



FACULTY OF MEDICINE
AIN SHAMS UNIVERSITY

Systematic review of some epidemiological studies on Psychiatric Disorders in Egypt

**Submitted for partial fulfillment of requirements of Master
Degree of Neuropsychiatry**

By:

**Madiha Mohamed lofty
M.B, B. Ch.**

Supervised by:

Prof. Afaf Hamed Khalil

**Professor of Neuropsychiatry
Faculty of Medicine- Ain Shams University**

Assist. Prof. Iman Ibrahim Abou El Ella

**Assistant Professor of Neuropsychiatry
Faculty of Medicine- Ain Shams University**

Dr. Marwa Abd El Meguid Hamed

**Lecturer of Neuropsychiatry
Faculty of Medicine- Ain Shams University**

**FACULTY OF MEDCINE
AIN SHAMS UNIVERSITY
2009**

Acknowledgement

*I would like to express my profound gratification to **professor Afaf Hamed**, professor of neuropsychiatry, Faculty of Medicine, Ain Shams University for suggesting this topic. Without her assistance, this work would not have been possible. It is great honour to work under her guidance and supervision.*

*I am really grateful to **Assistant Professor Iman Abou El Ella** assistant professor of neuropsychiatry, Ain Shams University, for her precious guidance, valuable assistance and kind support.*

*I would like to express my deep thanks and appreciation to **Dr Marwa Abd El Meguid** lecturer of neuropsychiatry, Ain Shams University, for her encouragement, valuable instructions and advise throughout the work.*

*I wish to express my great gratitude and my ultimate thanks to **professor Naglaa El-Mahalawy**, professor of neuropsychiatry, Ain Shams University, for her assistance and support.*

Last but not least, I wish to extend my thanks to all my colleagues for their help and to my family for their help and kind support.

List of Abbreviations

BDI	Beck Depression Inventory
CTQ	Childhood Traumatic Questionnaire
DSM-III	Diagnostic and Statistical Manual of Mental Disorders (Third Edition)
DSM-IV	Diagnostic and Statistical Manual of mental disorders (fourth edition)
DSM-IV- TR	Diagnostic and Statistical Manual of mental disorders (fourth edition) Text Revised
EPQ	Eysenk personality questionnaire
FAD	The Family Assessment Device
GHQ	General Health Questionnaire
GDS	Geriatric Depression Scale
ICD-10	International Classification of Diseases (Tenth Edition)
MEDSPAD	Mediterranean School Project on Alcohol and other Drugs
MMSE	Mini Mental State Examination
OCD	Obsessive compulsive disorder
OCS	Obsessive compulsive symptoms
PMDD	Premenstrual dysphoric disorder
PSE	Psychiatric State Examination
SCL-90	Symptom Check List-90
SCID	Structured clinical interview diagnosis
WAIS	Wechsler adult intelligence scale
YBOCS	Yale Brown Obsessive Compulsive Symptoms Checklist

List of tables

	page
<i>Table (1): Frequency of use of different drug abused among a sample of 40 patients</i>	15
<i>Table (2): Thought about complication of alcohol among a sample of 638 male students from general secondary schools in Cairo</i>	17
<i>Table (3): Prevalence of positive family history of substance use in a sample of 76 in patient and 78 outpatient from addiction unit institute of psychiatry Ain Shams university hospitals</i>	19
<i>Table (4): the prevalence of psychiatric comorbidity with substance abuse among a sample of 40 patients</i>	20
<i>Table (5): The prevalence of psychiatric comorbidity with substance abuse in a sample of 76 in patient and 78 outpatient from addiction unit institute of psychiatry Ain Shams university hospitals</i>	20
<i>Table (6): list of studies on epidemiology of substance abuse</i>	22-25
<i>Table (7) list of studies on epidemiology of mood disorder</i>	30
<i>Table (8): prevalence of anxiety symptoms in the studied sample</i>	31
<i>Table (9): prevalence of obsessive compulsive symptoms in psychiatric patient from the studied sample from outpatient clinic of institute of psychiatry Ain Shams University</i>	33
<i>Table (10): the prevalence of obsessive symptoms in control group</i>	34
<i>Table (11): prevalence of obsessive symptoms in patient group</i>	34
<i>Table (12): list of studies done on epidemiology of neurotic disorder</i>	37-38
<i>Table (13): prevalence of psychiatric symptoms in female with low body image satisfaction</i>	41
<i>Table (14): list of epidemiological studies done on body dysmorphic disorder</i>	42
<i>Table (15): list of epidemiological studies done on childhood anxiety disorder</i>	48-50
<i>Table (16): psychiatric comorbidity with obsessive compulsive disorder among female secondary school student in Cairo</i>	53
<i>Table (17): the prevalence of obsessions in a sample of 900 university & secondary school students</i>	54

List of tables

	page
<i>Table (18): the prevalence of compulsive symptoms in a sample of 900 university & secondary school students</i>	55
<i>Table (19): list of epidemiological studies done on obsessive compulsive disorder in child</i>	56
<i>Table (20): list of epidemiological studies done on depression in children</i>	59
<i>Table (21): list of epidemiological studies done on behaviour disorder</i>	62
<i>Table (22): prevalence of psychiatric symptoms in a sample of adolescent students in Assuit</i>	63
<i>Table (23): prevalence of psychiatric symptoms according to age group from the studied sample</i>	64
<i>Table (24): prevalence of psychiatric disorder in 1000 children at age 9-12 years from school in Alexandria</i>	66
<i>Table (25): prevalence of psychiatric disorder in 100 children 9 – 12 years attending the outpatient clinic at the students' hospital in Alexandria</i>	67
<i>Table (26): list of epidemiological studies done on psychiatric disorders in childhood and adolescence</i>	68
<i>Table (27): prevalence of child abuse among males and females from the studied sample</i>	70
<i>Table (28): List of miscellaneous studies on epidemiology of childhood disorders</i>	72
<i>Table (29): list of epidemiological studies done on geriatric psychiatry</i>	78-79
<i>Table (30): prevalence of physical symptoms of PMDD among 200 nurses from Banha University hospital</i>	82
<i>Table (31): Prevalence of physical symptoms of PMDD in a sample of 159 students at faculty of medicine Suez Canal University</i>	82
<i>Table (32): The prevalence of post-partum psychiatric symptoms among a sample of 53 female delivered at el Hussein hospital, 21 female admitted to el Abbassaya hospital in the purperium and 16 female admitted to kasr El Maadi hospital in the purperium</i>	83
<i>Table (33): Prevalence of physical abuse in medical and psychiatric clinic attendee from the studied sample</i>	88
<i>Table (34): Prevalence of precipitates for female abuse in the studied sample</i>	89
<i>Table (35): List of epidemiological studies done on women mental health</i>	90-92

	page
<i>Table (36): Prevalence of psychiatric disorder in a sample of 500 patients' in general medical department of Kasr El Aini hospital</i>	95
<i>Table (37): Prevalence of psychiatric disorder in a sample of 251 patients admitted to El Hussein University hospital</i>	95
<i>Table (38): List of epidemiological studies done in liaison psychiatry</i>	96
<i>Table (39): Risk factor for suicidal feeling among a sample of females students in Ain Shams University</i>	100
<i>Table (40): Prevalence of psychiatric disorder in suicide attempter collected from Ain Shams University Hospital and Dar El Shefa hospital and Mensheyt El Bakry hospital</i>	101
<i>Table (41): Prevalence of psychological stress in males' suicide attempter</i>	102
<i>Table (42): Prevalence of psychological stress in females' suicide attempter</i>	102
<i>Table (43): prevalence of physical symptoms associated with suicidal feeling in a sample of females' students in Ain Shams University</i>	103
<i>Table (44): List of epidemiological studies done on suicide</i>	104
<i>Table (45): Prevalence of psychiatric disorder according to symptoms checklist in a sample of male students at faculty of medicine Al Azhar University</i>	105
<i>Table (46): Epidemiological study done on Psychiatric study on a sample of students of faculty of medicine Al Azhar University</i>	107

List of papers done on epidemiological studies on psychiatric disorders

YEAR	Author/s	ARTICLE TITLE	SOURCE
1970	Bishry, Z., supervised by Hassan, H., Soueif, M., Okasha, A.	Psychiatric- Epidemiological- Psychosocial study of stammering in Egyptian children	M.D Thesis, faculty of medicine Ain Shams University
1979	Soueif, M., El Sayed, A., Honnovrah, M., Darwesh, Z.	The non medical use of psychoactive substances among secondary schools male students in Egypt	Egyptian Journal of Psychiatry Vol 2 1979
1980	Okasha, A., Lotaif, F., Sadek, A., Bishry, Z., Ashour, A.	Prevalence of suicidal feelings in a sample of non consulting medical students	Egyptian Journal of Psychiatry October 1980
1981	Okasha, A., Ashour, A., Kamel, M., Sadek, A., Bishry, Z. Lotaif, F.	Psycho-demographic study of anxiety in Egypt. (The first application of PSE in its Arabic version)	Egyptian Journal of Psychiatry, Vol. 4 1981
1984	Hamouda ,M. Supervised by Shalaan ,M .	An epidemiological study of conduct disorder in primary school children	M.D Thesis, faculty of medicine Al Azhar University
1985	El Mehalawy, N., supervised by Okasha A, Kamel, M., Lotaif ,F.	Psycho socio epidemiological study of attempted suicide in an Egyptian population	MD thesis Faculty of Medicine Ain Shams University

List of papers

YEAR	Author/s	ARTICLE TITLE	SOURCE
1985	Youssef, I. supervised by Okasha, A. Yonis, N.	Post-partum psychological disturbances (Epidemiological view)	MD thesis Faculty of Medicine Ain Shams University
1988	Serag El Din A. supervised by Okasha A. Abdel Monem, S.	Drug abuse among Egyptians	MSc thesis Faculty of Medicine Ain Shams University
1989	Abd El Hamid, R. supervised by Okasha, A. Kamel M. Hannalla R.	An epidemiological study of depressive symptoms in rural and urban population in Egypt	MD thesis Faculty of Medicine Ain Shams University
1989	Fahmy, K. supervised by Okasha, A., Galeb, H. and Hamed, A.	Heroin abuse (a study of its psycho demographic, and clinical aspects among Egyptian inpatients)	MD thesis Faculty of medicine - Ain Shams University
1989	Mohamed M. supervised by El Akabawy, A. and Hammouda, M.	An epidemiological study of depression among sample of Egyptian adolescent 15-18 years old of both sexes	M Sc. Thesis. Faculty of Medicine Al Azhar University
1992	Demerdash, A., Fathi, A., Ibrahim, R., El Tohamy, S., Omran, S.	Substance non medical use among secondary school student in Assuit City	Egyptian Journal. of Psychiatry Vol.15, No.2 1992
1993	El Khouly, M., El Nagar, S., Hashem, A.	Depressive illness in the elderly psychosocial and demographic study	Egyptian Journal of Psychiatry Vol 16 January & July 1993

YEAR	Author/s	ARTICLE TITLE	SOURCE
1993	Rizkalla, N. Mishriky, A., El Defrawi, M., Khattab, T.	Prevalence of premenstrual syndrome in medical student impact on cognitive function	Egyptian Journal of Psychiatry Vol 16 172 January /July 1993
1994	Abd El Hady, R.	Study of anxiety disorder among students of secondary nursing schools in Benha university hospital	Benha medical Journal Vol 11 No 3 September 1994
1994	Ibrahim, S. supervised by Hannalla, R. Abdel Baky, O.	Epidemiology of behavior disorders in primary school children (6-11years) in urban and rural areas in Egypt	Ain Shams University Institute of Post graduate Childhood Studies Medical department
1994	Rashed, S., Hidayet, N., Salama, H., Ibrahim, A., Salem, w.	Epidemiological study of attention deficit hyperactivity disorder in elementary school in Alexandria govern ate	Bull. Alexandria Faculty of Medicine Vol 30 No 1 1994
1995	El Sherbini A., Fadel, K., Eissa, M.	Prevalence of some psychiatric symptoms in adolescent student in Assuit	Egyptian journal of psychiatry Vol18 no 2 July 1995
1995	Abdel Al, H., supervised by Lotaif, F., El Mehalawy, N., Mahmoud, A.	Psycho socio epidemiological study of suicidal feelings in a sample of Egyptian students	M Sc. Thesis. Faculty of Medicine Ain Shams University
1997	Abou Khatwa, S., Kamel ,F., Youssef, R., Attia, M., Fawal, K.	Epidemiological study of addicts admitted to Maamoura psychiatric hospital in Alexandria	The Journal of the Egyptian Public Health Association Vol 22 No 1,2 1997

