODS

Patients were assessed either in the referring departments on request, or they were sent to the Institute of Psychiatry for assessment. The doctor on call assessed the patient and recorded details in a liaison register, including demographic details, physical examination findings and psychiatric diagnosis. Comparisons between the years were made using the chi-squared test for most variables and the t-test for age.

RESULTS

Data were collected for 1131 occasions of referral. There was a 45% increase in referrals in the second year of the service. Emergency departments were the main source of referrals, providing 80% of the present study population. Most common reasons for referral included subjective distress, presentation suggestive of a specific psychiatric illness, suicidal thoughts or actions, somatic symptoms and behavioural disturbances. 30% of all patients referred were considered to require psychiatric admission.

CONCLUSIONS

Psychiatric consultation-liaison service forms an integral part of the functions of a good psychiatric unit. All departments of the hospital benefit from the availability of this service. The study highlighted the need for the development of such units in other hospitals around the country.

KEY WORDS

Psychiatry, Consultation-liaison service, Rawalpindi.

ANXIETY AND DEPRESSION IN CANCER PATIENTS OF PAKISTAN: A CROSS-SECTIONAL SURVEY

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OBJECTIVE

To find out anxiety and depression in cancer patients of Pakistan.

DESIGN

Cross-Sectional Study.

PLACE AND DURATION OF STUDY

outpatient departments of Civil Hospital Karachi, Jinnah Postgraduate Medical Centre, Abbottabad Teaching Hospital and Mayo Hospital Lahore. The duration of the study was from April 1st 2014 till June 30th 2014.

SUBJECTS AND METHODS

The sample consisted of 181 diagnosed cancer patients. Generalized Anxiety Disorder 7-item (GAD-7) scale and Patient Health Questionnaire-9 were used to define the presence of anxiety and depression in study participants. For analyzing association of anxiety and depression with age, sex, marital status, educational status, family status and modes of treatment offered, an interview based questionnaire was used. With the sample size n=181, collected data was analyzed by SPSS version 16.0.

RESULTS

In our study (n=181), 83(45.9%) participants were males and 98(54.1%) females. Anxiety disorders were screened to be positive in 108 patients (59.7%) while 64 patients (35.4%) were found to be vulnerable for depressive disorders. The vulnerability for anxiety disorders was most common in group of 46-50 year old patients and for depressive disorders the age group 41-45 was the most vulnerable one. There found to be significant association of age (p=0.008), metastatic nature of cancer (p=0.038) and marital status (p=0.004) with the level of anxiety. Positive screening for depressive disorders was not significantly associated with any of the risk factors that were considered in the study. Among those who were positively screened for anxiety disorders, 96.29% were without clinical diagnosis and treatment for anxiety disorders. Similarly, for depressive disorders, only 6.25% of the positively screened patients were diagnosed and treated by health care professionals for their depressive symptoms.

CONCLUSION

This study highlights high prevalence rates of depression and anxiety in cancer patients of Pakistan. Which, at most of the time remain undiagnosed and untreated that could affect patients' likely hood of survival and affectivity of the treatments given.

KEYWORDS

Anxiety, Depression, Cancer Patients.

DETERMINING THE EXTENT OF DEPRESSIVE DISORDER AND ASSOCIATED FACTORS AMONG PATIENTS WITH EPILEPSY IN SRI LANKA

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OBJECTIVES

To determine the extent of depressive disorder and associated factors among patients with epilepsy in Sri Lanka.

DESIGN

Cross-sectional, analytical study.

PLACE AND DURATION OF STUDY

Teaching Hospital of Colombo district, Sri Lanka.

SUBJECTS AND METHODS

123 Sri Lankan patients with epilepsy were randomly selected from neurology clinics of two teaching hospitals in Colombo district, National Hospital of Sri Lanka and Teaching Hospital Colombo South. Data collection was carried out using a study specific self-administrated questionnaire and a diagnostic interview conducted by senior registrar in psychiatry, using ICD-10, diagnostic criteria for research, after obtaining written informed consent from participants.

RESULTS

Of the study sample 28.5% had depressive disorder. Findings of this study showed that, there was a statistically significant correlation between co-morbid depression with some factors, income (P= 0.019), low mood at the interview (P= 0.0001), last seizure activity (P=0.012), degree of control of seizures (P=0.023), somatic symptoms. (p=0.0001) and side of the foci (p=0.046). There was a significant association at p<0.1 significant level between co-morbid depression and age (p=0.098). There were no significant association formed between co-morbid depression and other selected factors.

CONCLUSIONS

It was revealed that nearly one third of the epileptic patients in the study population suffer from co-morbid depression, which has a significant correlation with income, low mood at the interview, degree of control of seizures, duration of last seizure activity and with somatic symptoms.

KEY WORDS

Depression, Epilepsy, Neurology.

PREVALENCE OF DEPRESSION IN PATIENTS WITH TYPE-2 DIABETES IN PRIMARY HEALTH CARE SETTINGS- A CROSS SECTIONAL STUDY UNDER THE INTERPRET-DD PROJECT

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OBJECTIVE

To assess the prevalence of depression in patients with type-2 diabetes in primary health care settings.

DESIGN

Cross sectional study

PLACE AND DURATION OF STUDY

The study is being conducted at the Rural Health Centre, Mandra from March 2014 to November, 2014.

SUBJECTS AND METHODS

200 patients with type-2 diabetes are being recruited according to a pre-defined inclusion and exclusion criteria. The demographic details (age, gender, marital status) and the clinical characteristics (duration of illness, complications, current treatment) of the patients are being recorded. Hamilton Rating Scale for Depression (HAM-D), Problem Areas in Depression (PAID) scale, Patient Health Questionnaire (PHQ-9) and WHO Well Being Index (WHO-5) are being administered. T-test and Pearson Correlation will be used to estimate the association of variables.

RESULTS

Initial results show that a significant number of patients with type-2 diabetes suffer from co-morbid depression. It has also been seen that patients with diabetes and co-morbid depression show lower scores on the quality of life scales. The study will be completed in November, 2014 and the complete results will be shared with the participants of the conference.

CONCLUSION

Significant number of patients with type-2 diabetes suffers from co-morbid depression.

KEY WORDS

Type 2 diabetes, Depression, Primary health care.

PREVALENCE OF DEPRESSION AND ANXIETY IN TUBERCULOSIS PATIENTS

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OBJECTIVE

The aim of present study was to determine the prevalence of depression and anxiety among tuberculosis patients.

Design: It was a descriptive study and investigated the co-morbidity of depression and anxiety among tuberculosis patients with reference to gender.

PLACE AND DURATION OF THE STUDY

This study was conducted in Jinnah Post Graduate Medical Centre – Chest ward (TB clinic) from July 2014 to September 2014.

SUBJECTS AND METHODS

100 diagnosed patients of tuberculosis (50 males and 50 females) were conveniently selected. Patient Health Questionnaire (PHQ-9) and Generalized Anxiety Disorder Questionnaire (GAD-7) were used to assess the level of anxiety and depression.

RESULTS

56% TB patients had moderate to severe level of depression whereas 65% TB patients had moderate to severe level of anxiety. Female patients had significantly high prevalence of depression as compared to males ($t = -2.173$, $df = 98$, $P > .05$). Similarly prevalence of anxiety was also significantly higher in female patients ($t = -3.468$, $df = 98$, $P > .05$).

CONCLUSION

Study found depression and anxiety are co morbid factors with TB. However, better management of these psychiatric morbidities may lead to positive outcome of TB treatment.

KEY WORDS

Tuberculosis, Depression, Anxiety, Patient Health Questionnaire, Generalized Anxiety Disorder Questionnaire.

General adult psychiatry

ATTITUDE OF GIRLS MEDICAL STUDENTS TOWARDS PSYCHIATRY

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OBJECTIVE

To find out the attitude of girls medical students towards Psychiatry.

DESIGN

Cross sectional study.

PLACE AND DURATION OF STUDY

This study was conducted in Khyber Girls Medical College (KGMC) Peshawar, Khyber Pakhtunkhwa (KPK).

SUBJECTS AND METHODS

Students were selected and divided in two groups first group was labeled as cases and consisted of 3rd, 4th and final year students. Second group consisted of 1st and 2nd year students and was labeled as controls.. There were 86 students included in case group and 98 in the control group. Attitude towards psychiatry was assessed by a validated scale called attitude towards psychiatry scale (ATP-30). SPSS Version 19 was used for data and statistical analysis. Student's t-test was applied to find out the statistical significance.

