

Major depressive disorder among caregivers of persons with schizophrenia

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Summary

Presence of someone with schizophrenia in the home, especially after deinstitutionalization, can affect the work and social life of family members or the caregivers. This study was conducted to evaluate depression among caregivers of patients suffering from schizophrenia. This was a cross sectional study carried out in the department of psychiatry at North Bengal Medical College Hospital (NBMCH), Sirajganj, Bangladesh, during the period of January 2016 to June 2017 among purposively selected 50 respondents who were the primary caregivers of persons with schizophrenia attended the psychiatry outpatient department (OPD) of NBMCH. Mean age of the respondents was 38.98 (± 12.42). Majority were from the age group of 41-50 years (28%) and 31-40 years (24%). Among the respondents, 58% were female and 42% male. Most of them were married (72%), muslim (74%), completed primary level of education (32%), house wife (46%) and of rural background (70%). Among them, 44% suffered from Major Depressive Disorder. This study reflects that significantly higher rate of caregivers experienced depression. So we should pay attention to not only the persons with schizophrenia but also those who are giving care to them.

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Introduction

Schizophrenia is a heterogeneous syndrome that includes disturbances in language, perception, cognition, social relatedness, and volition.¹ The lifetime prevalence of schizophrenia has generally been estimated to be approximately 1% worldwide.² In Bangladesh the prevalence of schizophrenia is 0.6%.³ Early onset of the illness, persistence of symptoms in the long run and chronic relapsing course of schizophrenia has far-reaching consequences for both the patients with schizophrenia and their relatives. Due to the illness, the patients may have diminished capacity for social relationships, they may not be able to take care of themselves and their day-to-day needs, and face reduced employment opportunities and if employed, may be less productive. The illness thus hampers independent living and may lessen life satisfaction. Family members of patients with schizophrenia are often confronted with uncertainty about the course of the illness, lack of reciprocity in relationship with the patient and the trepidation of unpredictable symptoms.⁴ Therefore the presence of someone with schizophrenia in the home, especially after deinstitutionalization, can affect the work and social life of family members or the caregivers.⁵ Caregiver burden in mental illness can either be objective or subjective. Objective burdens are negative symptoms; caregivers' lives are disrupted in terms of domestic routine, social activities and leisure, social isolation, financial difficulties and employment difficulties. Subjective burdens comprise emotional strain on caregivers, e.g. fear, sadness, anger, guilt, loss, stigma and rejection. Caregiving in patients with schizophrenia is an enormous task and most caregivers seem to be unprepared for the longitudinal course and duration of an illness like schizophrenia.^{6,7} No wonder the caring relatives often experience grief and have to cope with stigma and social isolation, which leaves them with a feeling of shame, embarrassment or guilt. Thus, the illness leads to considerable emotional, financial and real world demands on those close to the sufferer, typically the parents or the spouses. Moreover, studies have shown that caregiving frequently leads to psychiatric morbidity, neglect of health of self and higher risk of mortality.^{8,9} Caregivers of the patients with psychiatric illnesses such as schizophrenia have significant high level of depression. The commonest variables related to depression among caregivers were gender, socio-economic status, marital status, family size, education, relationship with the patient and the burden of care.^{10,11} The objective of this study was to determine the prevalence of major depressive disorder among caregivers of persons suffering from schizophrenia.

Materials and methods

This was a descriptive cross sectional study, carried out in the Department of Psychiatry, North Bengal Medical College Hospital (NBMCH), Sirajganj from January, 2016 to June, 2017. A total of 50 primary caregivers of persons with schizophrenia were selected as respondents by convenient sampling technique. Primary caregiver was defined as an adult relative living with the person with schizophrenia, in the same environment, for at least 12 months and was involved directly in giving care to the patient and most supportive either emotionally or financially, i.e. felt most responsible for the patient.^{12,13} A semi-structured questionnaire was prepared to determine socio-demographic characteristics such as age, sex, marital status, economic status, social background etc. Major depressive disorder was diagnosed by using Bangla version of Structured Clinical Interview for Diagnostic and Statistical Manual IV Axis I disorders– non-clinician version.¹⁴ Ethical issues were maintained properly. Data were analyzed using Statistical Package for Social Sciences (SPSS), version 15.0 for Windows.

Results

In this study, majority of respondents were from the age group of 41-50 years (28%) and 31-40 years (24%) with the mean age of 38.98 (\pm 12.42) years (Table 1). Female were more (58.0%) than male. Most of them were married (72.0%) and came from rural area (66.0%). Maximum respondents were Muslim (74.0%). Regarding occupation, housewives were highest in number (46.0%) (Table 2).