List of papers

YEAR	Author/s	ARTICLE TITLE	SOURCE
1997	El kholy ,G. supervised by Okasha A, Lotaief F, Ashour A, El- Mahalawy N, Seif- El-Dawla A.	The Prevalence of Obsessive Compulsive symptoms in a sample of Egyptian Psychiatric Patients	MD thesis. Faculty of Medicine Ain Shams University
1998	Ismail R. supervised by Hamed A. Okasha A. Raghab K.	The prevalence of obsessive compulsive symptoms in a sample of Egyptian students	M.D Thesis, faculty of medicine Al Azhar University
1999	Abdel Hady A. supervised by Sayed G. El Garhy M. Hammouda M.	Correlation between sociodemographic characteristic & occurrence of psychiatric disorder among geriatric in 2 areas in Egypt one rural & one urban	M .D Thesis Faculty of Medicine Al Azhar University
1999	Zarif N. supervised by Hamed A. Abou Seeda M. Seif El Dawla A.	Psychosocial- demographic study of premenstrual dysphoric disorder in a sample of Egyptian women	M .D Thesis Faculty of Medicine Ain Shams University
2000	Mikhael V.,Khodeir R., ElShikh H.,Abdel Rahman S, ElKholy R.	Psychobio social study of premenstrual dysphoric disorder	Egyptian Jpurnal of Psychiatry Vol 23 July 2000
2001	Abd El-Azim K. supervised by Lotaief,F., El Mahalawy,N., Seif El Dawla,A., Assad,T.	Psychosocial correlates of substance abuse: a study in an Egyptian sample	MD thesis Faculty of medicine – Ain Shams University
2001	Abu Rayan,M. supervised by Hammouda,M., Bahary, M., Owida, M.	Epidemiological study of psychiatric disorder in school children from age 9-12 year in Alexandria	M.D Thesis, faculty of medicine Al Azhar University

YEAR	Author/s	ARTICLE TITLE	SOURCE
2001	Asaad T, Ismail K.	Pregnancy Related Obsessive Compulsive Disorder (A study in an Egyptian sample	Current Psychiatry, Vol.8 No.3:326-331
2001	El Gamal M. supervised by Mohmoud S. El Guindy T. El Ray L.	Psychiatric morbidity in general medical department of Kasr el Aini hospital	M.D Thesis, faculty of medicine Cairo University
2001	El Raey L, Abu El-Ella I, Asaal A.	Socio-demographic, clinical and psychometric profile of a sample of Egyptian patients with social phobia	Current Psychiatry, Vol.8 No.3: 273-280
2002	Ahmed H., El Gendi F., Abdel Fatah S., El Sheikh M., Aly K.	Prevalence of post partum depression among women with high risk factors	The New Egyptian journal of medicine Vol 26 No 2 February 2002
2002	Hammouda M., Soliman A., Hassan A.,Bahari, M., Esmail A.	Prevalence of generalized anxiety disorder and its risk factors in a sample of schools and universities students	The New Egyptian Journal of Medicine Vol 27 no 1 July 2002
2002	Hashem N. supervised by Sadek A. El Mahallawy N. Soliman A. Haroun A.	Substance use disorders among female secondary school students in Cairo	MD thesis Faculty of medicine – Ain Shams University
2004	Abd El Kawy Y. Attia M.,Ayoub A.	Depressive symptoms among elderly living in geriatric homes in Alexandria	Egyptian Journal of Psychiatry Vol 23 No 2 June 2004

List of papers

YEAR	Author/s	ARTICLE TITLE	SOURCE
2004	Abou-Hatab M	Childhood phobia: Screening among a sample of non-referred primary school Egyptian children	Current Psychiatry Vol. 11 No. 1 March
2004	Fahmy E. El Sheikh H.	Prevalence & family dysfunction of unspecified depressive disorder among out patient clinic attendants	Egyptian Journal of Psychiatry Vol 23 No 2 June 2004
2004	Mohamed R. supervised by Al Madany A. Lotaif F. Bahary M. Abdel Ghani M.	Incidence of psychiatric comorbidity among physically ill patients admitted to el Hussein University hospital & its impact on the duration of hospital stay	M.D Thesis, faculty of medicine Al Azhar University
2005.	Abdel Aal S.	Prevalence of depression among residents living in elderly homes in Cairo	Current Psychiatry Vol. 12 No.3 November 2005
2005	Abd El Hay M.,Ezzat S., Abou Hatab H.	Psychosocial correlates of axis I mental disorders among medical inpatients	Egyptian Journal of Psychiatry Vol 24 No 1 January 2005
2005	Ahmed A.A., Supervised by Sadek A.,Ghanem M., Haroun El- Rasheed A., El- Setouhy M.	Substance use disorders among male general secondary school students in Cairo	MD thesis Faculty of medicine – Ain Shams University

YEAR	Author/s	ARTICLE TITLE	SOURCE
2005	Bakr I, El-Sayed N.	Prevalence of anxiety among medical students in different grades: An Egyptian Study	Current Psychiatry, Vol.12 No.1 2005
2005	Bassim R. supervised by Okasha A., Sadek A., Badawy A., Assad T., Okasha T.	Epidemiology and psychiatric morbidity in suicide attempters at the poison control center Ain Shams University Hospitals	MD thesis. Faculty of Medicine Ain Shams University
2005	El Gendawy H., Hadhood M., Shams El Din R., Shabib A.	Epidemiological aspect of depression among Assuit university students	Assuit Medical Journal Vol29 No 1 January 2005
2005	Guemei N. supervised by Okasha A, Ghanem M, Okasha T	Prevalence of body dysmorphic disorder in an Egyptian sample	MD thesis. Faculty of Medicine Ain Shams University
2005	Ragheb M. supervised by Okasha A, Hamed A, Gadallah A, Okasha T.	Social phobia in secondary school and university student an Egyptian study	MD thesis. Faculty of Medicine Ain Shams University
2005	Soltan M. supervised by Bishry Z, El-Nahas G, Abu El Ella I.	Prevalence of Obsessive Compulsive Disorder among female secondary school students in Cairo	MD thesis. Faculty of Medicine Ain Shams University
2005	Yousef I., Fahmy M., Haggag W., Elsayed O. ,Ahmed R.	Psychological Profile and Prevalence of Psychoactive Substance Use among Suez Canal University Students in Ismailia	Current psychiatry Journal Vol. 12 No 2 July 2005

List of papers

YEAR	Author/s	ARTICLE TITLE	SOURCE
2006	Ali M. supervised by Hammouda M, Abd El-Ghany M	Psychiatric study on a sample of students of faculty of medicine Al Azhar University	M Sc. Thesis. Faculty of Medicine Al-Azhar University
2006	Eid H. supervised by Abdel Wahab M. El Ray L. Erfan S.	Substance dependence in a sample of Egyptian adolescents	M.D Thesis, faculty of medicine Cairo University
2006	Hassan D. supervised by Raghab K., Abou Bakr A. Atia H.	Social anxiety disorder among a sample of Egyptian children	M.Sc Thesis, faculty of medicine Al Azhar University
2006	Mohamed R. supervised by Hamed A., Raghab K., Abdel Wahab M. Atia H.	Violence against women a study of prevalence and psychiatric consequence	M.D Thesis, faculty of medicine Al Azhar University
2007	Mikhael V., El-Mahdy M., El-Hamady M., Oransa A., El-Khouly R., Mostafa Kh.	Prevalence and Risk Factors of Depression in Pregnancy and Puerperium	Current Psychiatry Vol. 14 No.3 November 2007
2007	Mohamed,H., supervised by Raghab,K. Abdel Azim,S. El Demerdash,A. Abdel Wahab,M. Atia,H.	Prevalence of social anxiety symptoms among a sample of Egyptian adolescents	M.D Thesis, faculty of medicine Al Azhar University

YEAR	Author/s	ARTICLE TITLE	SOURCE
2007	Riyadh M, Hassan A, Algammal M and Abdelrahman A.	the prevalence of child abuse and its effect on the mental health	Current Psychiatry Vol. 14 No.3 November 2007
2007	Saleh,A. supervised by Kamal,S. Hashem,A. Sabry,N.	Depressive disorders among a sample of Egyptian old patients in a medical ward	M.Sc Thesis, faculty of medicine Cairo University
2008	El Sayed A. supervised by Hammouda M. El Akabawy A.	Epidemiological psychiatric study on a sample of female in al Dakahlia govern ate in Egypt	M.Sc Thesis, faculty of medicine Al Azhar University
2008	Hatata H., Awaad M., El Sheikh M., Refaat G.	Body image dissatisfaction and its relationships with psychiatric symptomatology eating beliefs and self esteem in Egyptian females adolescents	Current Psychiatry Vol. 15 No.3 November 2008
2008	IbrahimN. Supervised by Soliman A. Abou El Ella I. Abdel Meguid M.	Prevalence of social anxiety disorder in late childhood and early adolescence among schools in Cairo	MSc thesis. Faculty of Medicine Ain Shams University
2008	Sabry, W. supervised by Hamed, A. Asaad,T. Haroun El Rasheed, A. Fekry,M.	Prevalence of depression in a sample of Egyptian secondary schools female students	MD thesis. Faculty of Medicine Ain Shams University

Definitions of Epidemiology

Epidemiology is the study of the distribution and determinants of health states or events in specified populations, and the application of this study to control health problems. It is concerned with the collective health of people in a community or an area and it provides data for directing public health action. Epidemiology provides the tools (scientific methods) to study the causes of disease and the knowledge base for health care. Thus it provides public health professionals the means to study disease and look at the effectiveness of health care services and, more specifically, the impact of health care interventions. It provides one key approach to understanding health and disease in individuals and populations, and the forces and factors which influence them. This is important both for health care professionals and for patients. *(Bailey et al, 2005)*

The purpose of epidemiology is to use this information to promote health and reduce disease. Clinical practice and health policy cannot be based on clinical experience alone. They need to be based on scientific evidence. Understanding epidemiology and the methods used to study health and disease is a prerequisite for the ability to appraise critically the evidence in scientific literature. The ability to distinguish good from poor science (good and poor evidence) is an essential skill in promoting evidence-based health care. Epidemiology is one of the key scientific disciplines underlying some of the most important and rapidly developing areas of inquiry into health and health care.

