

Depressive Disorder Among Child And Adolescent Patients Attending Psychiatry OPD at Nepalgunj Medical College, Kohalpur

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ABSTRACT

BACKGROUND: Depression is one of the common psychiatric problem among child and adolescents especially during the peri pubertal stage. It is found to be more common in females than males. Poor and unhealthy family atmosphere, family dispute, broken family, parents working abroad, physical abuse are few of the causes of childhood depression. Signs and symptoms of childhood depression may present with vague and atypical physical symptoms as compared to adults. **Methods:** This is a descriptive study done in patients attending psychiatry OPD of Nepalgunj Medical College, Kohalpur for the period of six months from July to December 2015. **Results:** Out of 245 patients, 142(57.9%) patients were diagnosed as depressive disorder. Rest of the pediatric patients 103(42.1%) attending the psychiatry OPD were of seizure disorder, bipolar disorder, conversion disorder, mental retardation, adjustment disorder etc. There were 88(62%) females and 54(38%) male patients showing the majority of patients as females. The most common age group involved in the study population was 11-14 years 116(81.7%) followed by 6-10 years age group 23(16.2%) and up to 5 years 3(2.1%) respectively. **Conclusion:** Depression is quite common in pediatric population mostly during the peripubertal stage. It is seen most frequently in females.

Key words: Child and adolescent, depressive disorder, Nepalgunj Medical College

INTRODUCTION

Mental problem is very common but stigmatized medical and social problem worldwide. Mental disorders are not exclusive preserve of any special groups; they are truly universal. Mental and behavioral disorders are found in people of all regions, countries and all societies¹.

Mental problem is equally common in children and adolescents. Child has been divided into two phases: preschool child (3-6 years), school age child (6-12 years). Similarly adolescence is divided into early (10-13 years), middle (14-16 years) and late (17-20 years)².

The overall prevalence of depressive disorder in United States among 3-17 year old children is 2.1%. The male: female ratio is 1:1 during childhood and beginning in early adolescence rises to 1:1.5-3.0 in adulthood. Major depression may first appear at any age, but the likelihood of onset increases markedly with puberty³. Some study also shows poor and unhealthy family atmosphere causing more chance in adolescents to suffer from greater academic problems, depression, suicidal thoughts,

substance abuse and more sexual activity⁴. Signs and symptoms of childhood depression may present with vague and atypical physical symptoms as compared to adults.

The national prevalence study of United Kingdom found that almost one child in 10(9.5%) aged 5-15 years had psychiatric disorders based on ICD-10 (International Classification of Disease, 10th edition) classification system. Prevalence was higher in adolescents (11.2% at 11-15 years) than in children (8.2% at 5-15 years), and in boys (11.4%) than in girls (7.6%)⁵. Worldwide, it has been estimated that about 10-20% of children and adolescents suffer from mental problems⁶.

In developing country like Nepal, child and adolescent psychiatric problems are often neglected as there is no child psychiatrist and very few numbers of psychiatrists available at western part of Nepal. Also there is lack of awareness regarding child mental health among medical practitioners and other health care workers. Studies regarding depressive disorder among child and adolescent patients is very few from the western part of Nepal.

This study aims to show the prevalence and sociodemographic profile of child and adolescent depressive disorder from Tertiary care center from Western region of Nepal.

MATERIAL AND METHODS

This is a descriptive study done in patients attending psychiatry OPD of Nepalgunj Medical College, Kohalpur for the period of six months from July to December 2015. All new pediatric patients who presented at Psychiatry OPD, those referred from Pediatric department and Emergency department were

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included in the study. Total 245 patients were included in the study. Patients were diagnosed using ICD-10 classification of mental and behavioral disorders, clinical description and diagnostic guidelines.

Patients who did not want to participate in the study were excluded from the study group. Patients who needed psychological and pediatric intervention were sent to the psychologist and the pediatric department of the same hospital. Laboratory investigations required were done from the hospital laboratory. All the variables were recorded and analyzed using SPSS (Statistical Package for Social Studies) software and tabulated the percentage.

RESULTS

Out of 245 patients, 142(57.9%) patients were diagnosed as depressive disorder. Rest of the pediatric patients 103(42.1%) attending the psychiatry OPD were of seizure disorder, bipolar disorder, conversion disorder, mental retardation, adjustment disorder etc. There were 88(62%) females and 54(38%) male patients showing the majority of patients as females.