RESULTS

Questions in ATP-30 scale were divided in to four sets in assess student's attitude towards different aspect of psychiatry. These aspects were, Psychiatric patients and psychiatric illness; Psychiatrist and subject psychiatry; Psychiatric knowledge and teaching; and Psychiatric treatment and hospitals. Overall both groups showed positive attitude towards psychiatry. There was some statistically significant difference between the two groups regarding some important items on the ATP-30, while the rest of majority items had a neutral response. These differences between the two groups may be due the fact that the control group consisting of 1st year and 2nd year students had limited exposure to clinical psychiatry as compare to the clinical students group.

CONCLUSIONS

Overall both groups showed positive attitude towards psychiatry. There was some statistically significant difference between the two groups regarding some important items on the ATP-30, while the rest of majority items had a neutral response. However, first and second year students with limited exposure to psychiatry consider psychiatric hospitals to be more like prisons. There is number of reasons for this attitude such as negative portrayal of psychiatric hospital and treatment in the media and reduced exposure of medical students to psychiatry due to competition from other medical departments for curriculum time in medical schools.

KEYWORDS

Attitude, Medical students, Psychiatry, Statistical significance.

PATTERN OF PSYCHIATRIC COMORBIDITY IN REFERRED CASES TO PSYCHIATRIST AT A TERTIARY CARE HOSPITAL

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OBJECTIVE:

To find out the pattern of psychiatric co morbidity in referred cases to psychiatrist at a tertiary care hospital.

DESIGN

Descriptive study.

PLACE AND DURATION OF STUDY

PNS Shifa Hospital Karachi in a period of 1 year.

SUBJECTS AND METHODS

This descriptive study was carried out on 100 patients for a period of 1 year at PNS Shifa Hospital. After non-probability convenient sampling, the cases were interviewed initially according to semi-structured clinical assessment Performa. Diagnosis was made according to ICD-10 diagnostic criteria. Rating scales were applied to rate the psychiatric illnesses. The variables of the study were recorded on semi-structure Performa. All the data obtained from the procedure mentioned above was analyzed using Statistical Package for Social Studies (SPSS). Frequency, percentage was computed for qualitative output.

RESULTS

Out of 100 patients, 59 (59%) were males and 41 (41%) were females. 29 (29%) belonged to age group of 30-40 years. 93 (93%) were married. And 38 (38%) were uneducated. 49 (49%) belonged to social class 4. 38 (38%) belonged to Punjab. 54 (54%) were referred because of comorbidity. 60 (60%) were referred from medicine and allied. 10 (10%) had a positive family history and 88 (88%) had a positive past history. 45 (45%) were diagnosed having depression, 23 (23%) anxiety disorder, 12 (12%) mood disorder, 3 (3%) schizophrenia, 3 (3%) obsessive compulsive disorder, 3 (3%) acute stress reaction and 2 (2%) organic mood disorder. 10 (10%) were having no psychiatric illness.

CONCLUSION

Demographic factors like age, sex, marital status, educational standard and social status interplay a role in causation of comorbidity. Depression is the most frequent comorbid psychiatric illness and it is more frequent in moderate form in age group 30-40 years, males, married, uneducated and in low socioeconomic class 4 and 5. Anxiety disorders and mood disorders are second most frequent comorbid disorders.

KEY WORDS

Comorbidity, Depression, Specialty of referral.

THE MISSING LINK: HERV-W IN SCHIZOPHRENIA

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Schizophrenia is a neuropsychiatric disorder of complex etiology with robust genetic contribution and epidemiological association with prenatal infections. It is unclear how the genetic, infectious, neurodevelopmental and neuroinflammatory aspects of Schizophrenia are interrelated. Human Endogenous Retroviruses (HERVs) have been presented as possible candidates constituting the missing link in the gene-environment interactions of Schizophrenia, with the HERV-W family showing the greatest evidence of association. HERVs are evolutionary archeological remains of retroviral infections which took place several million years ago during the course of mammalian evolution. Studies have identified retroviral nucleotide sequences, envelope and capsid proteins, and elevated transcription of HERV-W elements in cerebrospinal fluid, blood and brain samples from patients of Schizophrenia. Prenatal infections (by agents such as influenza and *Toxoplasma gondii*) can trigger activation of HERV-W genetic elements, leading to various genetic modifications and induction of chronic sub-acute neuroinflammation. Secondary infections can reactivate and express the production of HERV-W envelope protein in the CNS, leading to inflammation and neurotoxicity, and culminating in the first symptomatic presentation of Schizophrenia. In this paper, we review the current association between HERV-W and Schizophrenia to provide an overview of the role played by these agents in this severe psychiatric illness.

EVALUATION OF LEVEL AND DETERMINANTS OF SATISFACTION OF HEALTHCARE CONSULTANTS WITH THEIR WORK IN DIFFERENT SPECIALTIES WORKING IN PUBLIC AND PRIVATE HOSPITALS IN KARACHI, PAKISTAN

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OBJECTIVE

The objective of our study was to evaluate the level of job satisfaction among healthcare consultants belonging to different specialties working in Public and Private Hospitals.

DESIGN

Cross sectional study

PLACE AND DURATION OF STUDY

Healthcare consultants in Karachi.

SUBJECTS AND METHOD

A cross sectional design was employed through a self-administered questionnaire, comprising of socio-demographic assessment and 10 items Warr- Cook- Wall job satisfaction assessment scale along with additional 8 pretested items, measured in 5 points likert scale. It was distributed and collected from a sample of 332 healthcare consultants over a period of 5 weeks between August, 2013 and September, 2013. Non-probable convenient sampling technique was brought into service. Pearson chi-square analysis was implemented.

RESULTS

77.7% of healthcare consultants were found satisfied with their work. 87.4% and 68% of consultants working in Private and Public hospitals were found satisfied with their work respectively. Chi square analysis indicated significant relationship between place of practice and job satisfaction at the p-value of 0.000. A high, almost equal level of job satisfaction was found among consultants belonging to the specialties namely Medicine & allied, Surgery & allied and Diagnostics & Laboratory. Involvement in recreational activities was found to have an impact on job satisfaction. Conclusion: Most of the consultants were found satisfied with their job. Consultants working in public hospitals were found less satisfied than that of private practitioners, mostly dissatisfied in physical working environment, amount of responsibility at work, rate of income and relationship with the patients.

KEY WORDS

Cross-sectional study; job satisfaction; health care consultants, Public practice, Private Practice, Karachi.

CHALLENGES OF EARLY CAREER DOCTORS: A CROSS SECTIONAL SURVEY

AFTAB ASIF, SHAHANA NAZ, USMAN AMIN HOTIANA

OBJECTIVES

To determine the speciality preference during house job and postgraduate program. To determine the preferred place of working and whether they continued or discontinued their profession for other fields.

DESIGN

Descriptive study.

PLACE AND DURATION OF THE STUDY

Doctors of King Edward Medical University, session 2008 to 2010 were contacted through mail survey by using convenience sampling.

SUBJECTS AND METHODS

After ethical approval, 600 doctors were sent a questionnaire, 401 doctors responded. The questionnaire covered the demographic details, preferences about career, specialties and current working place.

RESULTS

Our study revealed that out of 401 sample 53 % female and 47% male with mean age (28.5 ± 1.4). Most of the doctors were doing their post-graduation in different specialties (277, 69.1%) while 124 (30.9%) did not. Mostly doctors are working in Pakistan (60%) while 40% doctors settled in abroad. Of the following, majority doctors have continued their profession (80%) and of them (20%) have changed profession. Results also depicted that doctors (39.4%) are working in government hospitals.

CONCLUSION

Medicine and surgery were the most preferred specialties while dermatology and psychiatry were least preferred. Basic sciences were of further lower priority than clinical fields. Majority preferred to work in major cities or go abroad. A significant number (20%) discontinued and adopted other fields.

KEYWORDS

Medical doctors, Specialties, Profession.

PSYCHOSOCIAL DETERMINANTS OF ANTENATAL ANXIETY AND DEPRESSION IN PAKISTAN: IS SOCIAL SUPPORT A MEDIATOR?

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OBJECTIVE

To find out psychosocial determinants of antenatal anxiety and depression in Pakistan.

DESIGN

Cross sectional study.

PLACE AND DURATION OF STUDY

Four teaching hospitals in Lahore from February, 2014 to June, 2014.

SUBJECTS AND METHODS

A total of 500 pregnant women seen at hospital obstetrics and gynecology departments were interviewed with a questionnaire consisting of three sections: demographics, the Hospital Anxiety and Depression Scale (HADS) and the Social Provisions Scale (SPS). All data were analyzed with SPSS v. 20. Descriptive statistics were analyzed for demographic variables. Pearson's chi-squared test, bivariate correlations and multiple linear regression were used to analyze associations between the independent variables and scores on the HADS and SPS.