Epidemiological methods are central to clinical research, disease prevention, health promotion, health protection and health services research. The results of epidemiological studies are also used by other scientists, including health economists, health policy analysts, and health services managers. *(Bailey et al, 2005)*

Psychiatric Epidemiology

It's the field which seeks to measure the prevalence of mental illness in society. It is a subfield of the more general epidemiology. *(Susser et al, 2006)*

Epidemiology has already contributed a great deal to psychiatric research. The discipline has been used extensively for studying the frequency of mental disorders in communities across the world. Increasingly, it is also being used to examine the causes of mental disorders, including biological and genetic causes, utilizing the major risk factor designs of case control and cohort studies *(Wyatt et al, 2000)*

Psychiatric Epidemiology is characterized by a broader focus that includes mental disorders and uses more comprehensive frameworks, such as both ill and positive health, and deals with meaning, culture, and other interpretative analyses. Also discernible in this array of epidemiological studies is their substantial interest and involvement in the development and formulation of health policies. *(Wyatt et al, 2000)*

Multinational epidemiological studies have been implemented such as the World Mental Health Survey (WMH) which is a collaborative World Health Organization (WHO) initiative that aims to examine the form and frequency, severity, associated disability, and treatment of mental disorders in more than 14 countries. The novelty of this study is not only the simultaneous application of similar instruments in different countries, but also the assessment of social consequences, burden of disease, and service delivery in a comprehensive manner. The assessments were carried out within the WMH version of the WHO Composite International Diagnostic Interview. (*WHO International Consortium in Psychiatric Epidemiology, 2000*)

Purposes and Uses of Epidemiology

In a classic paper written in 1955, the British epidemiologist Jeremy N. Morris proposed a number of uses for epidemiology. Despite their relatively early formulation, they are widely acknowledged as still relevant. They are summarized and briefly commented on below. (*Sadock and Sadock 2005*)

1. Historical studies:

This refers to the importance of having a chronological perspective in the study of health and illness in human populations. The evolution of general and psychiatric epidemiology illustrates the value of these appraisals. Also relevant here is the longitudinal depiction of changes in patterns of disease distribution in human populations. (*Sadock and Sadock 2005*)

2. Community diagnosis:

It has long been acknowledged that epidemiology furnishes crucial information on the health of a community (i.e., on its diagnosis in a fundamental sense). This application of epidemiology also has direct implications for clinical care in terms of situational and contextualized clinical diagnosis and of the identification of high-morbidity areas. (*Sadock and Sadock 2005*)

3. Appraisal of an individual's health prospects:

This is based on relevant population studies and inferences made on the likelihood of life or death of an individual as a member of the researched population. Such inferences may refer to risk factors, as well as to life expectation and life lived with disabilities. (*Sadock and Sadock 2005*)

4. Health services and operational research:

Scientific investigations on the organization and performance of health services are becoming an area of active research. For this, epidemiological methods can be quite helpful—from prevalence studies to the assessment of need for care to the evaluation of treatment coverage and outcomes. (*Sadock and Sadock 2005*)

5. Completing the clinical picture:

When initially proposed by Morris, this use of epidemiology was best illustrated by determining gender and age factors associated with a disease. In mental health, this epidemiological purpose is exemplified, in particular, by the refinement of a nosological profile afforded by community surveys, which have been used for development of psychiatric classifications in ICD-10 and DSM-IV. (*Sadock and Sadock 2005*)

6. Identification of syndromes:

Models could be built to associate risk and other contributory factors to signs, symptoms, and course to generate nosological hypotheses. (*Sadock and Sadock 2005*)

7. Clues to causes:

There are substantial indicators for the use of epidemiology in clarifying the etiology of clinical problems. The searching for causes of disease and protective factors for health may lead to better prevention efforts. Within the emerging multilevel paradigm, epidemiology is not a “**head-counting**” activity. It is a systemic scientific activity that answers clinical and public health questions with proper analyses of risk factors, outcomes, and other associated variables. It also offers a broader perspective of overall population health and health care provision in a society. Health policy makers and other health stakeholders can use epidemiological information as a strategic input for decision making on priorities and resource allocation. As epidemiology enters a new “ecological” era, concerned with understanding internal and external connections, investigations formed by a multilevel framework and considering a wide array of contributors may become increasingly frequent. (*Sadock and Sadock 2005*)

Each of the uses outlined above is applicable to psychiatric epidemiology. It should be mentioned, however, that, in addition to these seven uses which rather explicitly refer to work with illness or pathology the emerging expansion of the concept of health to include pointedly positive health aspects (i.e., social participation and supports, quality of life) suggests that the investigation of these aspects will become a significant new use of epidemiology. (*Sadock and Sadock 2005*)

DSM and Psychiatric Epidemiology

A major component of many psychiatric epidemiological investigations is psychiatric diagnosis of the population being studied. Clearly, the task of determining the prevalence of psychiatric illness in a population depends on having reliable well-operationalized definitions of the disorders. Furthermore, the association between possible causative factors and illness is impossible without clear and consistent methods of classifying and diagnosing the psychiatric conditions. Before the introduction of DSM-III in 1980, psychiatric epidemiology was severely constrained by the lack of a widely accepted and reliable system of diagnosis that could be applied in community studies (*Tsuang and Tohen 2002*)

There are three aspects of the DSM that have proved most valuable to advancing the methodologies of psychiatric epidemiology. First is the widespread acceptance of the DSM classification among all sectors of the fields of psychiatry, psychology, and social work as the standard for psychiatric diagnosis. Having in place a common language for classifying mental disorders allows for the direct comparison of data among studies and the application of results across various disciplines and areas of interest. (*Tsuang and Tohen 2002*)

For example, the fact that all psychiatric researchers use the same standardized definitions of disorders and often the same diagnostic instruments can facilitate the integration of studies exploring potential pathophysiological mechanisms with epidemiologic investigations of apparent causal factors in order to generate new hypotheses and drive future research. Second, is the reliance of the DSM definitions on symptomatic descriptions rather than hypothesized but untested etiological assumptions. Third is its provision of operationalized definitions in order to facilitate the assignment of a particular psychiatric diagnosis or set of diagnoses to a particular case. (*Tsuang and Tohen 2002*)

Two major innovations implemented in DSM-III greatly impacted its utility for psychiatric epidemiology: its descriptive approach and its inclusion of diagnostic criteria. A basic principle of DSM-III was to provide comprehensive descriptions of the manifestations of disorders without regard to etiology. (*Tsuang and Tohen 2002*)

Since its introduction in 1980, the DSM definitions have been adopted by all mental health professionals, institutions, governmental agencies, private organizations in the United States, as well as a number of researchers and clinicians working in other countries. (*Tsuang and Tohen 2002*)

Problems facing epidemiological psychiatry:

Psychiatric epidemiology traditionally lags behind other branches of epidemiology because of difficulties encountered in conceptualizing and measuring mental disorders. As a result, much contemporary psychiatric epidemiology continues to be descriptive, focusing on the estimation of disorder prevalence and subtypes at a time when other branches of epidemiology are making progress in documenting risk factors and developing preventive interventions (*Kessler 2000*)

It is very difficult to accurately measure such a thing as mental illness prevalence, and current techniques are relatively poor. Two areas of concern, sometimes called the crisis of psychiatric epidemiology today, are the high estimates of mental illness that many studies produce and the difference in results between studies. (*Susser et al, 2006*)

AIM OF THE WORK

The aim of this work is:

1. To systematically review and appraise the available Egyptian studies on epidemiology of psychiatric disorders.
2. To generate recommendations for further studies.
3. To provide a summary of clinical M.S.c thesis& M.D, thesis on epidemiological studies on psychiatric disorders done in Ain-Shams University, Psychiatry Department (these will be included as an Appendix).

METHODOLOGY (PROCEDURES)

In order to fulfill the aim of the work, a systematic review of all available Egyptian epidemiological studies on psychiatric disorders will be done. The following databases will be explored:

- 1- Library of Faculty of Medicine Ain-Shams University.
- 2- Library of Faculty of Medicine Al-Azhar University.
- 3- Library of Faculty of Medicine Cairo University
- 4-Some other journals of Psychiatry for Egyptian studies.

These studies will be critically appraised and important findings will be discussed. Following these steps, recommendations for further studies will be generated.

Systematic review of Egyptian epidemiological studies

Substance use disorder

Prevalence

In a study done on students of faculty of commerce and faculty of medicine **Serag El Din et al, 1988** found that 7.5% of male and 2% of female students of faculty of commerce were current user of cannabis. Concerning stimulant, he revealed that 3% of students of faculty of commerce used ephedrine and 1% of medical students used amphetamine as slimming pills, while 10% of students of faculty of commerce tried sedative pills.

Interestingly, **Demerdash et al, 1992** reported that the prevalence of tobacco was 41% of sample of secondary students in Assuit. While, the prevalence of alcohol was 23% followed by cannabis 15% and lastly the prevalence of tranquilizer among students was 13%.

On the other hand, **Hashem et al, 2002** studied the extent of substance abuse among female secondary school students in Cairo. they found that the prevalence of tobacco smoking was 2.5%. As regards illicit drug use (tranquilizers, hypnotics and stimulants) 3.9% of female students admitted drug use without medical prescription. Regarding alcohol use about 15.9% reported alcohol use. Only 0.7% of sample reported use of cannabinoids.

Moreover, **Ahmed et al, 2005** studied a sample of 638 male students from general secondary schools in Cairo. They reported that the life time prevalence of cigarette smoking was 30.4% while regular user was 8.4%. Concerning alcoholic beverages used on regular basis it was 24.3% of the students. 5.5% of the students revealed use of hashish and bango. As regards inhalants 5.5% of students use them. Other drug was reported to be used in 11% of sample. The most prevalent substance was hypnotics and tranquilizers which was reported in 6.8% followed by anabolic steroids which was 5.1% and other types of substances was reported by 4.2%-4.8% of students.

While in a study done on students of 2 faculties of Suez Canal University (faculty of commerce and faculty of medicine) **Yousef et al, 2005** found that the overall prevalence of substance use was 39.3%. Cigarette smoking was the most common substance used 38.8%, followed by alcohol 18.5%, cannabinoids 12.9% and psychotropic drugs 10.7%.

Age of onset

Soueif et al, 1979 studied the use of psychoactive substance among secondary school male student in Cairo with age group 14-21 years. He revealed that the older group experimented and knew about drugs more than the younger ones.

This result was in agreement with **Demerdash et al, 1992** who studied substance use among secondary school students in Assuit city and found that those above 18 years was significantly at higher risk for substance use. While **Abd El Azim et al, 2001** stated that the progression of age decreased markedly the liability to smoke cigarette or to take other substance.

On the other hand, *Eid et al, 2006* found that the mean age of onset of cigarette smoking was 12.7 years. This result was consistent with *Abd El Azim et al, 2001* who stated that the age of onset of smoking was 13.9 years in a sample of 76 inpatient and 78 outpatient from addiction unit institute of psychiatry Ain Shams university hospitals.

In addition *Fahmy et al, 1989* revealed that 59.5% of substance abuser began smoking habit between age of 15-19 years and 23.4% between 10-14 years. While 37.17% of control group were smokers and the majority started smoking by the age of 20-24 years.

Also, the age of major risk for initiation of substance use other than heroin was 15 -19 years and for heroin 20-24 years. (*Fahmy et al, 1989*) The same result was reported by *Abd El Azim et al, 2001* who found that 46.8% of patients abuse cannabis and alcohol around the age of 15-17. As regards alcohol, it was started earlier by the age of 12 years. (*Ahmed et al, 2005*)

Gender

Yousef et al, 2005 studied substance use among Suez Canal University Students. He stated that substance use was more common among male than female students.

Residency

Regarding residence it was found that alcohol, cigarette and other drugs were more prevalent in rural area while hashish/bango and inhalants were more prevalent in urban area. (*Ahmed et al, 2005*) in contrary *Demerdash et al, 1992* revealed that tobacco and narcotics showed high incidence in rural area. Also substance abuse was higher in students who lived alone.

Marital state

Abd El Azim et al, 2001 found that polygamy was significantly higher among substance abuser, 74% of abusers were never married and 8.4% of abusers were divorced. While *Fahmy et al, 1989* reported no significant difference was found between users and controls regarding marital state.

Education

On studying the relation between substance abuse and scholastic achievement it was found that most of abuser had poor scholastic achievement in form of failure, drop out or low score in different grade. (*Fahmy et al, 1989*)(*Abd El Azim et al, 2001*). Also it was noticed that substance use was more common among theoretical faculties' students than practical faculties' students. (*Yousef et al, 2005*) In contrary, *Ahmed et al, 2005* reported that alcoholic beverage were more prevalent than other substance among students scoring high grade 85%-100% in a study done on male general secondary school students in Cairo. This was in agreement with (*Hashem et al, 2002*)who revealed that there was significant statistical positive association between female students using alcohol and scored around 80% at the end of preparatory level in a study done on female students in secondary school in Cairo

Occupation

Fahmy, et al 1989 found that there was repeated change in job in substance abuser and the cause of change were work problem in 62.5% of the patients and addiction in 51.8% of them. In addition *Abd El Azim et al, 2001* reported that the control group had a significantly higher level of occupation than the substance abusers.

Type of substance

Abou Khatwa et al, 1997 studied 92 Patients admitted to the addiction ward at Mammoura hospital. He stated that the majority of addicts were poly drugs user and that hashish was the most ever drug used yet heroin was the problematic drug. While *Abd El Azim et al, 2001* revealed that 87.7% of abuser was poly substance abuse and Bango was the most prevalent drug used.