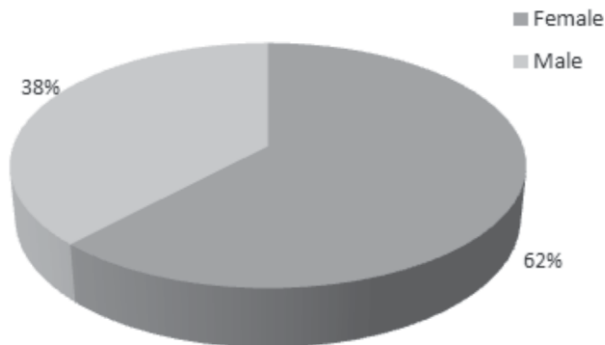


Figure 1: Sex distribution of patients

The most common age group involved in the study population was 11-14 years 116(81.7%) followed by 6-10 years age group 23(16.2%) and up to 5 years 3(2.1%) respectively.

Age (years)	Frequency	Percentage (%)
Up to 5	3	2.1
6-10	23	16.2
11-14	116	81.7
Total	142	100

Table I: Showing age distribution of patients

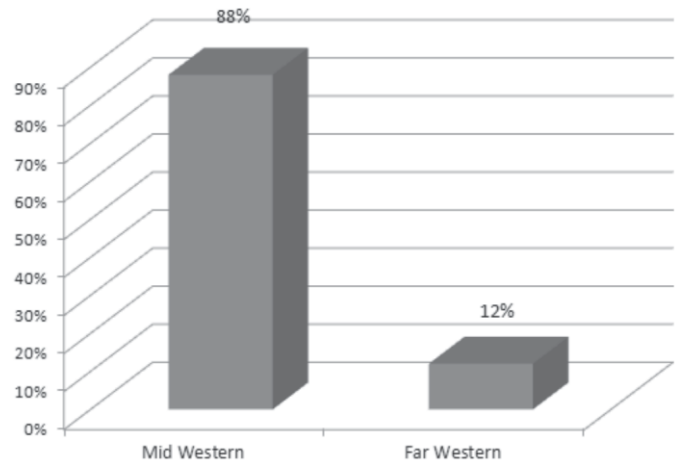


Figure 2: Figure showing geographic distribution of patients

As shown in Figure 2 maximum number of patients seeking psychiatric attention was from mid western region of Nepal 125(88%). Rests were from far western region 17(12%).

Ethnicity	Frequency (n=142)	Percentage (%)
Brahmin	38	26.8
Chhetri	55	38.7
Tharu	12	8.5
Gurung	8	5.6
Others	29	20.4
Total	142	100

Table II: Ethnicity distribution of patients

Chhetri were the most common ethnic groups seeking medical attention 55(38.7%) followed by Brahmin 38(26.8%), minority groups 29(20.4), Tharu 12(8.5%) and Gurung 8(5.6%) respectively.

DISCUSSION

Among the study population, females (62%) were more common to have depressive disorder than males (38%). The finding is similar to the another study done in tertiary hospital in Dharan, Nepal where majority of patients were female (53%) than male (47%)⁷. Also another study conducted at Dhulikhel Hospital showed female predominance (71.4%)⁸.

The most common age group in the present study was 11-14 years. This was comparable with the study done in western part of Nepal where 33.33% of patients were in the age group of 10-14 years⁹. In another study, the mean age of the patients was 14⁷. This surge in depressive cases in that age bracket could be due to pubertal hormonal changes³. Age distribution of this study shows that we had patients with younger groups as

compared with other studies^{7,8}. This was because the age of the study groups was limited to 14 completed years as most of the patients were referred from pediatric OPD.

Most of the patients seeking medical attention came from mid-western region of Nepal accounting for 125(88%) as compared to far-western region 17(12%). This is due to the mid-western location of this hospital and thus more patients from mid-western region can easily access medical help. Also, unawareness towards psychiatric problems to the people of far-western region land up to the traditional healers as compared to the medical facility.

Ethnic distribution was as per the distribution of national and regional population distribution given by the central bureau of statistics, government of Nepal in which the most common ethnicity is Chhetri¹⁰. Our study consisted of 38.7% of chhetri population.

In one study regarding mental health services for adolescents, it has been mentioned that mental health care should be integrated using cross-sectoral strategies into the communities in which adolescents live, the institutions they attend, the educational programs they receive, the media to which they are exposed and the organizations in which they participate¹¹. Hospital based study, small sample size, unable to randomize were limitations of the study.

CONCLUSION

Depression is quite common in pediatric population mostly during the peripubertal stage. It is seen most frequently in females.

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