RESULTS

Mean age among the 500 respondents was 27.41 years (5.65). Anxiety levels in participants were categorized as normal (145 women, 29%), borderline (110, 22%) or anxious (245, 49%). Depression levels were categorized as normal (218 women, 43.6%), borderline (123, 24.6%) or depressed (159, 31.8%). Inferential analysis revealed that higher HADS scores were significantly associated with lower scores on the SPS, rural background, history of harassment, abortion, cesarean delivery and unplanned pregnancies ($P < .05$). Social support (SPS score) mediated the relationship between the total number of children, gender of previous children and HADS score. Women with more daughters were significantly more likely to score higher on the HADS and lower on the SPS, whereas higher numbers of sons were associated with the opposite trends in the scores ($P < .05$).

CONCLUSION

Because of the predominantly patriarchal socio cultural context in Pakistan, the predictors of antenatal anxiety and depression may differ from those in developed countries. Rural women and working women had higher levels of antenatal anxiety and depression, which contradicts earlier findings in western countries. Our study found that higher numbers of daughters were associated with higher levels of depression and anxiety, whereas sons had a protective influence. We therefore suggest that interventions designed and implemented to reduce antenatal anxiety and depression should take into account these unique factors operating in developing countries and patriarchal societies.

KEY WORDS

Psychosocial determinants, Antenatal Anxiety, Depression.

VIEWS OF MENTAL HEALTH PROFESSIONALS REGARDING THE EFFECTS OF MENTAL ILLNESS ON MARRIAGES IN PAKISTAN: AN EXPLORATORY STUDY

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Dept. of Psychiatry, Aga Khan University, Karachi

OBJECTIVES

To study the views of MHPs about the reasons for couples to stay in (or break away) from a marriage when one of the partners becomes mentally ill.

DESIGN

Qualitative study design.

PLACE AND DURATION OF STUDY

Dept. of Psychiatry, Aga Khan University, Karachi

SUBJECTS AND METHODS

We conducted a qualitative study, using a semi-structured interview guideline. For mental illnesses we included Bipolar Affective Disorder,

Schizophrenia and severe forms of Obsessive-Compulsive Disorder, as these conditions cause most disruption in a marriage. We interviewed 14 MHPs that included 5 psychiatrists, 7 psychiatry trainees and 2 psychologists from a university hospital in Karachi. Two of the authors conducted all the interviews, after receiving training in interviewing and with good inter-rater reliability.

RESULTS

Our respondents identified the following areas that affected the outcome of a marriage in which one of the partners had a mental illness: duration of the illness, duration of the marriage, gender of the mentally ill spouse, family setting (nuclear or joint), type of marriage (choice or arranged), attitude of the healthy spouse and whether the healthy spouse was aware of the mental illness before the marriage. There was a general agreement that individual circumstances tend to differ and affect the outcome. All mental health professionals believed that psycho-education and counseling can help sustain the marriage in these special circumstances.

CONCLUSIONS

MHPs play an important role in the counseling of couples and families when one of the partners becomes mentally ill. The advice and counseling they give to the couple can influence the outcome of such marriages.

There is need to conduct this study with a larger sample size in different settings within Pakistan. The information gained can help in developing strategies that can address this important but under-researched area.

KEY WORDS

Mental health professionals, Mental illness, Marriage.

MARRIAGE AND MENTAL ILLNESS: AN EXPLORATORY STUDY

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OBJECTIVES

To study the factors that influences the decision to stay in or break away from marriages when one of the partners has a mental illness

DESIGN

Cross sectional, qualitative study design

PLACE AND DURATION OF STUDY

Psychiatry in-patient unit and out-patients clinics of Aga Khan University Hospital, Karachi. 06 months

SUBJECTS AND METHODS

We included three psychiatric disorders for our study: schizophrenia, bipolar affective disorders and severe forms of obsessive-compulsive disorder, as all three cause significant disruption in the marriage. 30 healthy spouses of partners with one of the three psychiatric disorders but with intact marriages were interviewed to explore the problems they face during the course of their marriages and their personal and social reasons for staying in it. Conversely, to find the dynamics of a broken marriage, 20 patients were interviewed. The interviews of 20 primary caregivers related to the latter sample were also conducted for reliability purposes. Five categories of marital status and mental illness were delineated: mental illness diagnosis made pre-marriage or post-marriage, whether the healthy spouse had or did not have knowledge of the mental illness before the marriage and current status of marriage (intact or broken)

RESULTS

Factors that emerge from our study shows that the involvement of family, the gender of the mentally ill spouse, the presence of children, the duration of the illness, the relapsing nature of the illness and the support system provided to the couple were some of the factors that affected the outcome of the marriage.

CONCLUSIONS

In the context of Pakistan, the findings of the study have special significance as both mental illness and divorce carry a huge stigma. Pre-marital counseling, psycho-education, early detection, relapse prevention and providing emotional and material support to the couple are some of the areas that can potentially affect the outcome of such marriages.

KEY WORDS

Marriage, Mental illness, Disruption.

ROLE OF ELECTROCONVULSIVE THERAPY (ECT) IN REFRACTORY OBSESSIVE COMPULSIVE DISORDER (OCD) COMORBID WITH SEVERE DEPRESSION

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Refractory obsessive compulsive disorder comorbid with depression is a clinical challenge to treat. Electroconvulsive therapy (ECT) is currently not used as first line treatment for OCD. However several reports have shown that ECT is effective for severe OCD. ECT is an established effective treatment in severe depression. In this review, we have evaluated the role of ECT in a subset of refractory OCD who comes with comorbid severe depression. The existing evidence mostly consist of case studies. We have drawn on the body of published evidence, as well as on case studies and expert opinion. ECT, retains its reputation and comes out as a saviour to refractory OCD comorbid with severe depressive symptoms.

ASSESSING THE SIGNIFICANCE OF SPIRITUALITY IN MANAGEMENT OF PATIENTS IN KARACHI, PAKISTAN

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Spirituality is an important part of social sciences as well as of human evolution, activity and transcendence. Spirituality also plays an important part in coping with trauma in the aftermath of natural and/or manmade disasters. The role of spirituality in medicine has also received some attention. Although research has shed light on the role of spirituality in management of patients suffering from a variety of illnesses, there is a need for greater understanding on the role of spirituality to solve some of medicine's greatest mysteries¹. Various researches have been done to evaluate health professionals' account as well as patients' perspective on significance of spiritual issues in psychiatric management. There have been studies from Pakistan that have looked at the role of religion in patients' illness, which showed that desire of patients from their physicians to express a prayer for them aloud and others accepted that being in care of 'God-fearing physicians' would have a positive impact on their health. In order to determine the importance of spiritual need in the treatment plan and to propose bio-psycho-social and spiritual model for evaluation of medical and psychiatric illnesses, the Research question is designed to evaluate patients and health professionals' opinions regarding the significance of spirituality in patients' illnesses and management. As far as we can determine no previous study in Pakistan has been conducted in which both patients' and health professionals' were evaluated. We will conduct interviews of both 40 patients and 40 health professionals from following specialties to gain their opinion on spiritual discussion. For health professionals we would use 17-item proforma questionnaire. Informed and Written consent will be taken from all respondents. However, Patient will be interviewed separately in an outpatient department of Neurology, Psychiatry, Oncology, Medicine, Family Medicine and Rheumatology. 5- Item self-devised tool will be applied on patients. Patients' privacy and confidentiality will be maintained. Interview will be conducted from Follow-up patients. The focus would be to highlight areas which may need attention in improving therapeutic alliance as well as patients' satisfaction also to improve quality of care and outcome of illnesses in long term. In the context of Pakistan, the findings of the study have special significance of spiritual discussion in mental and medical illnesses. The need of psychiatry chaplain ship, inculcation of spirituality in academics and integration of spiritual services in social support can be assessed.

Mental health provision

DEVELOPING A FRAMEWORK FOR EFFECTIVE COLLABORATION BETWEEN MENTAL HEALTH SERVICE PROVIDERS AND FAITH BASED HEALERS IN PAKISTAN

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OBJECTIVES

The objectives of the study were to Identify the terminology used to describe faith-based healers and faith healing practices in Pakistan; Explore pathways to care, how commonly and why people with mental health problem seek help from faith healers; Describe explanatory models and treatments used by faith healers; To develop guidelines for effective collaboration between mental health services and faith based healers.

DESIGN

Literature Review.

PLACE AND DURATION OF STUDY

Rawal Institute of Health Sciences, Islamabad from 2013 to 2014.

SUBJECTS AND METHODS

Phase-I: Literature was searched from 2001 onwards till to date, as WHO published World Health Report (13 years) back on Mental Health and pathways followed by psychiatric patients. We searched databases i.e., Medline, EMBASE, Psychinfo, CINAHL, Pakmedinet, Index Islamicus and Google Scholar. Relevant Journals were also searched along with theses/dissertations from different institutions/universities.

Phase –II: Will include in depth interviews and Focus Group Discussions with mental health service users, faith based healers and mental health care providers to develop guidelines for effective collaboration.