Table 1: Distribution of the respondents according to age (n=50)

Age (in years)	Frequency	Percentage (%)
Up to 20	2	4
21-30	11	22
31-40	12	24
41-50	14	28
51-60	8	16
61-70	3	6
Mean (\pm SD)	38.98 (\pm 12.42)	

Table 2: Distribution of the respondents according socio demographic variables (n=50)

Variables	Frequency	Percentage (%)
Sex		
Male	21	42
Female	29	58
Religion		
Muslim	37	74
Hindu	13	26
Residence		
Rural	33	66
Urban	17	34
Marital Status		
Married	36	72
Unmarried	14	28
Education		
Illiterate	10	20
Primary	14	28
Secondary	7	
SSC	11	22
HSC	3	6
Graduation and above	5	10
Occupation		
Service	10	20
Business	5	10
Farmer	6	12
Housewife	23	46
Student	2	4

Most of the caregivers were spouse (34%), followed by parents (24%), children (22%) and siblings (20.0%) (Fig 1). The duration of giving care to the respondents was ranged from 1 to 10 years with the mean duration of 3.93 (\pm 2.33) years (Fig 2). Major depressive disorder was found among 44% of the caregivers (Fig 3).

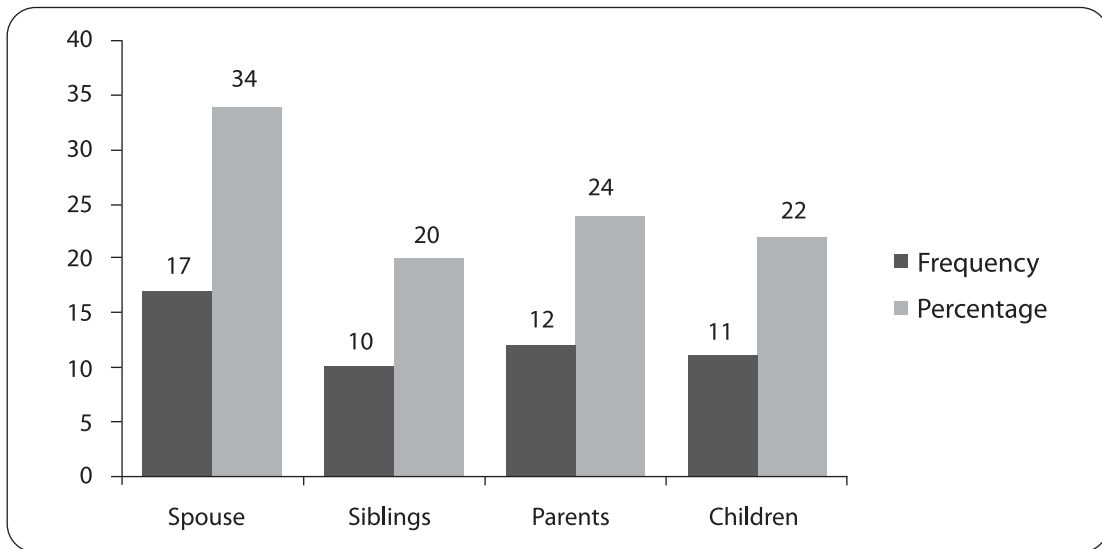


Figure 1: Distribution of caregivers according to relationship with the patients (n=50)

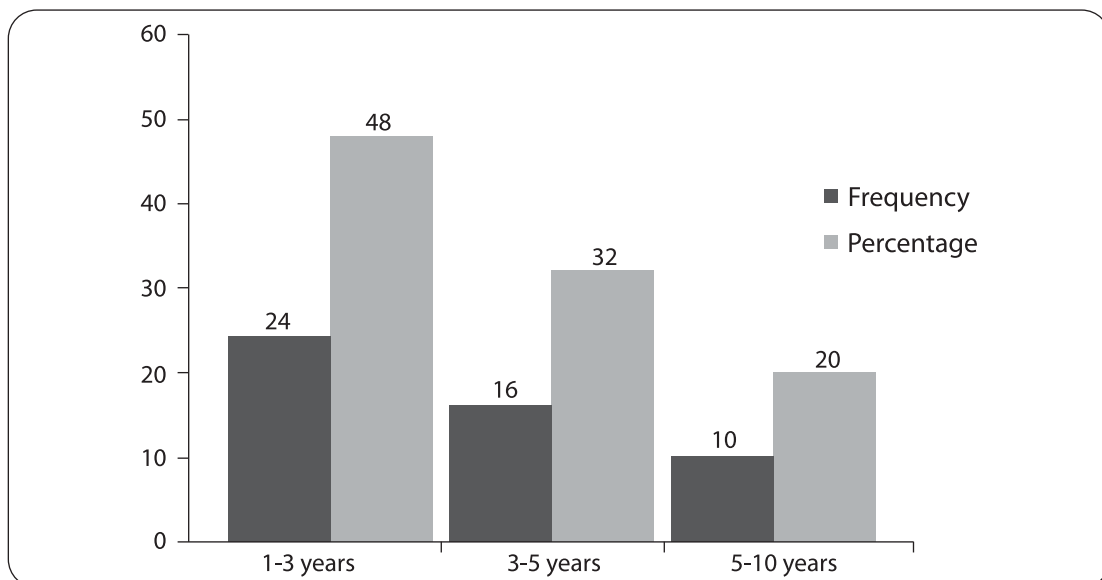


Figure 2: Distribution of caregivers according to duration of giving care (n=50)