Moreover, *Eid et al, 2006* studied the history of addiction of 40 patients admitted in 2 psychiatric hospitals. They found that the cannabis was the most common substance used while tramadol was the least common. Table (1)

Table (1): Frequency of use of different drug abused among a sample of 40 patients

Cannabis	70%
Alcohol	65%
Bango	62.5%
Sedative hypnotics	57.5%
Heroin	25%
Codeine	10%
Tramadol	2.5%

(Eid et al, 2006)

Drug seeking behavior motives

One of the most important factors for trial of substance in different studies was the peer effect. *Eid et al, 2006* stated that 65% of substance abuser took drugs under effect of friends. The same result was revealed by *Ahmed et al, 2005* who reported that 88.6% of users were influenced by peer effect. This result was consistent with(*Serag El Din et al,1988*)(*Fahmy ,et al 1989*)(*Demerdash et al, 1992*) (*Hashem et al, 2002*)(*Yousef et al, 2005*)

Apart from peer effect, there were multiple motives for drug seeking behavior. According to **Abou Khatwa et al, 1997** frustration was a main motive in 27.17% of substance abuser admitted at Mammoura hospital. While, social occasion was commonly attributed with alcohol consumption (**Demerdash et al, 1992**) (**Hashem et al, 2002**)

Also, there were other causes reported as the curiosity and the frequent use to escape from problems. (**Serag El Din et al, 1988**)(**Fahmy ,et al 1989**)

Abd El Azim et al, 2001 studied 154 substance abusers and reported that 22.7% of patient related substance abuse to sexual practice.

On the other hand, **Hashem et al, 2002** studied female secondary students and found that 70% of the sample reported using illicit drugs due to stressful situation while 30% is due to somatic complaints. 75% reported use when being in company with friend while 25% of students reported use of drugs in response to psychological troubles.

Furthermore, **Eid et al, 2006** reported that 77.5% of substance abusers used drugs to suppress depression & loneliness.

Concerning cigarette smoking students explain the main reason to tried cigarette was the curiosity and the frequent used due to increase efficiency while smoking (**Serag El Din et al, 1988**)

Motive for abstinence

When asked about cause of abstinence 54.5% of female students reported fear of dependence while 45.5% reported the physical and psychological harmful effect of drugs. Furthermore, the main cause of abstinence of alcohol use was due to religious beliefs. (**Hashem et al, 2002**)

This result was in agreement with *Demerdash et al, 1992* who found that guilt was the main reason to quit illicit drug, religious reason in case of alcohol. Both religious and health over concern were main cause of abstinence in case of narcotic.

Risk of drugs

Most of non users perceive all categories of substances as being of moderate or severe risk while drugs users always perceive that used drugs are of no or mild risk. Also cigarette smokers and alcohol users perceive cigarette and alcohol of being of moderate to severe risk despite using it. Table (2) (*Ahmed et al, 2005*)

Table (2): Thought about complication of alcohol among a sample of 638 male students from general secondary schools in Cairo

Alcohol cost too much	92%
Bad for health	91%
Crime and violence	87.5%
Bad effect on family life	85.9%
Religious cause	83.1%
Weight gain	35.4%

(Ahmed et al, 2005)

First drug use occasion

Ahmed et al,2005 stated that the use of drug for the first time among secondary school students was 28% used sedatives, 22.6% used ecstasy, 12% used hashish/bango, 9.3% used LSD and 2.6% used amphetamine. On the other hand, 25.5% of the students revealed that they didn't know the substance they used in the first occasion.

Availability of drugs

Ahmed et al, 2005 revealed that the availability of drugs had positive association with substance abuse. The patients reported that the easy to get and well available substance was inhalants followed by alcoholics' beverages than hashish/bango and at last other drugs.

Religious attitude

As regards religious beliefs and attitude, there was negative correlation between religiosity and substance abuse. (*Fahmy, et al 1989*) (*Abd El Azim et al, 2001*)

Family setting

On assessment of substance abuser family it was found that the majority of patient had troublesome home atmosphere and unharmonious relationship between their parents. (*Fahmy, et al 1989*) (*Abd El Azim et al, 2001*)

Regarding parent `s level of education it was found that Alcoholic beverages were more prevalent among those whose parents were highly educated. While hashish/bango and inhalants use were more prevalent among those whose parents were educated till primary school. (*Ahmed et al, 2005*)

Family history

As regard family history of substance abuse, *Fahmy, et al 1989* stated that 35.5% of user's fathers and 48.7% of their relatives were substance abusers, while 15.4% of user's fathers and 28.2% of their relatives were heroin abusers. This result was in agreement with *Abd El Azim et al, 2001*.table (3)

Table (3): Prevalence of positive family history of substance use in a sample of 76 in patient and 78 outpatient from addiction unit institute of psychiatry Ain Shams university hospitals

Smoking	57.1%
Alcohol	39.6%
Substance abuse	30.5%

(Abd El Azim et al, 2001)

Past history

40.3% of the substance abuser had past history of conduct disorder, poor social adaptation in the form of shyness, isolation, aggression and breaking rules. *(Abd El Azim et al, 2001)*

Psychometric data assessment

Substance abuser showed high score regarding neuroticism and criminality on Eysenk personality questionnaire EPQ. In addition high impulsivity scale was found in female abuser. *(Abd El Azim et al, 2001)*

Moreover, *Eid et al, 2006* also revealed that substance abuser had very low guilt feeling, low self esteem and high percentage of familial, social and emotional stressors.

Psychiatric co morbidity

Yousef et al, 2005 stated that anxiety, insomnia, social dysfunction and severe depression were more prevalent among substance user. Also, *Eid et al, 2006* revealed that 60% of substance user had co morbid psychiatric disorder.

Table (4)

Table (4): the prevalence of psychiatric comorbidity with substance abuse among a sample of 40 patients

Major depression disorder	25%
Antisocial Personality disorder	17.5%
Borderline Personality disorder	7.5%
Schizophrenia	2.5%
Anxiety disorders	2.5%
Paranoid Personality disorder	2.5%

(Eid et al, 2006)

This result was consistent with *Abd El Azim et al, 2001* who found that 51.3% of substance abusers had co morbid axis I diagnosis and 56.5% of substance abusers had personality disorder axis II. Table (5)

Table (5): The prevalence of psychiatric comorbidity with substance abuse in a sample of 76 in patient and 78 outpatient from addiction unit institute of psychiatry Ain Shams university hospitals

Sleep dysfunction	37.7%
Sexual dysfunction	20.8%
Anxiety disorder	17.5%
Borderline personality disorder	14.9%
Mood disorder	14.3%
Antisocial personality disorder	13.6%
Schizophrenia and other psychotic disorder	10.4%

(Abd El Azim et al, 2001)

In contrary, *Hashem et al, 2002* found no association between substance use and psychiatric morbidity among students.

Physical comorbidity

There was a significant correlation between affection of general health and cigarette smoking among students. (*Yousef et al, 2005*)

Table (6): list of studies on epidemiology of substance abuse

Study	Author	Site	Tool	Subject	Result
The non medical use of psychoactive substances among secondary schools male students in Egypt	SouEIF et al, 1979	secondary school in Cairo	Self Reporting Questionnaire	6000 students from secondary school in Cairo age group 14-21 years	Natural narcotics (hashish and opium) were commonly used than synthetic drugs
Drug abuse among Egyptians	Serag El Din et al, 1988	faculty of medicine and faculty of commerce Ain Shams university	Self Reporting Questionnaire	523 students grade I, 510 students in grade II of faculty of medicine 1200 students of faculty of commerce	the prevalence of drug abuse among students of faculty of commerce was higher than students of faculty of medicine
Heroin abuse (a study of its psychographic, and clinical aspects among Egyptian inpatients)	Fahmy, et al 1989	2 private hospitals in Cairo	- EPQ - Hamilton Anxiety Scale - Self Rating Depression Scale - BDI	78 heroin users 78 controls	97.4% of users had histories of substance use before heroin intake

Study	Author	Site	Tool	Subject	Result
Substance non medical use among secondary school student in Assuit City	Demerdash et al,1992	secondary school in Assuit city	Self Reporting Questionnaire	1500 males secondary students	The prevalence of illicit drug 13% The prevalence of hashish abuse 15% The prevalence of alcohol abuse was 23%
Epidemiological study of addicts admitted to Maamoura psychiatric hospital in Alexandria	Abou Khatwa et al,1997	the addiction ward at Maamoura hospital	- Self Adminstrated Questionnaire - EPQ	92 Patients admitted to the addiction ward at Maamoura hospital	75% of the sample were between age of 15-30 years on starting drug abuse
Psychosocial correlates of substance abuse: a study in an Egyptian sample	Abd El Azim et al,2001	addiction unit institute of psychiatry Ain Shams university hospitals	- SCID - EPQ - Locus of control scale - Religious orientation scale	76 in patient and 78 out patient 50 control group	87.7% of abuser was poly substance abuse Bango was the most prevalent drug used

Study	Author	Site	Tool	Subject	Result
Substance use disorders among female secondary school students in Cairo	Hashem et al 2002	female secondary school students in Cairo	- Structured Questionnaire - GHQ - SCL-90	52 secondary students	Tobacco smoking 2.5% 3.9% of sample admitted illicit drug use
Substance use disorders among male general secondary school students in Cairo	Ahmed et al, 2005	6 schools from urban semi urban and rural area in Cairo	MEDSPAD	638 male general secondary school students	cigarette smoking was 30.4% Alcohol use was 24.3% hashish/bango use was 5.5% of sample

Study	Author	Site	Tool	Subject	Result
Psychological Profile and Prevalence of Psychoactive Substance Use among Suez Canal University Students in Ismailia	Yousef et al, 2005	faculty of medicine and faculty of commerce Suez Canal University	• Structured Questionnaire (GHQ) • The Family Assessment Device (FAD)	178 students from faculty of medicine and faculty of commerce	the prevalence of substance use was 39.3%
Substance dependence in a sample of Egyptian adolescents	Eid et al, 2006	El Khanka psychiatry hospital and Nile Sanatorium hospital	• Life Event Stress • Coping Processes Scale • EPQ • Guilt Feeling Questionnaire • Addiction Severity	40 patients 40 control	60% of patient had co morbid psychiatric disorder

Mood disorder

Prevalence

Abd El Hamid et al, 1989 studied the epidemiology of mood disorders in a selected geographical area in Monoufia governorate; the sample size in rural area while in urban area was 40,000 subjects. He found that the prevalence of major depressive disorder is 10.9% in rural population and 8.1% in urban population.

While the prevalence of bipolar disorder is 2.6% in rural population and 1.4% in urban population That of dysthymic disorder was 13.3% in rural population and 6.5% in urban population. Postpartum depression was present in 0.3% in rural population and 0.2% in urban population.

Another study revealed that the prevalence of unspecified depression was 11.37% in a study done on 1500 subjects attending primary health care while the prevalence of unspecified depression was 78% in 900 subjects attending psychiatric outpatient clinic in Kafr El Sheikh (*Fahmy et al, 2004*).

Moreover, the prevalence of depressive symptoms was 71.8% among 1000 students interviewed from 4 faculties of Assuit University (*El Gendawy et al, 2005*).

Age

As regard the age distribution of mood disorders in Egyptian community, *Abd El Hamid et al, 1989* found that major depressive disorder was more common among the age group of (36-45), in both urban and rural population. Bipolar disorder was more common among older age group (46 - 50 years) in rural population, while in urban population, it was more among young age group (18-25), dysthymic disorder was more among middle age group. In both urban and rural population, postpartum depression was more in young age of both populations.

While, unspecified depression was more prevalent among age group ranging from 45 years to 64 years (*Fahmy et al, 2004*).

On the other hand, the prevalence of depressive symptoms among Assuit University students was highest among the age group (20-22) years and the least prevalence was among age group (24-27) years (*El Gendawy et al, 2005*).

Gender

Abd El Hamid et al, 1989 and *Fahmy et al, 2004* found that the prevalence of depressive symptoms was higher among females than males while *El Gendawy et al, 2005* stated that the high prevalence among female was insignificant.