RESULTS

During review of literature, 1620 articles have been identified. These were short listed according to inclusion criteria and those not relevant to our culture and language were excluded leaving behind 26 relevant published studies and 08 unpublished research papers (theses/dissertations).

CONCLUSIONS

Almost 50% of the psychiatric patients report to faith based healers for relief of mental health problems. This review also identify that there is no existing collaborative model available for mental health service providers and faith based healers in Pakistan. Therefore there is a dire need to develop a collaborative model in order to improve mental health services in Pakistan.

KEY WORDS

Effective collaboration, Mental health service providers, Faith Healers.

ACADEMIC IMPERIALISM AND PSYCHIATRIC RESEARCH IN PAKISTAN

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This is to review collaborative research between foreign investigator and Pakistani mental health professionals. The review of publications of psychiatry research projects was done where the primary investigator was based outside Pakistan. Psychiatric research in Pakistan suffers from semi colonial approach. Foreign investigators (including expatriate Pakistani psychiatrists settled in the West) frequently conduct psychiatric research in Pakistan. Many studies done by foreign investigators in Pakistan simply could not be done in their home countries nor receive ethical approval. Many foreign researchers take advantage of the weak ethical review process in Pakistan. In many instances there are no standing ethics review committees and an ad-hoc one is set up for a particular project only. Whereas one of the main stated aim of many of these projects is to increase research capacity in Pakistan, more frequently than not local professionals have little opportunity to participate in actual research work; their participation is limited to data collection or identifying research subjects. In this role they have little opportunity to enhance their research skills, as they are not part of the study's design, analysis, synthesis or reporting. An analysis of more than 20 research publications of studies done by foreign researchers in Pakistan shows the foreign investigator to be the lead author. Very few local professionals involved in these studies have gone on to conduct independent research themselves. Foreign researchers can distort country research agendas and undermine national research systems, as they pay insufficient attention to national health priorities. Issues of ownership, sustainability and development of research capacity are not clearly addressed. It is important that all research collaboration between foreign researchers and Pakistani mental health professionals be thought through carefully and the ethics of such collaboration be considered. Foreign researchers must not only focus on the results and publications but on building genuine research capacity and raising the standards of research in Pakistani host institutions.

USE OF POLITICALLY CORRECT LANGUAGE IN MENTAL HEALTH PROFESSIONALS

ZULQURNAIN ASGHAR

President, Potohar Mental Health Association (PMHA)

OBJECTIVE

To measure the use of politically correct language among mental health professionals in a university setup.

DESIGN

Observational study.

PLACE AND DURATION OF STUDY

50 mental health professionals including 35 females and 15 males aged between 22 to 36 years had been observed during weekly roundup of internship's supervision in a university setup. Duration of the study was 7 months (March 2013 to October 2013).

SUBJECTS AND METHOD: Observational method was used to gather the data. Observations were made on the criteria of person Vs illness / impairment / disabilities. Language was observed in a natural / real setting.

RESULTS

30% participants were not aware of politically correct language, 20% participants were partially aware but they did not use politically correct language, 30% participants were not convinced to use politically correct language and 20% participants were convinced that politically correct language should be used. There was no significant difference found b/w males and females regarding use of politically correct language.

CONCLUSION

Mental health professionals in Pakistan are not aware off and are not sensitive toward the correct use of language for their clients. There is a need to make them aware and sensitive about use of correct terminologies for different mental health disorders e.g. Instead of mental retardation intellectual impairment should be used. This will help reducing labeling and stigmatization. Moreover, politically correct language should be promoted and incorporated in the mental health curriculum.

KEY WORDS

Politics, Language, Mental health Professionals.

NETWORKING, INTERNET AND PROFESSIONALISM – A FOCUS ON DIGITAL PSYCHIATRY

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How can psychiatrists integrate technology professionally into clinical practice? This paper will address key concerns that can arise with the use of technology. It will also look at promising technological opportunities that can be integrated into psychiatric practice while respecting professional boundaries. Finally, recommendations for use of technology in psychiatric practice will be discussed. Review of articles and Guidelines for ethical conduct on social media as discussed at a workshop called "Blurred Lines: Challenges Encountered by Psychiatry Trainees in Maintaining Professionalism in the Digital Age," at the APA annual convention. A few important points from these guidelines: All content should be considered public and permanent; Always consider patient privacy and confidentiality in social media; Utilize privacy settings to safeguard personal information and content; Maintain appropriate boundaries when interacting with patients online; Consider keeping separate personal and professional social media accounts; When you find unprofessional content posted by a colleague, bring it to the attention of the colleague; if it is not adequately addressed, bring it to the attention appropriate authorities; When in doubt about certain aspects of technology, ask an expert (eg, IT, risk management, legal, clinical, ethical). In general, psychiatrists need to appreciate that technology is here to stay and represents a critical change to the framework of practicing psychiatry. By spurning technology, psychiatrists may risk failing to understand its importance in the lives of patients as well as its inevitable role in clinical practice. By embracing technology without caution, they risk violating professional roles and boundaries. By keeping in mind some caveats, psychiatrists can successfully employ technology in their practice.

TERRORISM IN PAKISTAN: A BEHAVIORAL SCIENCES PERSPECTIVE

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This article reviews the behavioral science perspectives of terrorism in Pakistan. It can be argued that Pakistan has gained worldwide attention for "terrorism" and its role in the "war against terrorism". The region is well placed geopolitically for economic successes but has been plagued by terrorism in various shapes and forms. A behavioral sciences perspective of terrorism is an attempt to explain it in this part of the world as a complex interplay of historical, geopolitical, anthropological and psychosocial factors and forces. Drawing from theories by Western scholars to explain the behavioral and cognitive underpinnings of a terrorist mind, the authors highlight the peculiarities of similar operatives at individual and group levels. Thorny issues related to the ethical and human right dimensions of the topic are visited from the unique perspective of a society challenged by schisms and divergence of opinions at individual, family, and community levels. The authors have attempted to minimize the political descriptions, although this cannot be avoided entirely, because of the nature of terrorism.

ECONOMIC BURDEN OF MENTAL HEALTH IN PAKISTAN

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Aga Khan University, Karachi

OBJECTIVES

To estimate the economic burden of mental ill-health in Pakistan

DESIGN

Secondary data analysis.

PLACE AND DURATION OF STUDY

Dept. of Psychiatry, Aga Khan University Hospital. 06 months

SUBJECTS AND METHODS

Data set on all in-patient admissions (N=642) and ambulatory care patients (N=1240), for the years 2005-06 were classified into ICD-10 categories to estimate healthcare and other costs. Healthcare costs included consultation fees, diagnostics, bed charges, laboratory charges and medications. Other costs were travel expenses, caregiver time and productivity losses. Cost estimates were applied to prevalence data of major mental illnesses in Pakistan and LAMI countries. Cost estimates were adjusted for health seeking at tertiary care and primary health care in public and private sector in Pakistan using national survey data 2005-06 on health seeking behavior.

RESULTS

Mood disorders accounted for 52% of admissions and 58% of ambulatory care costs. The average cost per patient per any episode of mental illness was PKR 3361 and PKR 26,705 for ambulatory care and admissions respectively. We estimated the total economic burden of mental health in Pakistan to be PKR 165.9 billion (USD 2.8 billion) in 2005-06. This is 2.5% of the gross domestic product (GDP) of Pakistan for the years 2005-06. Productivity losses accounted for 61% of the total economic burden. Mood disorders, organic disorders, stress related /neurotic disorders and childhood behavior and emotional disorders are the major cost drivers in the total economic burden of mental illnesses in Pakistan.

CONCLUSIONS

Our findings suggest that the economic burden of mental ill health is very high in Pakistan. This has huge economic consequences for the individual and family, health system and the general economy of the country. Majority of the population, especially those in transition and/or those who are chronically poor cannot afford the cost of treatment of their mental illnesses. There is urgent need for more government spending on mental health in Pakistan. There is also need for further research to identify cost effective strategies to address mental ill health both at community as well as health facility based settings in Pakistan.

KEY WORDS

Mental Health, Cost of illness, Health Economics and Policy

TEACHING MENTAL HEALTH FIRST AID: EXPERIENCE AT AMAN FOUNDATION

MARYAM AHMED, FATIMA KHURRAM, SAADIA QURAI SHY

The AMAN Foundation

OBJECTIVE

To study the effectiveness of the programme in improving knowledge of and changing attitudes towards mental illness.

DESIGN

Descriptive study.

SUBJECTS AND METHODS

The Mental Health First Aid (MHFA) program, originally developed in Australia, shows promise for a country facing such challenges in the mental health field. The MHFA course was developed to equip lay-persons with the knowledge and skills to provide initial help to someone developing mental health problems of Depression, Anxiety, Psychosis and Substance Abuse Disorder, as well as dealing with crisis situations associated with these disorders.

