



STUDY TO FIND OUT THE PREVALENCE OF PSYCHIATRIC PROBLEMS IN GERIATRIC AGE GROUP IN URBAN AREA OF LUCKNOW CITY

Sanjay Khanna¹, Pratap Shankar^{2*}, Raj Kumar Goel¹, Amod Kumar Sachan², Rakesh Kumar Sachan²

¹Department of Pharmacology, Hind Institute of Medical Sciences, Safedabad, Barabanki, UP, India.

²Department of Pharmacology & Therapeutics, King George's Medical University, Lucknow, UP – 226003, India.

ABSTRACT

Present cross sectional study was done to find out the psychiatric problems in elderly persons living in urban areas. Elderly are prone for various types of psychosomatic disorders due to inherent and environmental factors. Common psychiatric illnesses found in geriatric age group in this study are depression, adjustment disorders, anxiety disorders and panic disorders etc. High prevalence in geriatric patients needs special attention to improve their overall health statuses.

Key words: Geriatric, Psychiatric Illness, Urban.

INTRODUCTION

Life expectancy has been increasing leading to increase in geriatric population throughout the world. As the person becomes older he/she becomes more prone to develop various disorders due to continuous changes occurring within the body [1]. Moreover, elderly becomes less productive in terms of monetary-earnings, thus become prone to be neglected by the family. Co-existing physical illnesses, disability, diminished physical activity, along with the chances of mental deprivation lead to high chance of psychiatric problems. In addition to this, the brain due to ageing process becomes more vulnerable for dementia, depression, Alzheimer's disease and other psychiatric illnesses [2]. Diagnosing and treating older patients presents more difficulties than their counter younger persons, because older people may have co-existing chronic illnesses, may be getting multiple medications and may have reduced physiologic reserves. Prevalence of dementia increases steeply with age and is worsened by cerebrovascular diseases. Depressive symptoms are present in about 15% of geriatric population. Prevalence further increases along with age. Severe depression may be the precipitating cause for suicidal attempt. If not diagnosed correctly, depression in elderly may be confused with dementia and /or schizophrenia. Geriatric population is also prone for

delusions which may be precipitated by adverse circumstances and co-morbid severe medical illnesses. Anxiety disorders, including phobia and stress disorders are also increased in elderly. All these psychiatric disorders are further worsened by the deprivation or disturbance of sleep. Sleep related problems are also common in elderly. A galore of studies has been done to find out the prevalence of various psychiatric disorders in general population. However, very few studies have been done to find out the prevalence of psychiatric disorders in geriatric population. Therefore, present study was done to find out the prevalence of psychiatric disorders amongst geriatric population of urban areas[3-4].

METHODOLOGY

Study was short duration (of two months) and cross sectional. Ten physicians from various parts of the city were selected for the study. All these physicians were catering mainly the urban population. Elderly patients (>60 years of age) coming to physician for any reason were requested to give the responses for 'self made questionnaire with 20 points'. Before asking questions, consents from patients were taken. The questionnaire compiled of questions related to demographic data, abnormality of emotions, behavior, relationships, sleep etc [5].

*Corresponding Author: Pratap Shankar E mail: pratap.mbi@gmail.com

A total of 137 elderly (age>60 yrs) were interviewed. Age-wise distribution of patients interviewed and having symptoms suggestive of psychiatric disorder used in follow-on [6].

CONCLUSION

Present study further emphasizes that elderly are not only at risk of somatic illnesses due to natural ageing process but also they have increased risk for development of psychiatric illnesses due to associated circumstances. As the person becomes old, his/her physiologic processes

become limited and usually the person harbors multiple co-existing illnesses including cardiovascular, rheumatic and neurologic diseases. The medications which are given for treatment of these ailments may also have propensity to precipitate psychiatric disorders. Due to all these factors, i.e. increased prevalence of psychiatric illnesses, limited metabolic capacity of older people, chances of poly-pharmacy, elderly need special personalized consideration. Physicians should be sensitized for history taking and care of elderly regarding psychiatric illnesses whenever patient comes to them.

REFERENCES

1. Seitz D, Purandare N, Conn D. Prevalence of psychiatric disorders among older adults in long term care home: a systematic review. *Int Psychogeriatr*, 22(7), 2010, 1025-39.
2. Giordana JY, Roelandt JL, Porteaux C. Mental health of elderly people: the prevalence and representations of psychiatric disorders. *Encephale*, 36(3), 2010, 59-64.
3. Rabins PV, Black B, German P, Roca R, McGuire M, Brant L, Cook J. The prevalence of psychiatric disorders in elderly residents of public housing. *J Gerontol A Biol Sci Med Sci*, 51(6), 1996, M319-24.
4. Katona C, Livingston G. Impact of screening old people with physical illness for depression. *The Lancet*, 356, 2000, 91.
5. Cohen GD. Mental health promotion in later life: the case for "the social portfolio". *The American Journal of Geriatric Psychiatry*, 3, 1995, 277-279.
6. Livingston G, Hawkins A, Graham N, Blizard B, Mann A. The Gospel Oak Study: prevalence rates of dementia, depression and activity limitations among elderly residents. *Psychological Medicine*, 20, 1990, 137-146.