Marital state

Abd El Hamid et al, 1989 found that both major depressive disorder and bipolar disorder were more common in married subjects living in rural area and single subject living in urban area, while dysthymic disorder was more common in married groups of both rural and urban population. Furthermore, *Fahmy et al, 2004* found that the depressive symptoms were higher among married than unmarried individuals.

Occupation

The prevalence of unspecified depression was higher among retired and unemployed persons. (*Fahmy et al, 2004*)

Education

El Gendawy et al, 2005 revealed that the depression was higher among students of academic faculties than those of practical ones.

Socio economic state

On studying the socioeconomic and cultural factors of mood disorders, *Abd El Hamid et al, 1989* concluded that major depressive disorder was more common among illiterate and unemployed subjects in rural population and unskilled worker in the urban population. Bipolar disorder was more common among employee in rural population and owners of small business in urban population, while dysthymic disorder was more common among unskilled workers in urban population and professionals of the rural population.

On the other hand, the highest prevalence of depressive symptoms was among those having moderate socio economic class than low socio economic class (*El Gendawy et al, 2005*).

Family setting

El Gendawy et al, 2005 revealed that students of well constructed and stable family had tendency for mild symptoms. Those of family with one or both dead parent had tendency for moderate symptoms. On the other hand students with separated parents had the highest prevalence for severe symptoms

Depressive symptoms

El Gendawy et al, 2005 stated that 47.6% had mild depressive symptoms, 39.4% had moderate depressive symptoms and 13% had severe depressive symptoms. The most frequent symptoms among those with mild symptoms were sleep disturbance, depressed mood, guilt feeling and self blame and finally lack of concentration.

While, the most frequent symptoms for those with moderate grade were guilt feeling and self blame, depressed mood, sleep disturbance, lack of concentration and hopelessness. Moreover, the most frequent symptoms for those with severe grade of depressive symptoms were guilt feeling and self blame, hopelessness, depressed mood, lack of concentration, appetite disturbance, and lastly weakness and fatigability.

Table (7) list of studies on epidemiology of mood disorder

Study	Author	Site	Tool	Subject	Result
An epidemiological study of depressive symptoms in rural and urban population in Egypt	Abd El Hamid et al, 1989	Monoufia governorate rural population (Kapher El Bagour) and an urban population (El Bagour city)	• GHQ • BDI	Rural population: 5000 subjects urban population : 40.000 subjects	The prevalence of major depressive disorder is 10.9% in rural population and 8.1% in urban population
Prevalence and family dysfunction of unspecified depressive disorder among outpatient clinic attendants	Fahmy et al, 2004	Primary health care clinic Psychiatric outpatient clinic in Kafr El Sheikh.	• BDI • APGAR Scale • Hamilton Depression Scale	1500 subjects attending primary health care 900 subjects attending psychiatric outpatient clinic in Kafr El Sheikh.	The prevalence of unspecified depression was 11.37% in primary care clinic And in psychiatric outpatient clinic was 8.78%
Epidemiological aspect of depression among Assuit university students	El Gendawy et al, 2005	Assuit University	• Self reporting Questionnaire	1000 students from Assuit university	The prevalence of depressive symptoms was 71.8%

Neurotic Disorder

Psychodemographic study of anxiety in Egypt *Okasha et al, 1981*

120 patients suffered from anxiety state were collected from Ain Shams University outpatient clinic representing low social class and those attending private clinic representing middle & high social class. It was found that anxiety state was higher in age group between 20 - 29 years old. Crowding as a factor doesn't play a role in initiation or maintenance of anxiety. *Okasha et al, 1981* stated that anxiety was common among single males and married female. Moreover, the commonest symptoms were worrying 83% and irritability 73%. Table (8)

Table (8): prevalence of anxiety symptoms in the studied sample

Worrying	83%
Irritability	73%
Specific phobia	73%
Free floating anxiety	70%
Depressed mood	65%
Tiredness	64%
Restlessness	63%
Anergia & retardation	61%
Avoidance of anxiety	53%
Delayed sleep	45%
Situational anxiety	35%
Panic attack	30%
Early waking	22%
Drug abuse	5%
Suicidal plans	9%
Alcohol abuse	2%

(Okasha et al, 1981)

When compared between illiterates and high school graduates as regards the symptoms; **Okasha et al, 1981** found that poor concentration, loss of weight, delayed sleep, anergia, retardation and amnesia were commoner in educated group. On the other hand, the illiterates showed depersonalization, dissociative and conversion symptoms.

The prevalence of obsessive compulsive symptoms in a sample of Egyptian psychiatric patient (*Elkholy et al, 1997*)

Elkholy et al, 1997 studied 372 patients, 147 out of them within the group of schizophrenia, schizotypal and delusional disorder, 108 patients within the group of mood disorder & 105 were within the group of neurotic stress related & somatoform disorder and the control sample was 308 normal subject. The sample was chosen from outpatient clinic of the institute of psychiatry Ain Shams University.

The prevalence of obsessive compulsive symptoms is significant higher in the clinical psychiatric population 62.4% then that of control 38%. Table (9)

Table (9): prevalence of obsessive compulsive symptoms in psychiatric patient from the studied sample from outpatient clinic of institute of psychiatry Ain Shams University

Neurotic stress related & somatoform disorder	83.8%
Mood disorder	61.1%
Schizophrenia , schizotypal and delusional disorder	47.6%

(*Elkholy et al, 1997*)

There was no statistically difference between psychiatric patients & the general population with obsessive compulsive symptoms as regards gender, religion, marital state, residency or birth order.

In addition, all symptoms group of Yale Brown Obsessive Compulsive checklist (Y.B.O.C.S) were significantly more prevalent in clinical population than the general population except for hoarding and saving obsession. On the other hand the commonest obsessive compulsive symptoms present in control group were need for symmetry followed by cleaning obsession. Table (10)

In contrast to psychiatric patients the commonest symptoms were miscellaneous followed by somatic obsession. Table (11)

Table (10): the prevalence of obsessive symptoms in control group

Type of obsession	Percentage
Need for symmetry	16.6%
Cleaning washing	16.2%
Contamination	14.3%
Miscellaneous	14.3%

(Elkholy et al, 1997)

Table (11): prevalence of obsessive symptoms in patient group

Type of obsession	Percentage
Miscellaneous	39.2%
Somatic	33.6%
Contamination	33.3%
Checking	29.3%
Aggressive	26.3%
Cleaning washing	24.7%

(Elkholy et al, 1997)

Sociodemographic, clinical and psychometric profile of a sample of Egyptian patients with social phobia *El Raey et al, 2001*

A sample of thirty socially phobic patients and thirty matched normal control persons were recruited from two private clinics of psychiatry in Cairo. The study was done using Full Psychiatric Examination, Social Phobia Scale, Social Interaction Anxiety Scale, Beck Depression Inventory and Structured Clinical Interview for diagnosis of adult personality.

Both genders were included nearly equal in both patients group and control group. They were of young adult range and most of them were unmarried. The sample was mainly of middle socioeconomic class.

Patients group had reported significant anxiety and depressive symptoms before the symptoms of social phobia appear and they received some psychotropic medications for them. They had also more positive family history of social phobia (20%) than normal control group.

The results showed that patients with social phobia had more scores on Beck depression Inventory. The severity of social phobia as detected by Social Phobia Scale and Social Interaction Anxiety Scale was not correlated with any of the sociodemographic variables. The assessment of personality revealed that the socially phobic patients had more traits of avoidant personality, dependent personality, passive aggressive personality and borderline personality. There was history of strong behavioural inhibition during childhood in the patients with social phobia.

**Prevalence of anxiety among medical students in different grades:
An Egyptian Study *Bakr et al,2005***

The study was conducted on 1034 medical student in different grades during their practical sections. Socio-demographic characteristics were obtained through a self administered questionnaire followed by an interview questionnaire using the DSM-IV-TR criteria to diagnose anxiety and Hamilton Anxiety Scale to rate the severity of the symptoms. 61.9% of medical students suffered from anxiety. A high prevalence rate was found in the second year and in the first year in comparison to the fourth year and the fifth year. ***Bakr et al, 2005*** revealed that anxiety was more prevalent in females (62.5%) than males (37.5%). Medical study was the most annoying cause for anxiety. Irritability and cognitive problems in the form of lack of concentration were the most prevalent presenting symptoms among anxious medical students. According to Hamilton Anxiety Scale 18.8% of the study group suffered from moderate to severe anxiety.

Table (12): list of studies done on epidemiology of neurotic disorder

Study	Author	Site	Tool	Subject	Result
Psychodemo-graphic study of anxiety in Egypt	Okasha et al, 1981	Ain Shams University outpatient clinic Private clinic	Self Reporting Questionnaire	120 patients suffered from anxiety state	anxiety state was higher in age group between 20 - 29 years old
The prevalence of obsessive compulsive symptoms in a sample of Egyptian psychiatric patient	Elkholy et al, 1997	Outpatient clinic of the institute of psychiatry Ain Shams University	Y.B.O.C.S	147 patient with psychotic disorder 108 patient with mood disorder 105 patient with neurotic disorder 308 control	The prevalence of OCS is significant higher in the psychiatric population then that of control

Study	Author	Site	Tool	Subject	Result
Sociodemographic, clinical and psychometric profile of a sample of Egyptian patients with social phobia	El Raey et al, 2001	two private clinics of psychiatry in Cairo	• Psychiatric Examination • Social Phobia Scale • Social Interaction Anxiety Scale • BDI • SCID	30 socially phobic patients and 30 matched normal control	patients with social phobia had more scores on Beck Depression Scales
Prevalence of anxiety among medical students in different grades: An Egyptian Study	Bakr et al, 2005	Faculty of medicine Ain Shams University	• Self Administered Questionnaire • Hamilton Anxiety Scale	1034 medical student	61.9% of medical students suffered from anxiety

Prevalence of body dysmorphic disorder in an Egyptian sample *Guemei et al, 2005.*

The rate of Body Dysmorphic Disorder (BDD) was 3.98% among 503 students sample representing Egyptian universities and college students. In addition 3.18% were found to have sub-threshold BDD, 79.52% were simply dissatisfied and only 13.32% were found satisfied with their appearance.

There was no correlation found between incidence of BDD and age, gender or order of birth. Yet, males and older group of students (20-23yr old) were concerned with higher number of body areas than females and younger group (17-20yr old). Regarding the gender difference in the most dissatisfying body parts; males were found to be dissatisfied more by waist / abdomen, chest, facial hair, entire arm, all upper body, hands, chin and ears. While females were dissatisfied by head hair, nose, breasts, whole body, feet, all lower body, back of arm, cheeks and mouth.

Moreover, BDD and dissatisfaction with appearance was found more likely to be present among those having professional & university graduated mothers and lower numbers of brothers and sisters. On the contrary, satisfaction with appearance was found to be more frequent among those living in rural areas, having illiterate mothers, semiprofessional fathers & mothers and high numbers of brothers & sisters.

The university students who were diagnosed to have BDD reported more than one body area of concern, 50% of them reported at least 5 areas. Furthermore, 93.75% of those who have sub-threshold BDD reported more than one area of concern.

As regards the reaction of the patients and subjects to their BD symptoms, 70% of BDD subjects tried remedies and 50% of them tried more than one method to improve appearance of the most dissatisfying body parts.

Regarding types of remedies tried to improve the dissatisfying body parts; specific diet followed by specific exercise were the most common remedies tried. Subjects with BDD were more likely than those with sub-threshold BDD to try cosmetic surgery & hair transplant.