RESULT

This paper presents the effectiveness of the course in Pakistan Using the data from 361 of the participants (out of 91 trainees). The Standard MHFA program was delivered as a 12-hour standard course over 2 days or 4 days. The effectiveness of this course was measured on three parameters; knowledge acquisition, change in stigmatizing attitudes and change in helping attitudes using self-reported evaluation questionnaires before and after the training. The questionnaire used was the standardized version used by MHFA International, with a few minor changes to contextualize for Pakistan. The courses were conducted for employees of the AMAN Foundation. The participants included senior and middle management, as well as members of the field team, with varying levels of experience and education. The results reflect changes, if any, in the participants' ability to recognize mental disorders described in vignettes and in their beliefs about treatment compared to those of health professionals. The results, which are being finalized, may also reflect changes in social distance from people with mental disorders and confidence to help people with mental disorders.

CONCLUSION

The Mental Health First Aid program presents a low-cost, high-impact solution to increase mental health literacy, improve helping attitudes and decrease stigma towards individuals with mental health disorders in Pakistan.

KEY WORDS

Mental health, First Aid, Crisis

DEPRESSION, ANXIETY AND SOMATIC SYMPTOMS IN GLOBAL PRIMARY CARE SETTINGS: A FIELD STUDY FOR THE ICD-11-PHC CARRIED OUT ACROSS PAKISTAN

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OBJECTIVES

The study aimed at improving the assessment and diagnosis of the most common mental disorders in PHC settings in multiple countries. It intended to assist WHO's Department of Mental Health and Substance Abuse (MSD) in determining whether the proposed ICD-11-PHC is suitable for use at a global level.

DESIGN

Descriptive study.

PLACE AND DURATION OF STUDY

In Pakistan, this study was conducted by a total of 24 primary health care physicians located in all the four provinces as well as Azad Jammu Kashmir.

SUBJECTS AND METHODS

A total of 750 patients were enrolled from all the provinces across Pakistan. The patients were screened for two major categories of diseases, namely anxious depression and Body Stress Syndrome (BSS). The patients were administered a 5 item scale CEF (clinical encounter form) to assess anxious depression and bodily stress syndrome. A trained research assistant then administered PROQSY CIS-R (Clinical Interview Schedule-Revised) and WHO DAS (WHO Disability Adjustment Scale) on each patient.

RESULTS

The study aimed to establish the precise symptom thresholds on a brief depression-screening instrument, to evaluate primary care providers' ability to detect and assess depression and anxiety, to determine whether the presentation of BSS is similar across the various countries and primary care settings participating in the field study and to compare the rates of somatic symptoms among BSS patients.

CONCLUSION

The data collection will be completing at the end of October all across the world and the results of the Pakistan site will be shared with the larger group in December.

KEY WORDS

Depression, Anxiety, Somatic symptoms, Field study.

NETWORKING, INTERNET AND PROFESSIONALISM – A FOCUS ON DIGITAL PSYCHIATRY

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How can psychiatrists integrate technology professionally into clinical practice? This paper will address key concerns that can arise with the use of technology. It will also look at promising technological opportunities that can be integrated into psychiatric practice while respecting professional boundaries. Finally, recommendations for use of technology in psychiatric practice will be discussed. Review of articles and Guidelines for ethical conduct on social media as discussed at a workshop called "Blurred Lines: Challenges Encountered by Psychiatry Trainees in Maintaining Professionalism in the Digital Age," at the APA annual convention. A few important points from these guidelines: All content should be considered public and permanent; Always consider patient privacy and confidentiality in social media; Utilize privacy settings to safeguard personal information and content; Maintain appropriate boundaries when interacting with patients online; Consider keeping separate personal and professional social media accounts; When you find unprofessional content posted by a colleague, bring it to the attention of the colleague; if it is not adequately addressed, bring it to the attention appropriate authorities; When in doubt about certain aspects of technology, ask an expert (eg, IT, risk management, legal, clinical, ethical). In general, psychiatrists need to appreciate that technology is here to stay and represents a critical change to the framework of practicing psychiatry. By spurning technology, psychiatrists may risk failing to understand its importance in the lives of patients as well as its inevitable role in clinical practice. By embracing technology without caution, they risk violating professional roles and boundaries. By keeping in mind some caveats, psychiatrists can successfully employ technology in their practice.

URBAN VS SUBURBAN MENTAL HEALTH

RTD. LT.COL. SAJJAD

Consultant psychiatrist Attock, Pakistan.

Most of the developing countries have a clear and contrast socio-economic differences between urban and suburban places. In this paper an attempt has been made to critically analyse the state of mental health in the perspective of development gradient. The various anthropological and socio-cultural parameters and etiological factors have been discussed broadly. An outline of the state of available mental health facilities have been presented. The plight of mental health services in public sector in periphery is to some extent addressed by the private sector. Although the perspectives in which psychiatrists are working in periphery are quite challenging yet their work is commendable. The private sector can contribute a lot towards enhancement and refinement of mental health care. These psychiatric set ups can play a remarkable role in research, public awareness and teaching of psychiatry. The need of the day is to develop a strong liaison between public and private mental health professionals. The institutes and professional bodies will have to play leading role.

Old age psychiatry

PROFILE OF DEMENTIA PATIENTS FROM A TERTIARY HOSPITAL IN KARACHI, PAKISTAN

QURAT KHAN

Aga Khan University Karachi

OBJECTIVE

To study demographics of dementia population in Karachi, Pakistan.

DESIGN

Descriptive study.

PLACE AND DURATION OF STUDY

Aga Khan University from Oct 1st, 2013 till date

SUBJECTS AND METHODS

A dementia registry was started at Aga Khan. Details including demographics and clinical features have been collected. Dementia was diagnosed according to DSM-IV criteria.

RESULTS

We have 70 patients in the registry so far. Median age is 66 years, 51 % of the patients are males, 21 % have no formal education, 6 % have up to 8 years and 11 % have 10-12 years of education. Median MMSE among those who were testable was 22 while 26 % were not testable at the time of presentation. Median duration of symptoms at presentation was 2 years; family history was positive in 39 % and Parkinsonism was present in 33 %. 63% had probable Alzheimer's dementia. Literature search did not reveal any clinical or population based studies in Pakistan. Some work has been done in the fields of genetics and molecular sciences mostly in collaboration with other countries.

CONCLUSIONS

Currently limited knowledge about demographics of dementia population in Pakistan from this first registry may be expanded, more registries need to be established in across the country and population based studies should be started.

KEY WORDS

Dementia, Demographics, Karachi.

DEPRESSION AND FUNCTIONAL STATUS IN THE ELDERLY IN KARACHI, PAKISTAN

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OBJECTIVES

To determine the functional status and level of physical activity and their association with depression in the elderly population (age 60 and above) in Karachi, Pakistan.

DESIGN

Cross-sectional, multi-stage cluster sampling

PLACE AND DURATION OF STUDY

Community- all 18 towns of Karachi. 12 months

SUBJECTS AND METHODS

Questionnaire-based interviews were conducted from July to September 2008. Functional status and physical activity were assessed using Activities of Daily Living (ADL) and Physical Activity questionnaires respectively. Depression was evaluated using the 15- item Geriatric Depression Scale (GDS).

RESULTS

Both mean ADL score (9.9 ± 0.2 vs. 9.6 ± 0.2) as well as time spent in physical activity /week (377.3 ± 26.9 minutes vs. 251.7 ± 15.4 minutes) was higher in men than women respectively. Subjects spending more than 310 minutes (>5.2 hours) per week in physical activity were 60% less likely to be depressed compared to those who spent less than 120 minutes (<2 hours) per week (Adjusted OR= 0.4, 95% CI= 0.2-0.7). A one unit increase in ADL score showed a 10% decrease in depression after adjusting for other variables (Adjusted OR= 0.9, 95% CI= 0.8-0.9).

CONCLUSIONS

We found a strong association between depression and time spent in physical activities as well as activities of daily living. Our results indicate the potentially important positive role of physical activity in depression in the elderly in Karachi.

KEY WORDS

Depression, Functional status, Elderly.

RELATIONSHIP OF SENSE OF HUMOR AND MENTAL HEALTH: A COORELATIONAL STUDY

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University of Karachi

OBJECTIVE

The aim of this study was to investigate the relationship between sense of humour and mental health.

DESIGN

Correlational study.

PLACE AND DURATION OF STUDY

Schools and Universities of Karachi.