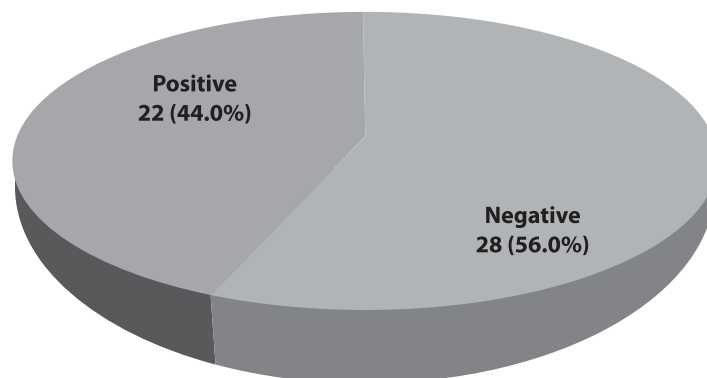


Figure 3: Distribution of respondents by major depressive disorder

Discussion

In our study, we found that majority of the respondents were from the age group of 41-50 years (28%) and 31-40 years (24%) with the mean age of 38.98 (± 12.42) years. This is consistent with another study, where most of the caregivers were aged above 35 years.¹⁵ In the present study there was 21 (42%) male and 29 (58%) female. This is similar with the result of some studies where majority respondents were female.^{7,18} Male predominance of caregivers of patients suffering from schizophrenia was reported in other study.¹⁵ In our society house hold works are mostly done by female and outdoor works mostly by male. This may be the cause that, female caregivers are more common in this study. In our study 34% respondents were in the middle class and 66% were in the lower class of socioeconomic status. This may be due to the fact that people of poor socioeconomic condition constitute the major bulk of the population in Bangladesh and our place of study was in a district level of north bengal region. This may be the cause of more poor class in this study. This result was correlated with another study where 51.6%, caregivers were in low socioeconomic group.⁵ In the present study 72% caregivers were married and 28% were unmarried; Caregivers were aged person in this study and the mean age was about 39 years. Aged person are mostly married in our society which may be the cause of more married caregivers in this study. Most of the caregivers in this study were spouse (34%). In a Nigerian study, parents were the most common caregivers.¹⁷ In our study we have found, 44% caregivers were suffering from major depressive disorder. One study conducted by Singh and De Sousa found that mild to severe depression was in 65% of the caregivers.⁷ Magana et al examined the relation between caregivers' mental health and perceived burden and stigma and characteristics of the patient and caregiver. Interviews were conducted in Wisconsin, California and Texas with 85 Latinos caring for an adult person with schizophrenia. They found 40% caregivers met the standard CSE-D cut off score of 16 or higher, which classifies individuals as having elevated levels of depressive symptoms.¹¹ Another study conducted in the University Psychiatry Unit of the National Hospital of Sri Lanka (NHSL) to identify symptoms of caregivers' depression and they found 37.5% caregivers of persons with schizophrenia were suffering from depression.¹⁶ A study done in KSA found that depressive disorders were higher among caregivers (18.33%) of persons with schizophrenia than control group (3.33%) ($p < 0.05$),⁵ whereas in another study, researchers have found that 5% caregivers of schizophrenic patients had major depressive disorder.¹⁹ In a Bangladeshi study, 22.43% of the caregivers of persons with schizophrenia were suffering from different types of mental disorders. Among them, major depressive disorder was most prevalent (11.8%).¹⁸ In another study, researchers have reported that 56% caregivers scored positively for depressive symptoms.²⁰ Caregivers of persons with schizophrenia are to face plethora of difficulties which includes financial burden, role burden, physical burden, time burden and emotional burdens. Stigma attached to schizophrenia also played an important part in the high prevalence of depression in the present study.

Conclusion

In our study, we found that caregivers experienced significantly higher rate of depression Active assessment of depression in the caregiver of patients suffering from schizophrenia is crucial. Care to the caregiver is also very important to get better service for the patients with schizophrenia. Further study involving multicenter and large scale need to be conducted to evaluate depression among caregivers of patients suffering from schizophrenia.

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