Also, deterioration in the academic level is higher in BDD and sub-threshold BDD subjects than in simply dissatisfied and satisfied groups

Body image dissatisfaction and its relationships with psychiatric symptomatology eating beliefs and self esteem in Egyptian females adolescents (*Hatata et al, 2008*)

Hatata et al, 2008 studied the prevalence of body dissatisfaction in 416 female students with age group of 15-18 years from secondary schools in Cairo and correlates this results with comorbid psychiatric symptoms especially eating disorder beliefs and self esteem. Using Body Image Distortion Questionnaire, Self Esteem Scale, Eating Disorder Beliefs Questionnaire and Symptoms Checklist 90-R, *Hatata et al, 2008* stated that 28.8% of students had low body image satisfaction, 31.7% had average satisfaction and 39.4% had high satisfaction. Those who reported low body image satisfaction had higher level of somatisation. In addition, body image dissatisfaction was correlated to negative eating beliefs and low self esteem. Table (13)

Table (13): prevalence of psychiatric symptoms in female with low body image satisfaction

<i>Somatization symptoms</i>	<i>30%</i>
<i>Anxiety symptoms</i>	<i>30%</i>
<i>Obsessive compulsive symptoms</i>	<i>23%</i>
<i>Depressive symptoms</i>	<i>20%</i>

Hatata et al, 2008

Table (14): list of epidemiological studies done on body dysmorphic disorder

Study	Author	Site	Tool	Subject	Result
Prevalence of body dysmorphic disorder in an Egyptian sample	Guemei et al, 2005.	university and college students in faculty of medicine and faculty of nursing-Ain Shams University, faculty of art Cairo University and school of nursing El-Abassia mental hospital	• GHQ • Body Dysmorphic Disorder Examination Self Report	503 student Egyptian university and college students	The rate of (BDD) was 3.98%
Body image dissatisfaction and its relationships with psychiatric symptomatology eating beliefs and self esteem in Egyptian females adolescents	Hatata et al, 2008	4 secondary schools in Cairo (2 public and 2 private schools)	• Body Image Distortion Questionnaire • Self Esteem Scale • Eating Disorder Beliefs Questionnaire • Symptoms Checklist 90-R	416 female students with age group of 15-18 years	28.8% of students had low body image satisfaction

Child and adolescent psychiatry

Anxiety disorder

Prevalence

The prevalence of severe and very severe anxiety level was 27.6% among 98 female students of secondary nursing school in Banha University according to Taylor Anxiety Scale. (*Abd El Hady et al, 1994*)

While according to Structured Clinical Interview DSM-IV-TR the prevalence of generalized anxiety disorder was 2.35%. in a study done on students of 4 schools and 2 faculties. The total sample was 1200 students with mean age 15.5 years. (*Hammouda et al, 2002*)

Interestingly in *Abu Hatab et al, 2004* study done on 193 students from four schools in Elmaadi and Helwan in the 3rd, 4th, and 5th primary grades *Abu Hatab et al, 2004* stated that about 5.699 % of total sample were considered phobic and another 21.76% were at risk to develop phobia.

On the other hand the prevalence of social phobia was 19.6 % among a sample of 555 secondary school students and 11.3% among a sample of 203 students university in a study done by *Ragheb et al, 2005*. while in *Hassan et al, 2005* study, the prevalence of social anxiety among a sample consists of 800 age school children selected from five governmental schools in El Sharkia. He reported that prevalence of social anxiety disorder was 23.9% and for social anxiety symptoms was found to be 43.1% using Children Anxiety Scale and 63.1% using Fear Questionnaire.

Mohamed et al, 2007 found that the prevalence of social phobia symptoms was 38.5% of a sample of 1000 students (with age range between 17-22 years) from al Azhar University according to Fear Questionnaire.

Moreover, ***Ibrahim et al 2008*** stated that the prevalence of social phobia was 18.8% among 780 students from primary and preparatory schools

Gender

Most of the studies of anxiety revealed that anxiety was more common among females. ***Mohamed et al, 2007*** stated that the prevalence of social phobic symptoms was 65.8% in females while in males it was 34.1%. This result was consistent with ***Ibrahim et al 2008*** who reported that females expressed more anxiety symptoms than males 26.2% versus 11.6% respectively. (***Hammouda et al,2002***) (***Abu Hatab et al, 2004***) (***Ragheb et al,2005***)(***Hassan et al,2005***)

Age

Higher anxiety level was encountered among students at age group 19 years and more in a study done on 98 female students of secondary nursing school in Banha University. (***Abd El Hady et al, 1994***)

Moreover, generalized anxiety disorder was 3.5% among age group from 16-18 years while 2.2% among age group 12-15 years in a study done on students of 4 schools and 2 faculties with total sample 1200 students with mean age 15.5 years. (***Hammouda et al,2002***)

Hassan et al, 2005 found that the highest prevalence of anxiety symptoms was at age of 11 years in a sample consists of 800 age school children selected from 5 governmental schools in el Sharkia.

On the other hand in a study conducted on a sample of 1000 students from Al Azhar University with age range between 17-22 years the social anxiety symptoms were more prevalent among students age 19-21 years 41.6% followed by more than 21 years 33.2% and lastly less than 19 years 25.2 %.(***Mohamed et al, 2007***)

Social anxiety symptoms were more prevalent among the age group of 10 years then other age group in a study of 780 students from primary & preparatory schools. (*Ibrahim et al 2008*)

Residency

Abd El Hady et al, 1994 found that the residence has significant relation with anxiety. Among 98 female students of secondary nursing school in Banha University the prevalence of anxiety was 38.1% in urban area while 19.6% in rural area.

While social phobia prevalence was 11% in urban area and 27% in semi urban area according to *Ibrahim et al 2008* who study 780 students in primary and preparatory schools from urban and semi urban areas.

Socio economic state

Abd El Hady et al, 1994 found that highest anxiety level was among female of very low & low social group while *Ragheb et al, 2005* reported that there was no correlation between socioeconomic status and social phobia.

In contrary *Ibrahim et al 2008* stated that the prevalence rate of social phobia in nursing students was higher in moderate social class 28.4% than in low social class 17.3% and low rate in higher social class 10.8%.

Moreover, many symptoms of agoraphobia were significantly presented among primary students of high social class as fear of heights while fear of darkness and fear of animal were commonly manifested among children of low social class. (*Abu Hatab et al, 2004*)

Risk factor

Abd El Hady et al, 1994 stated different risk factors with significant relation in development of anxiety in a sample of 98 female students of secondary nursing school in Banha University. High anxiety level was encountered among students with positive history of childhood problems also among students born to older parents. No significant relation was found between anxiety and neither practice of hobbies nor birth of order.

Clinical picture

15% of students with generalized anxiety disorder had neurotic trait the most common was nail biting 5.8% stuttering 3.2% and thumb suckling 2.2%. (**Hammouda et al, 2002**)

In a study done on secondary school students and university students **Ragheb et al, 2005** reported that in males' students there was fear of embarrassment, distress by trembling or shaking followed by avoiding criticism,

avoiding public speaking, being bothered by blushing and fear of criticism. Concerning females, there was fear of embarrassment, fear of criticism, distress by distress by trembling or shaking, avoid public speaking, avoid criticism and distress by sweating in addition to physiological symptoms in form of trembling, sweating, blushing and palpitation.

While **Mohamed et al, 2007** revealed that the most common fears were talking to people in authority, being the center of attention and meeting strangers.

Psychiatric comorbidity

There was significant positive correlation between symptoms of social anxiety disorder and symptoms of other psychiatric disorders (major depression, generalized anxiety, obsession, panic attack, depersonalization and derealization). (*Hassan et al, 2005*) This result was in agreement with *Ibrahim et al 2008* who stated that 9.5% of children with social anxiety disorder showed symptoms of depression. In contrary, (*Hammouda et al,2002*)found no significant relation was noticed between the prevalence of generalized anxiety disorder & prevalence of physical or psychiatric illness.

In a study conducted on a sample of 1000 students from Al Azhar University *Mohamed et al, 2007* reported that there was high co-morbidity between social phobia and agoraphobia in 40.4% of the sample. While 47.7% of students had other anxiety disorders and 12.3% of phobic patient feel miserable or depressed. Also 16.7% boys versus 10.2% girls have depressive disorders. As regards personality disorder, the study showed that avoidant personality was 15.8% and other kind of personalities was associated with 21.3% of patients with social phobia. Concerning substance misuse 37.6% of boys reported occasional experimentation of psycho-active substance versus 5.1% in girls while 14.7% reported current use of cigarettes.

Table (15): list of epidemiological studies done on childhood anxiety disorder

Study	Author	Site	Tool	Subject	Result
Study of anxiety disorder among students of secondary nursing schools in Benha University hospital	Abd El Hady et al, 1994	Secondary nursing school in Banha University	Taylor Anxiety Scale	98 female students	The prevalence of anxiety level was 27.6%
Prevalence of generalized anxiety disorder and its risk factors in a sample of schools and universities students	Hammouda et al, 2002	2 preparatory schools 2 secondary schools Faculty of art Ain Shams University Faculty of art Kafr El Sheikh	- GHQ - Anxiety Scale - Structured Clinical Interview DSM-IV-TR	1200 students with mean age 15.5 years	The prevalence of generalized anxiety disorder was 2.35%
Childhood phobia: Screening among a sample of non-referred primary school Egyptian children	Abu Hatab et al, 2004	4 schools in Elmaadi and Helwan	El-Taeab children phobia scale	193 Children in the 3rd, 4th, and 5th primary grades	5.69% were phobic and 21.76% were at risk to develop phobia

Study	Author	Site	Tool	Subject	Result
Social phobia in secondary school and university student an Egyptian study	Ragheb et al, 2005	Secondary schools Faculty of commerce Faculty of medicine Ain Shams University	Social Phobia Inventory	555 students of secondary school 203 university students	prevalence of social phobia 19.6 % for school and 11.3% for university group
Social anxiety disorder among a sample of Egyptian children	Hassan et al, 2005	5 governmental schools in El Sharkia	- Children Anxiety Scale - Fear Questionnaire	800 school children	Prevalence of social anxiety disorder was found to be 23.9%

Study	Author	Site	Tool	Subject	Result
Prevalence of social anxiety symptoms among a sample of Egyptian adolescents	Mohamed et al, 2007	Al Azhar University	• Fear Questionnaire • GHQ • Liebowitz Social Anxiety Scale • Brief fear of negative evaluation scale	1000 students from Al Azhar University) age range between 17-22 years	The prevalence of social phobia symptoms was 38.5%
Prevalence of social anxiety disorder in late childhood and early adolescence among schools in Cairo	Ibrahim et al 2008	primary and preparatory schools from urban & semi urban area in Cairo	• Structured Clinical Interview DSM-IV-TR	780 students	The prevalence of social phobia was 18.8%

Obsessive compulsive disorder

Prevalence

Ismail et al, 1998 studied 900 students(340 secondary school students & 120 from faculty of medicine female, 130students from faculty of literature female, 160 from faculty of science males and 150 from faculty of literature males). They found that the prevalence of obsessive compulsive trait was 26.2% while the prevalence of obsessive compulsive symptoms (OCS) was 43.1 %. In addition, the prevalence of (OCS) in secondary school students was significantly higher than university students. Also the prevalence of (OCS) was significantly higher in faculty of literature 32.7% then in faculty of medicine and science 28.6%.

While, the prevalence of obsessive compulsive disorder (OCD) among female secondary school student in Cairo was 1.2% while the prevalence of (OCS) was 13 %.(*Soltan et al, 2005*)

Age

Ismail et al, 1998 found that (OCS) were more prevalent among the age of 15 – 17 years. This result was consistent with *Soltan et al, 2005* who reported that the mean age of female secondary students with (OCD) was 14.4 years and that of (OCS) was 15.15 years.

Gender

As regard the gender *Ismail et al, 1998* stated that the prevalence of (OCS) was higher in female 76.6% then males73.8%.

Order of birth

Ismail et al, 1998 stated that the prevalence of (OCS) was higher in first order of birth. This result was in contrary with *Soltan et al, 2005* who reported that there was no significant difference between (OCD) and (OCS) order of birth.

Residency

Interestingly, the residence doesn't affect prevalence of (OCD) or symptoms but strongly affect the content of obsessive compulsive symptoms. Also, there was significant difference between urban & rural area in prevalence of some symptoms like hate of dirt and contamination, worry about being clean were higher in urban, while in rural area, the obsessive compulsive symptoms included repeated word or thoughts , checking , spending extra time in home work excess conscience , indecision and lack of confidence. (*Soltan et al, 2005*)

Socioeconomic state

Prevalence of both obsessive compulsive symptoms and disorders did not differ between public and private school. However the following obsessive compulsive symptoms were significantly more in public school students : repeated words or thoughts , checking several time , hating dirt and contamination, worry about being clean enough, at night putting things just so , anger if someone means desk , spending extra time in home work , repetition until correct , trouble finishing school work , excess conscience , indecision and lack of confidence. Meanwhile “have to do certain things” was the only symptom that was more common in private school with significant difference. (*Soltan et al, 2005*)

Psychiatric co morbidity

The study found that there was high psychiatric co morbidity with obsessive compulsive disorder. The commonest comorbid disorder was dysthymia , separation anxiety , social phobia specific phobia in 28.6% for each while major depression and agoraphobia were 14.3%.table (16) (**Soltan et al, 2005**)

Table (16): psychiatric comorbidity with obsessive compulsive disorder among female secondary school student in Cairo

Dysthymia	28.6%
Separation anxiety	28.6%
Social phobia	28.6%
Specific phobia	28.6%
Major depression	14.3%.
Agoraphobia	14.3%.