SUBJECTS AND METHODS

It was assumed that (1) There would be a strong relationship between sense of humour and mental health (2) There would be gender difference in relation to relation to usage of sense of humour for coping with stress (3) There would be a difference in effective usage of sense of humour for coping among school and university. The Research Sample comprised of 72 (N= 72) students of which 36 were males and 36 were females from various Schools their ages ranging from 15 to 19 years and from various Universities their ages ranging from 20-25 years respectively. In this study to measure sense of humour (Multidimensional Sense of Humour Scale (MSHS) (Thorson and F.C. Powell and Brdar, 1997) scale was used and to measure mental health (Mental Health Questionnaire (Bargar, 1996) was used to gather data.

RESULTS

Pearson product-moment correlation coefficients was used for the first hypothesis which showed no relationship between sense of humour and mental health $r = -.028, p < .05$. For the second hypothesis, t-test was used, sense of humour in males ($M= 60.83, SD= 10.574$) was less than in females ($M=61.08,SD= 10.302$), $p > 0.05, t = -.102$. Therefore, it was insignificant. To test the third hypothesis t-test was used sense of humour in school ($M = 65, SD = 6.891$) is more than in university ($M = 56.92, SD = 11.7$), $p < 0.05, t = 3.572$. Therefore, the hypothesis stands confirmed.

CONCLUSION

There is no relationship between sense of humour and mental health while sense of humour in males is less than the females.

KEY WORDS

Sense of humour, Mental health, Gender.

TOWARD A PSYCHOSOCIAL MODEL OF PSYCHOLOGICAL ADJUSTMENT – INVESTIGATING THE ASSOCIATION BETWEEN LOCUS OF CONTROL, SELF ESTEEM AND PERCEIVED SOCIAL SUPPORT

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OBJECTIVE

The present research examines locus of control, self esteem and perceived social support as psychosocial variables assumed to moderate psychological adjustment.

DESIGN

Cross sectional design.

PLACE AND DURATION OF STUDY

The research was conducted during 2012 – 2013 at various schools including special schools as well as vocational centres, hospitals and rehabilitation centres in Karachi.

SUBJECTS AND METHODS

It includes a sample of 200 adolescents including 100 adolescents with disabilities (40 blind, 34 deaf and 26 physically disabled) and 100 adolescents without disabilities. A demographic information form and four self report measures assessing locus of control, self esteem, perceived social support and psychological adjustment were completed by all the participants.

RESULTS

All explanatory variables in the proposed model for the research were found to be significant using regression analysis resulting in the acceptance of the hypothesis [$F_{3,196}=43.388, p<.001$].

CONCLUSION

The final model suggests a strong association between the predictors and the criterion variable with unidirectional effects of self esteem towards psychological adjustment affecting both adolescents with and without disabilities. The results suggest a strong need for developing psychological interventions, based mainly on self esteem along with locus of control and the perception of support, for all adolescents in order to boost their overall adjustment.

KEYWORDS

Adjustment, Disability, Psychosocial model, Psychological interventions.

THE RELATIONSHIP OF COGNITIVE DISTORTIONS WITH PERSONALITY TRAITS IN ADULT UNIVERSITY POPULATION

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OBJECTIVE

The study aims to investigate the relationship of cognitive distortions with personality traits for which following hypotheses were formulated: a) There would be negative correlation between adult's scores on cognitive distortions scale and extroversion and agreeableness factors of personality (b) Positive correlation on cognitive distortions scale and neuroticism factor of personality and (c) Cognitive distortions will predict neuroticism in adults.

DESIGN

Co relational study.

Place and duration of study

This study was carried out from the period of March to June 2014 at the Institute of Clinical Psychology, University of Karachi

SUBJECT AND METHOD

89 students (50 females & 39 males) with age range of 18 to 50 were selected from the University of Karachi through simple random sampling (non-systematic). Participants responded on the ICP Cognitive Distortions Scale-Urdu and Revised Neo-Pir.

RESULTS

Analysis indicates that there is negative correlation between cognitive distortions, extroversion and agreeableness. However, the correlation is weak and is also statistically insignificant i.e. (Extroversion $r=-.048$) and (Agreeableness $r=-.155$). Secondly, there is moderate positive correlation i.e. ($r=.469$) between adult's score on cognitive distortions scale and neuroticism factor of personality. Third, linear regression analysis indicates that cognitive distortions predict neuroticism in adult's i.e. ($R^2=.220, F=24.578, p<.000$).

CONCLUSION

Thus not all cognitive distortions are involved in every psychopathology but cognitive distortions play an important role in the development and maintenance of personality traits and in the development of personality disorders and other psychopathologies.

KEY WORDS

personality traits, cognitive distortions, five factors of personality.

INTERNET ADDICTION AS A PREDICTOR OF LONELINESS, SELF ESTEEM AND SATISFACTION WITH LIFE

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OBJECTIVE

To determine relationship of internet addiction with loneliness, self esteem and satisfaction with life of university students.

DESIGN

Co relational study.

PLACE AND DURATION OF STUDY

The study was carried out at Institute of Clinical Psychology, University of Karachi, Pakistan from January 2013 to January 2014.

SUBJECT AND METHODS

Total 300 (150 males and 150 females) students were selected from the different Universities of Karachi, Pakistan and were requested to fill respondent's profile form and were administered Compulsive Internet Use Scale, Differential Loneliness Scale – short student version, Satisfaction With Life Scale and Rosenberg Self Esteem Scale.

RESULTS

The results through Pearson Product Moment Correlation Coefficient indicates that internet addiction is statistically significantly related with loneliness, self esteem and satisfaction with the life; however Linear Regression makes clear that it is a weak predictor of high loneliness, low self esteem, and low satisfaction with life of university students.

CONCLUSION

As results shows that Internet addiction is related to loneliness, self esteem and satisfaction with life, therefore, in order to prevent it's over involvement there is a need for proper check on the level of behavioral dependency of students on the internet. Training programs can be initiated for students having enough internet exposure, so that they may benefit from this scientific technology for educational and professional purposes and avoid its use for negative activities.

KEY WORDS

Internet Addiction, Loneliness, Self Esteem, Satisfaction with Life.

DETERMINANTS OF PSYCHOLOGICAL WELLBEING IN MOTHERS OF INTELLECTUALLY DISABLED CHILDREN

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OBJECTIVES

The purpose of current study was to investigate the significance of age of children and presence of siblings in determining depression, anxiety and stress in mothers of intellectually disabled children.

DESIGN

Descriptive study.

PLACE AND DURATION

Study was done at Institute of Clinical Psychology in 2013.

SAMPLE AND METHOD

Sample was categorized after screening of mothers on two variables, that is, 1) Age of their intellectually disable children, 2) Number and gender of siblings of their intellectually disable child. On the basis of first criteria, mothers of children with ages between 5 to 13 years were selected; among them 28 were mothers of children with ages 5-7 years, 22 were mothers of children with ages 8-10 years, while 28 were mothers of children with ages 11-13 years. While on the basis of second criteria, sample of mothers was categorized as having only child (N=18), mothers having only female children other than intellectually disabled child (N=25), and mothers having both male and female children other than intellectually disabled child (N=35). The age range of the mothers was 25-45 years (Mean Age=36.59, with SD=6.97). Semi structure interview was conducted with participants to find out the history of problems, demographic form was filled and then Depression, Anxiety and Stress Scale was administered. Statistical analysis was done by using SPSS, 12.

RESULTS

The results indicate that there is significant difference among three groups, i.e. 1) mothers having only child, 2) mothers having daughters only other than the intellectually disabled child, and 3) mothers having both male and female children other than the intellectually disabled child, on the variables of depression, anxiety and stress ($F(2, 75) = 18.794, p < .001$; $F(2, 75) = 41.924, p < .001$; $F(2, 75) = 6.603, p < .002$ respectively). Further findings reported that there is significant difference among age groups on the variables of depression and stress ($F(2, 75) = 4.517, p < .014$; $F(2, 75) = 12.780, p < .001$ respectively), however difference on variable of anxiety was found insignificant ($F(2, 75) = .720, p > .05$) among mothers of intellectually disabled children.

CONCLUSION

It is concluded that mother having only intellectually disable child, mother having daughters only other than the intellectually disabled child and mothers having both male and female children other than the intellectually disabled child perceived significant difference on depression, anxiety and stress related disorders. Further implications and limitation were discussed.

Key words

Depression, Anxiety, Stress, Age, Children, Mothers, Intellectual disability.

LIFETIME PREVALENCE OF EMOTIONAL/PSYCHOLOGICAL ABUSE AMONG QUALIFIED FEMALE HEALTHCARE PROVIDERS

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Aga Khan University, Karachi, Pakistan

OBJECTIVE

The purpose of this study was to determine the lifetime prevalence of emotional/psychological abuse among married female healthcare providers in tertiary care hospitals in Karachi, Pakistan.

DESIGN

Descriptive cross-sectional study.

PLACE AND DURATION OF STUDY

Tertiary care hospitals of Karachi.