(Soltan et al, 2005)

Clinical picture

The most common obsessive symptoms were aggressive obsession 97% contamination obsession 95.4%, and the least common was sexual obsession 46.4%.table(17) (**Ismail et al, 1998**)

Table (17): the prevalence of obsessions in a sample of 900 university & secondary school students

Aggressive obsession	97%
Contamination obsession	95.4%,
Miscellaneous	91%,
Religious obsession	82 %,
Need for symmetry	67.8%
Somatic obsession	66.8%
Hoarding & saving	56.2%
Sexual obsession	46.4%

(Ismail et al, 1998)

While, the most common compulsion symptoms were cleaning and washing 83%, while the least common was counting compulsion 30.7%.table(18) *(Ismail et al, 1998)*

Table (18): the prevalence of compulsive symptoms in a sample of 900 university & secondary school students

Cleaning and washing	83%
Miscellaneous compulsion	82.2 %
Checking	79 %,
Repeating	74%
Ordering & arranging	62.6%
Hoarding & collecting	39%
Counting compulsion	30.7%.

(Ismail et al, 1998)

Table (19): list of epidemiological studies done on obsessive compulsive disorder in child

Study	Author	Site	Tool	Subject	Result
Prevalence of Obsessive Compulsive Disorder among female secondary school students in Cairo	Soltan et al, 2005	2 school (public and private) from urban, semi urban and rural area.	• Leyton Obsessional Inventory Child Version • Mini International • Neuropsychiatric • Interview for Children	607 female students aged from 14 – 17 years	The prevalence rate of (OCD) was 1.2% The prevalence of (OCS) was 13%
The prevalence of obsessive compulsive symptom in a sample of Egyptian students	Ismail et al, 1998	Secondary school Faculty of medicine girls Faculty of literature girls Faculty of science boys Faculty of literature boys	• GHQ • The Arabic Obsessive Scale • Y.B.O.C.S • Yale Severity Scale • Psychiatric Interview	900 students 340 secondary school students 120 from faculty of medicine girls 130 faculty of literature girls 160 from faculty of science boys 150 from faculty of literature boys	The prevalence of (OCS) was 43.1 %

Mood disorder

Prevalence

In a study done by *Mohamed et al, 1989* it was found that the prevalence of depression among adolescent 15-18 years old of both sexes was 7.7% according to Beck Depression Inventory and 4.95% according to DSM III-R in which major depressive episode was 2.53%, dysthemic disorder 2.42% and depressive symptoms was 2.75%.

As regards the extent of depressive symptoms among females' secondary school students in Cairo *Sabry et al, 2008* found that 15.3% of students had depressive symptoms and the extent of depressive disorder was 13.3% distributed as major depressive disorder 5%, dysthymic disorder 3.3%, and 5% had sub threshold depressive symptoms.

Age

Mohamed et al, 1989 reported that the depression was common among the age 16-17 years for both sexes while Sabry et al, 2008 stated that there was no significant correlation of age factors with depression.

Gender

Mohamed et al, 1989 reported that there was no statistical significance between both sexes.

Education

Sabry et al, 2008 reported that the deteriorated academic achievement was found to be important risk factor for adolescent depression.

Psychiatric comorbidity

It was found that generalized anxiety disorder was the most prevalent co-morbid diagnosis to depression followed by social phobia then substance abuse. (*Sabry et al, 2008*)

Risk factor

As regard risk factor for depression **Mohamed et al, 1989** reported that the depression was more common among married adolescent. While Sabry et al, 2008 found that the history of negative life events, termination of romantic relation, lacking of outdoor activities and quarrelsome home atmosphere represented strong risk factor for adolescent depression.

Severity

Sabry et al, 2008 found that 60% of depressed female students were within sub threshold grade of depressive severity, 30% had mild depressive state and 10% had moderate depressive state with no reported severe case.

Depressive symptoms

In **Mohamed et al, 1989** study the commonest symptoms of depression were helplessness and hopelessness followed by loss of appetite, sad mood and headache. The least common were psychomotor retardation, tingling & suicide.

While, the most common depressive symptoms are the somatic symptoms followed by fatigue or loss of energy. Moreover, the prevalence of suicidal symptoms including death wishes, suicidal ideation and suicidal attempts was 32.5% among depressed students. In addition the study found that 43% of students with sub threshold depression had suicidal symptoms. (**Sabry et al, 2008**)

Past history

Sabry et al, 2008 revealed that there was strong association between depression and past history of general medical condition.

Table (20): list of epidemiological studies done on depression in children

Study	Author	Site	Tool	Subject	Result
An epidemiological study of depression among sample of Egyptian adolescent 15-18 years old of both sexes	Mohamed et al,1989	village of Bulibis El Sharqya government	- Structured Clinical Interview DSM III-R - BDI	908 Egyptian adolescent 15-18 years old of both sexes	The prevalence of depression was 7.7%
Prevalence of depression in a sample of Egyptian secondary schools female students	Sabry et al,2008	Secondary school in Cairo	- Structured Clinical Interview DSM-IV - Children Depression Inventory - Hamilton Rating Scale for Depression	602 females students	The prevalence of depressive disorder was 13.3%

Behaviour disorder

Prevalence

The prevalence of conduct disorder was 6.35% in a sample of 425 primary school children. While the prevalence of oppositional defiant disorder was 2.13 %. (*Hamouda et al, 1984*) This result was consistent with *Ibrahim et al, 1994* who stated that the prevalence of behaviour disorders among children in primary school in rural and urban area was 7.74%.

Residency

The prevalence of conduct disorder in urban area was higher than that of rural area (*Hamouda et al, 1984*) This result was in agreement with Ibrahim et al, 1994 who found that the prevalence of behaviour disorders among children of urban area was 10.5% and that of rural area was 5.16%.

Gender

Conduct disorder was more common in males 9.3% than female 3.33 % (*Hamouda et al, 1984*) the same result was revealed by Ibrahim et al, 1994 who stated that the prevalence of behaviour disorder in boys was 11.41% and 4.01% for girls.

Age

Concerning the age, behavioural disorders were more prevalent in elder children (*Hamouda et al, 1984*) (*Ibrahim et al, 1994*)

Risk factor

Hamouda et al, 1984 revealed that authoritative parents, disturbed parental relation and overprotective parents were highly associated with conduct disorder. While The family size more than 7 members, the history of psychiatric disorder, smoking mother, working mother, violent hobbies, and early hospitalization act as a risk factor for behaviour disorder.

On the other hand *Ibrahim et al, 1994* found that there were several factors that may account for the occurrence of behaviour disorders in children as lacking of a properly ideal person,

Order of birth

Hamouda et al, 1984 found that 66.6% of the affected children were the eldest sib. The same result was revealed by *Ibrahim et al, 1994* who reported that there was significant association between the first born child and the occurrence of behaviour disorder.

Developmental history

There was significant association between occurrence of behaviour disorder and multiple risks as mother illness during pregnancy, difficult labor, unwanted pregnancy, bottle feeding and finally delayed milestones of growth and development. (*Ibrahim et al, 1994*)

Psychiatric comorbidity

Hamouda et al, 1984 reported several symptoms of conduct disorder as aggression (Physical, verbal and aggression against object) stealing and lying. He stated that 74.07% of the conduct children did not admit their disturbed behavior.

Moreover, conduct disorder was highly associated with all types of neurotic traits, nocturnal enuresis, tic disorder and eating disorder. (*Ibrahim et al, 1994*)

Table (21): list of epidemiological studies done on behaviour disorder

Study	Author	Site	Tool	Subject	Result
An epidemiological study of conduct disorder in primary school children	Hamouda et al,1984	3 primary schools	• Draw a man Test • self reporting questionnaire	425 students	The prevalence of conduct disorder was 6.35%
Epidemiology of behavior disorders in primary school children (6-11years) in urban and rural areas in	Ibrahim et al,1994	Primary schools	• Good Enough Harris Test • EPQ	132cases 132children as control group	the prevalence of behavior disorders was 7.74%

Prevalence of some psychiatric symptoms in adolescent students in Assuit

In *El Sherbini et al, 1995* study, a sample of 970 students in Assuit (478 students from preparatory & 492 from secondary) was chosen to estimate the prevalence of psychiatric symptoms using Middle Sex Hospital Questionnaire. The age of students ranged from 13- 18 years, 525 were male & 445 were females. *El Sherbini et al, 1995* found that the prevalence of psychiatric symptoms was 82.9% in males while in females was 87.1%. The highest prevalence was obsessive symptoms 61.2% followed by depressive symptoms 50%. In addition the prevalence of psychiatric disorder was 21% of males and 14% of females. Table (22)

Table (22): prevalence of psychiatric symptoms in a sample of adolescent students in Assuit

Psychiatric symptoms	Sample	Males	Females
Obsessive symptoms	61.2%	63.2%	58.9%
Depressive symptoms	50%	48%	52.45%
Hysterical symptoms	34.7%	36.2%	33.2%
Phobic symptoms	33.1%	23.8%	44%
Anxiety symptoms	26.7%	20.4%	34.3%
Psychosomatic symptoms	19.4%	20.8%	17.8%

El Sherbini et al, 1995

As regard the age younger adolescent (13-15years) had higher rate of psychiatric symptoms then older adolescent (16-18 years). Table (23)

Table (23): prevalence of psychiatric symptoms according to age group from the studied sample

Psychiatric symptoms	13-15 years	16-18 years
Anxiety	28.9%	24.6%
Phobia	42.3%	24.2%
Obsession	67.4%	55.3%
Psychosomatic	24.3%	14.6%
Hysteria	38.7%	30.9%
Depression	46%	53.9%

El Sherbini et al, 1995

El Sherbini et al, 1995 stated that students living in rural area had significantly higher rate of psychiatric symptoms than those living in urban area. As regards social class, it was found that adolescent of low social class had higher rate of psychiatric symptoms than those of high social class especially in anxiety, phobia, obsessions, psychosomatic and depressive symptoms. While adolescent of high social class had higher rate than those of low social class as regard hysteria.

Moreover, family disharmony between adolescent & their parents had significant impact on their psychological health. In addition working of father abroad was significant higher rate of psychiatric symptoms among adolescent. On the other hand, significant negative correlation was found between score of psychiatric symptoms & scholastic achievement except for hysteria. Students attending mixed school had significantly higher rate of psychiatric symptoms except hysteria *El Sherbini et al, 1995*

An epidemiological study of psychiatric disorder in school children from the age 9-12 in Alexandria *Abou Rayan et al,2001*

Abou Rayan et al, 2001 studied the prevalence of psychiatric disorder in school children at age 9-12 years in an urban and rural area. The sample was 1000 students using parent questionnaire & teacher questionnaire. It was found that the total prevalence of psychiatric disorder in children was 23.7% in which attention deficit disorder was the most prevalent disorder 5.8% followed by enuresis 3.9%. Table (24)

Table (24): prevalence of psychiatric disorder in 1000 children at age 9-12 years from school in Alexandria

Attention deficit disorder	5.8%
Enuresis	3.9%
Conduct disorder	3%
Separation anxiety	2.9%
Speech disorder	2.8%
Opposition defiant disorder	2%
Generalized anxiety disorder	2%
Phobic disorder	0.6%
Encoporesis	0.3%
Tic disorder	0.2%
Depressive disorder	0.2%

Abou Rayan et al, 2001

As regard the gender, psychiatric disorder was common in males 27% then females 19.7%.