SUBJECTS AND METHODS

This study was conducted on in a sample of 350 married female nurses and doctors, recruited from three tertiary healthcare hospitals (one public and two private). This study used the self administered modified truncated WHO Multi-country questionnaire. Descriptive and univariate analysis was performed.

RESULTS

Of the total sample of 350 female married healthcare providers, 97.7% (n= 342) were reported with one or more forms of domestic violence at some point in their married life, whereby 62.6% (n=214) lifetime prevalence of emotional abuse was found due to any form of violence. The univariate analysis showed that those female healthcare providers who had done their diploma were more prone to emotional abuse 46.7% (n=100). And, nurses experienced more emotional abuse (57.9%) in their life than doctors. Moreover, there was a significant difference of emotional abuse among those participants' husband who used and do not use alcohol (p=0.009). The most common study participants responses against emotional abuse were: 62% (n=212,) verbally fighting back, 15.2% (n=52) keeping quiet, 27.2% (n=93) talking to husband, family/friends, 7% (n= 24) returning to parents' home and 5.8% (n=20) attempting suicide.

CONCLUSIONS

Domestic violence leads to emotional scars and should be considered as an inhuman act. However, its prevalence exists in every culture and more so in underdeveloped, economically challenged cultures. Emotional abuse is frequent among nurses and doctors. Socio-demographic factors of women have been identified as one of the determinant of emotional abuse among healthcare professionals. Future research should investigate emotional abuse patterns in not only for professional women but also for housewives.

KEY WORDS

Domestic violence, healthcare providers, intimate partner violence, emotional abuse.

FEASIBILITY STUDY OF A CULTURALLY ADAPTED COGNITIVE BEHAVIOR THERAPY FOR PSYCHOSIS IN A LOW INCOME COUNTRY

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OBJECTIVE

To study the feasibility of culturally adapted cognitive behaviour therapy for psychosis in low income country.

DESIGN

Randomized controlled trial.

PLACE AND DURATION OF STUDY

Karachi, Pakistan in 2014.

SUBJECTS AND METHODS

Patients with a Structured Clinical Interview for DSM-IV (SCID) diagnosis of psychosis were eligible for the study. Further assessments were completed by using Positive and Negative Syndrome Score (PANSS), PSYRATS (Psychotic Symptom Rating Scales), and the Insight Scale. Participants were randomized into either Culturally adapted CBT group (n = 18) or TAU group (n= 18). Participants in the Culturally adapted CBT group received 12 weekly sessions of manual assisted culturally adapted CBT for psychosis.

RESULTS

There were no significant differences between the two groups at baseline. At three months follow up there was a significant improvement in the Culturally adapted CBT group on PANSS general Psychopathology subscale, PANSS overall score and Insight scale compared to the TAU group. Culturally adapted CBT group had lower scores on PANSS positive, PANSS negative, and two subscales of Psychotic Symptom Rating Scale as compared to TAU group but differences were not statistically significant.

CONCLUSION

Culturally adapted CBT added to routine pharmacological treatment was acceptable to patients and was helpful in reduction of severity of symptoms. Adjunctive culturally adapted CBT should be further investigated in this population.

KEY WORDS

Cognitive behaviour therapy, Culture, Psychosis.

GROUP INTERPERSONAL PSYCHOTHERAPY FOR MATERNAL DEPRESSION: AN EXPLORATORY RCT

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OBJECTIVE

This study aimed to assess the feasibility of interpersonal Psychotherapy (IPT) intervention for maternal depression in Karachi, Pakistan.

DESIGN

Randomized controlled Trial.

PLACE AND DURATION OF STUDY

Karachi Pakistan, in 2014.

SUBJECTS AND METHODS

A total of 50 mothers were recruited aged 18 years and above with a child below 3 years of age, and with mild to moderate depression. Participants were randomly allocated to either IPT or Treatment as Usual (TAU) group. Edinburgh Postnatal Depression Scale (EPDS) was used to assess severity of depression at baseline, 3-months (end of intervention and 6-months after baseline. Patient Health Questionnaire (PHQ-9) and Generalized Anxiety Disorder (GAD-7) were also administered. Total 12 sessions of IPT were delivered to 25 participants in three groups. The culturally adapted IPT intervention comprised of a supportive element, an educational element, parenting element and an interpersonal relationship element.

RESULTS

Indicated that there was a significant difference between the two groups on EPDS at the end of intervention.

CONCLUSION

Interpersonal therapy may be useful psychological intervention to address maternal depression in Pakistan.

KEY WORDS

Group interpersonal psychotherapy, Maternal depression, Patient health questionnaire.

Substance Abuse And Dependence

OPIOID ADDICTION: AN ILLNESS OF PRODUCTIVE AGE GROUP

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OBJECTIVE

To determine the distribution of gender and age group among opioid addicts along with their employment and income status reporting to psychiatry department of a tertiary care Public sector Hospital.

DESIGN

Cross-Sectional Study.

PLACE AND DURATION OF STUDY:

Department of Psychiatry & Behavioral Sciences, Jinnah Postgraduate Medical Centre, Karachi, from August 2012 to February 2013.

SUBJECTS AND METHODS

This study comprised of 157 subjects from either gender who fulfilled the criteria of ICD-10 for the diagnosis of Opioid addiction. Both out as well as inpatients aged 12 years and above were included in the study. Patients suffering from florid psychotic symptom (s) or any organic brain disorder were excluded. Subjects fulfilling inclusion criteria were enrolled after informed consent. A semi structured Proforma consisting of demographic details and a questionnaire was used to collect the data. Stratification was done with regard to age group and gender to see the impact of these on the outcome.

RESULTS

The mean \pm SD age of respondents was 31.83 ± 8.99 years with range of 14-57 years. The mean \pm SD age of onset of using opioids was 25.79 ± 7.17 years. Youngest age of onset was 13 years while eldest age to start using opioids was found to be 40 years. The mean \pm SD duration of using opioids among these patients was 5.29 ± 3.72 years (Range: 1-20 years). Almost 90% were under the age of 45 years. Majority of the samples were male (94.3%), females were only 5.7%. Nearly half (47.8%) of opioid users were unemployed. Monthly income from an employment or from other sources was below 6000 rupees in about 30%.

CONCLUSION

Opioid addiction appears to be high among subjects below 45 years of age, which is considered as the productive age for either sex. Productive age group needs special attention and guidance to deal with this menace. Employment status and hence the income are also adversely affected by the opioid addiction.

KEY WORD

Opioid Addiction, Illness, Productive age group.

PILOT PROJECT TO STUDY THE EFFICACY OF BUPRENORPHINE IN INJECTING DRUG USERS IN PAKISTAN

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OBJECTIVE

To determine the effectiveness of oral substitution therapy with Buprenorphine in Injectable drug Users (IDUs).

DESIGN

Interventional study.

PLACE AND DURATION OF STUDY

This study was conducted at the Institute of Psychiatry, Benazir Bhutto Hospital, Rawalpindi from January, 2012 to December, 2012.

SUBJECTS AND METHODS

Patients with opioid dependence meeting the inclusion criteria were recruited for the study. After a 2 week period of symptomatic treatment, patients were put on sublingual buprenorphine (2-24mg daily). Follow ups were planned to monitor improvement, compliance, relapse, and side effects. Quantitative as well as qualitative assessments were carried out at 3, 6, 9 and 12 months follow up. Data was then analyzed using a software SPSS-14.0. Analysis of variance was also used to test the difference between the results at different point of time.

RESULTS

A total of 121 participants were included in the study. Almost all of the patients were male and majority belonged to the age group of 26-35 years. 58.7% of the study population had co-morbid medical disease. The participants showed a marked improvement in all domains of Addiction Severity Index (ASI). There was also a significant improvement in the quality of life of the patients as measured by WHO-QOL BREF before and after treatment with buprenorphine..

CONCLUSIONS

Oral Substitution Therapy (OST) is a widely accepted means of harm reduction in patients with opioid dependence. Our study showed that treatment with sublingual buprenorphine resulted in marked improvement in the quality of life of the participants as well as a decrease in the addiction severity of other agents. We hope that this study might be replicated on a larger population and that OST might be incorporated as a treatment in the substance abuse centers across the country.

KEY WORDS

Buprenorphine, Injecting drug user, Oral substitution therapy.

SOCIO-DEMOGRAPHIC CHARACTERISTICS OF SUBSTANCE ABUSERS INCLUSIVE OF HIV POSITIVE ADMITTED IN MODEL DRUG ABUSE & TREATMENT CENTER, DHQ HOSPITAL, FAISALABAD, PAKISTAN

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OBJECTIVE

This study was undertaken with an objective of collecting basic data to assess the extent and variety of drug abuse in patients presenting to the model drug abuse and treatment center, DHQ hospital, Faisalabad as per social and demographic circumstances.

DESIGN

cross sectional study.

PLACE AND DURATION OF STUDY

The study was conducted in the indoor Department of Model Drug Abuse Treatment Centre of Department of Psychiatry and Behavioural Sciences, DHQ Hospital, Faisalabad from Jan-2014 to March-2014.

SUBJECTS AND METHODS

80 patients dependent on different drugs were participated in this study through purposive convenient sampling technique. Personal, Social, and Demographic variables were recorded on a demographic sheet. The results were obtained by using SPSS 17.

RESULTS

Descriptive statistics show that 31 patients (38.8%) were HIV positive. Most of the patients were males (97.5%), between 30 to 35 years of age (28.8%), married (61.3%), lived in urban areas (55%), were illiterate (32.5%), had primary level education (21.3%), or middle level education (22.5%). 51.3% patients were labourers.

CONCLUSION

As illiteracy, low education, unemployment, labour as profession, and peer pressure are the key features of drug abusers. So, parents, health professionals, and state personals should take these as risk factors and focus upon these population segments to spread awareness and take measures of control to minimize the incidence of substance abuse.

KEY WORDS

HIV positive, Socio demographics, drug dependence, addiction, substance abuse.

Suicide and deliberate self harm

THE AGA KHAN UNIVERSITY DSH MONITORING STUDY (AKU-DSH): 10-YEAR EXPERIENCE

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Dept. of Psychiatry, Aga Khan University, Karachi, Pakistan

OBJECTIVE

To collect data regarding suicide and deliberate self-harm in a teaching hospital of Karachi.

DESIGN

Retrospective review of medical charts

PLACE AND DURATION OF STUDY

Aga Khan University Hospital (AKUH). 1990-2014

SUBJECTS AND METHODS

At the Aga Khan University Hospital (AKUH), a 500-bedded teaching hospital located centrally in Karachi (pop. approx. 18 million) a monitoring system was set up to record data of all DSH cases presenting to the hospital. Of the approximately 5000 cases that presented to the emergency room (ER) about 1533 were admitted to the hospital, while the rest were either discharged from the ER or left against medical advice. Data is presented on all the admitted cases.

RESULTS

Of the admitted cases 61% were women, the majority of whom were married (51%). 22% cases had made at least one previous attempt. Ingestion of benzodiazepines was the most common method in both genders, followed by organophosphate insecticides. In almost 60% of cases, the medications were present in the house. 10 patients died following complications of the DSH act, while only about a quarter attended for follow-up, though almost all were advised to do so. Interpersonal relationship problems, family conflicts and financial difficulties were the most common reasons cited. About 35% were diagnosed with clinical depression, followed by acute stress and/or adjustment disorder.

CONCLUSIONS

Our results show that young married women are particularly vulnerable to suicidal behavior in Karachi, Pakistan. The easy over-the-counter availability of benzodiazepines appear to contribute to their high usage in DSH. Establishing a system for monitoring DSH cases in health facilities is useful, particularly in low income country settings where there is absence of a centralized national data collection system. However it is important the data is captured in such a manner that the information can be used for analytical- epidemiological studies of high risk groups and changes in those characteristics over a period of time.

KEY WORDS

Suicide, Deliberate self harm (DSM), Pakistan.

THE IMPENDING SUICIDAL INTENT IN DEPRESSED PATIENTS COMING TO DEPARTMENTS OF PSYCHIATRY LUMHS, SCJIP, HYDERABAD AND DHQ HOSPITAL/ PMC FAISALABAD.

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OBJECTIVES

To assess the prevalence of impending suicidal intent among depressed patients coming to Departments of Psychiatry LUMS, SCJIP, Hyderabad and DHQ Hospital/ PMC Faisalabad.

DESIGN

Cross Sectional Study.

PLACE AND DURATION OF STUDY

The study was conducted in six months from 1st April 2014 to 30th September 2014 at Psychiatry Department Liaquat University of Medical & Health Sciences & Sir Cowasjee institute of Psychiatry & Department of Psychiatry and Behavioral Sciences, Faisalabad.

SUBJECTS AND METHODS

A total of 150 patients have been included in this study having depression, diagnosed via ICD-10 Criteria, 75 each from respective departments have been recruited who met the inclusion criteria.

RESULTS

Out of 150 participants, medium suicidal intent was found to be highest 41.3%, high suicidal intent was 26.7% & low suicidal intent was 10.6%. Moderate Depression that is 58% was found in most of patients, severe depression was found 37.3% and mild depression in 4.7%. The mean age was between 31-40 years, predominantly females' 59.3% approaches as compared with males that is 40.7%. Among them 50% were married, 24% were housewives and 24% were student. Suicidal intent was found to be high in middle socioeconomic group and more in nuclear family system (56%) than Joint family system (44%).

CONCLUSION

Prevalence of Suicidal intent predominates in moderate depression, in married females especially housewives belonging from middle socioeconomic background and nuclear family system.

KEY WORDS

Suicide, Suicide Intent, Depression.

SOCIODEMOGRAPHIC PROFILE AMONG PATIENTS WHO HAVE DEPRESSION WITH SUICIDE INTENT PRESENTED AT DEPARTMENTS OF PSYCHIATRY LUMHS, SCJIP, HYDERABAD AND DHQ HOSPITAL/ PMC FAISALABAD.

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OBJECTIVES

To see the Socio demographic profile among patients who has Depression with current suicide Intent coming to Departments of Psychiatry LUMS, SCJIP, Hyderabad and DHQ Hospital/ PMC Faisalabad.

DESIGN

Cross Sectional Study.

PLACE AND DURATION OF STUDY

The study was conducted in six months from 1st April 2014 to 30th September 2014 at Psychiatry Departments Liaquat University of Medical & Health Sciences (LUMHS) & Sir Cowasjee institute of Psychiatry and Department of Psychiatry and Behavioral Sciences, Faisalabad.

SUBJECTS AND METHODS

A total of 117 patients have been included in this study having Depression currently having suicidal Intent. They are taken from respective departments who met the inclusion criteria.

RESULTS

Out of 117 depressed patients with suicidal intent, predominantly females 59% approaches to psychiatry ward as compared with males that is 40%. Among patients 56% were married, 28% were housewives and 28% were student. Most of them have educational status graduation and masters. Mean age was between 31-40 years, Higher in middle socioeconomic group and more in nuclear family system (56%) than Joint family system (43%). Most of them have no social support 51.3%. 61 (52%) were taking drug of abuse and 96 (82%) patients currently taking treatment for Depression or Anxiety. 66 (56.4%) depressed patients with suicidal intent had Past psychiatric history, in which 32 showed medium and 25 patients showed severe suicidal intent. 67 (57%) patients had positive family psychiatric history with high current suicide intent. 51.2% patients had past history of suicidal attempt most of them had high suicide intent presently. 59 out of 117 patients had suicidal ideation; among them 24 had medium and 32 had high suicide intent. Although Family history of suicide was positive in 36 (30.7%) cases but it was high in patients with medium and high suicidal intent; 29 and 26 respectively.

CONCLUSION

Prevalence of depressed population with suicidal intent predominates in students, married females especially housewives belonging from middle socioeconomic background and nuclear family system. Most of patients used drugs of abuse. Past psychiatric history, family psychiatric history, past history of suicide, family history of suicide and suicidal Ideations has direct relationship with current suicide Intent.

KEYWORDS

Socio-demographics, Depression, Suicide intent.

SUICIDE IN ISLAM: FACT OR ARTIFACT?

MURAD M KHAN

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OBJECTIVES

To understand whether suicide happens in Islam and if so, what is the extent of the problem.

DESIGN

Literature review.

PLACE & DURATION OF STUDY

Dept. of Psychiatry, Aga Khan University. One year

SUBJECTS AND METHODS

Review of literature on suicide in Islam and suicide in Islamic countries by databases searches.

RESULTS

Suicide occurs in almost all Islamic countries, though very few collect national suicide data or report their mortality statistics on suicide to the World Health Organisation. The strong Islamic proscriptions have had a potent deterrent effect against suicide, which is reflected in relatively low rates in Islamic countries, compared to non-Islamic countries. This effect is independent even when socioeconomic development, education and other population characteristics are controlled. The strong condemnation of suicide and prohibition on alcohol are thought to be factors that contribute to low rates in Islamic countries. However, it is observed that in recent years, suicide rates in a number of Islamic countries such as Pakistan, Iran, Turkey and Bangladesh have been gradually increasing.

CONCLUSIONS

Suicide occurs in almost all the 57 countries with majority Muslim countries of the world. Though suicide rates are generally low in Muslim majority countries compared to non-Muslim countries, the rates may not be as low as previously believed. In the face of adverse social and economic conditions, Islam may be losing some of its historical deterrent effect. There is need for further study in this area.

KEY WORDS

Suicide, Islam, World Health Organization.