The prevalence of enuresis among children in the governmental rural school was 5.1% while it was 1.8% in urban private school.

In another section of the study **Abou Rayan et al, 2001** estimated the prevalence of psychiatric disorder in 100 children 9 – 12 years attending the outpatient clinic at the students hospital in Alexandria by using DSM-IV criteria. The prevalence of enuresis was 29% followed by attention deficit disorder 12%. Table (25)

Table (25): prevalence of psychiatric disorder in 100 children 9 – 12 years attending the outpatient clinic at the students' hospital in Alexandria

Enuresis	29%
Attention deficit disorder	12%.
Generalized anxiety disorder	12%
Conduct disorder	10%
Depressive disorder	10%
Opposition defiant disorder	10%
Phobic disorder	7%
Separation anxiety	6%
Stuttering	3%
Tic disorder	2%

Abou Rayan et al, 2001

Table (26): list of epidemiological studies done on psychiatric disorders in childhood and adolescence

Study	Author	Site	Tool	Subject	Result
Prevalence of some psychiatric symptoms in adolescent students in Assuit	El Sherbini et al, 1995	preparatory & secondary schools in Assuit	• Middle Sex Hospital Questionnaire	970 students in Assuit (478 students from preparatory & 492 from secondary)	the prevalence of psychiatric symptoms was 82.9% in males and in females 87.1%
An epidemiological study of psychiatric disorder in school children from the age 9-12 in Alexandria	Abou Rayan et al, 2001	Schools in urban and rural area students hospital in Alexandria	• Parent Questionnaire • Teacher Questionnaire • DSM-IV criteria	1000 students at age 9-12 years 100 children 9 – 12 years attending the outpatient clinic at the students hospital	the total prevalence of psychiatric disorder in children was 23.7%

Epidemiological study of attention deficit hyperactivity disorder in elementary school in Alexandria *Rashed et al, 1994*

The prevalence of attention deficit hyperactivity disorder (ADHD) was 19.56% in a study done on 501 pupils in elementary school in Alexandria using Conner's rating scale. There was no significant difference between boys & girls in occurrence of ADHD. Also there was no significant difference between private & governmental school.

Moreover, High proportion of ADHD pupil had illiterate mother, they were more likely to have father work as manual worker 15.3% and less likely to have father working as professional or semi professional 43.88%. (*Rashed et al, 1994*)

The prevalence of child abuse and its effect on the mental health Riyadh et al, 2007

Riyadh M et al, 2007 studied 304 children with age range 13 to 16 years who were living in the suburban area in the south of Cairo. They found that the prevalence of child abuse and neglect among the subjects was 77.3% by using Childhood Traumatic Questionnaire (CTQ). Moreover, the majority of the subjects had more than one type of abuse. Table (27)

Table (27): prevalence of child abuse among males and females from the studied sample

	Male	Female
Emotional neglect	25.4%	15.7 %
Emotional abuse	7.9%	13.2 %
Physical abuse	17.5 %	7.5%
Sexual abuse	1.7%	15.7%

(Riyadh M et al, 2007)

Psychiatric-Epidemiological-Psychosocial study of stammering in Egyptian children (Bishry et al, 1970)

In *Bishry et al, 1970* study a sample of 79 stammerer school children aged between 6-12 years, and 79 healthy students were included as controls, they are selected from the same class and are matched with the cases regarding age and sex. The sample is subjected to Goodenough Test for intelligence in children, Verbal Fluency Test Personality Test and EEG.

Bishry et al, 1970 reported that the prevalence of stammering is highest in age group 6-7 years. It was noticed that out of 79 stammerers 51.8% of cases began their disability at age of 2-3 years and 39.3% of cases began after their speech was well established. While the disability is noticed after the age of 9 years in 8.9% of cases.

Table (28): List of miscellaneous studies on epidemiology of childhood disorders

Study	Author	Site	Tool	Subject	Result
Psychiatric-Epidemiological-Psychosocial study of stammering in Egyptian children	Bishry (1970)	4 private and 10 governmental schools from the eastern Cairo.	- Good-enough Test - Verbal Fluency Test	79 stammerers and 79 healthy controls 6-12 years	the prevalence of stammering is highest in age group 6-7 years
Epidemiological study of attention deficit hyperactivity disorder in elementary school in Alexandria	Rashed et al, 1994	elementary school in Alexandria	Conner's Rating Scale	501 pupils	The prevalence of ADHD was 19.56%
The prevalence of child abuse and its effect on the mental health	Riyadh et al, 2007	suburban area in the south of Cairo	Childhood Traumatic Questionnaire (CTQ)	304 children between age 13 and 16 years	the prevalence of child abuse and neglect among the subjects was 77.3%

Geriatric psychiatry

Depressive disorders

Prevalence

Abdel Hady et al, 1999 found that the prevalence of depression in elderly was 6.7% in a study done on 900 elderly attending the health insurance outpatient clinic in urban and rural area.

While *Abd El Kawy et al, 2004* found that the prevalence of depression in institutionalized elderly was 53.73% compared to 23.38% of the non institutionalized elderly. This result was consistent with *Abdel Aal et al, 2005* who stated that the prevalence of depression among elderly was 55% in study done on residents of elderly homes in Cairo.

On the other hand in a study done on elderly patients from general medical wards in Kasr Al Aini hospital found that 40% had adjustment disorder with depressed mood 14%with dysthymic disorder and 10% suffered from minor depression (*Saleh et al, 2007*).

Gender

(*Abdel Hady et al, 1999*) reported that the prevalence of depression was 10.6% in females while in males it was 2.3%. Also *Abdel Aal et al, 2005* study showed that elderly women had higher prevalence of depression 62.5% then males 40%.

Marital status

Abdel Hady et al, 1999 found that the prevalence of depression in widowed elderly was higher 10.1% than married one 4.5 %. This result was inconsistent with *Abdel Aal et al, 2005* who declared that there was no statistically significant relation between depression and marital status.

On the other hand in comparative case control study of 100 subjects from general medical wards in Kasr Al Aini hospital *Saleh et al, 2007* found that 58% of the depressed group was married in comparison to 84% of the non depressed control group.

Socio economic state

Abdel Hady et al, 1999 reported that depression was higher among elderly with very low socioeconomic status 7.8% then those with higher socioeconomic status 2.3 %. This result was inconsistent with *Abdel Aal et al, 2005* and *Saleh et al, 2007* who reported that there was no statistically significant relation between depression and socio economic state.

Physical illness

Depression was higher among elderly who suffered from chronic somatic disease (*Abdel Hady et al, 1999*). Also, *Abd El Kawy et al, 2004* found significant correlation between depression and the presence of more than one medical illness among the institutionalized elderly. This result was inconsistent with *Abdel Aal, 2005* and *Saleh et al, 2007* who reported no association between the occurrence of depression and neither the severity, nor the multiplicity of medical illness.

Residency

The prevalence of depression in the elderly living alone was 12.4% while living with extended family was 8% and those living in nuclear family was 3.3% (*Abdel Hady et al, 1999*).

Also, the high prevalence of depression in the elderly might be related to the institutionalization which may reach 53.73% among institutionalized elderly compared to 23.38% of the non institutionalized elderly (*Abd El Kawy et al, 2004*) with no statistically significant relation between depression and duration of stay. (*Abdel Aal, 2005*)

Education

The prevalence of depression was higher among illiterate elderly 10.5% then educated ones 2% (*Abdel Hady et al, 1999*).

Depressive symptoms and severity

Depressive illness in the elderly was more likely to be present in the form of single episode characterized by hypochondriacal worries, psychomotor retardation and weight loss. While agitation, psychotic feature and chronicity were minor features for depression in elderly. (*El Khouly et al, 1993*)

Severe depression was found in 69.44% of the depressed institutionalized elderly compared to 42.55% of the non institutionalized depressed elderly. (*Abd El Kawy et al, 2004*)

Risk factor

Saleh et al, 2007 revealed that one of most important risk factor for development of depression in old age is the presence of past history of depression. Other risk factor included the presence of family conflicts, elder mistreatment, financial problem, death of dear person and low social network. (***El Khouly et al, 1993***) (***Abd El Kawy et al, 2004***)

Somatization disorder

Abdel Hady et al, 1999 reported that the prevalence of somatization disorder was 9% among 900 elderly attending the health insurance outpatient clinic in urban and rural area. *Abdel Hady et al, 1999* revealed that females and widowed elderly were at higher risk for somatisation. Several factors may be associated with somatisation in elderly population as living alone, illiterate, still working and very low socioeconomic status. Also the prevalence of somatization disorder was higher among elderly suffering from chronic somatic disease.

Anxiety disorder

The prevalence of anxiety disorder according to symptoms checklist was 3.6% among 900 elderly attending the health insurance outpatient clinic in urban and rural area. The prevalence of anxiety disorder in widowed elderly was higher than married ones. *Abdel Hady et al, 1999* reported that women had higher prevalence of anxiety disorder. Concerning residency, it was found that anxiety was significantly higher among elderly living in urban area 5.3% than those living in rural area 1.8%. On the other hand living alone, illiteracy, very low socioeconomic status and still working were a risk factor for anxiety disorder. While there was no significant statistical relation between chronic somatic disease and anxiety disorder in elderly. (*Abdel Hady et al, 1999*)

Table (29): list of epidemiological studies done on geriatric psychiatry

Study	Author	Site	Tool	Subject	Result
Depressive illness in the elderly psychosocial and demographic study	El Khouly et al 1993	Psychiatric department in Mansoura University hospital	• BDI • Life Events • Questionnaire	24 elderly patients with late onset depression 22 middle aged depressed patients	Depressive illness in the elderly characterized by hypochondriacal worries weight loss and psychomotor retardation
Correlation between sociodemographic characteristics & occurrence of psychiatric disorder among geriatric in 2 areas in Egypt one rural & one urban	Abdel Hady et al, 1999	Rural area Meet Halfa village and urban area Cairo.	• GHQ • SCL-90	900 elderly patient aged 60 years and over	Prevalence of somatization disorder 9% Prevalence of depression 6.7% Prevalence of anxiety 3.6%

Study	Author	Site	Tool	Subject	Result
Depressive symptoms among elderly living in geriatric homes in Alexandria	Abd El Kawy et al 2004	geriatric homes in Alexandria	- GDS - Social Scale	401 elderly living in geriatric homes in Alexandria 401 non institutionalized elderly	The prevalence of depression among institutionalized elderly was 53.73% and 23.38% of the non institutionalized elderly
Prevalence of Depression among Residents Living In Elderly Homes in Cairo	Abdel Aal et al, 2005	5 elderly home in Cairo	GDS	60 elderly Residents Living In Elderly Homes in Cairo	The prevalence of depression was 55%
Depressive disorders among a sample of Egyptian old patients in a medical ward	Saleh et al, 2007	Kasr Al Aini hospital	- self Reporting Questionnaire - MMSE - SCID - GDS - otter Internal Control - external Scale - cumulativeIllness Rating Scale	100 patients from general medical wards in Kasr Al Aini hospital	The prevalence of minor depression was 10%

Women mental health

Premenstrual dysphoric disorder

Prevalence

Zarif et al, 1999 studied premenstrual dysphoric disorder PMDD in a sample of females in childbearing period selected from Ain Shams university hospitals, faculty of medicine and schools of nursing; they found that 6.5% of females had PMDD. This result was consistent with **Mikhael et al, 2000** study done on 200 nurses at Benha university hospital in childbearing period 7% were found to fulfill the criteria of premenstrual dysphoric disorder (PMDD). According to DSM-IV-TR 51% were found to have some premenstrual symptoms and 42% were symptoms free.

Age

As regard the age there was no age difference between females with PMDD and those without PMDD. (**Zarif et al,1999**) (**Rizkalla et al,1993**)

Socio economic state

Rizkalla et al, 1993 reported that the premenstrual syndrome tends to be more at higher social classes. This result was conflicting with **Zarif et al, 1999** who found that there was no association between PMDD and socio economic state.

Marital status

Zarif et al, 1999 found no difference between female with PMDD and those without regarding the marital state.

Occupation

Zarif et al, 1999 reported that there is high incidence of PMDD within working female.

Risk factor

Zarif et al, 1999 found that PMDD had more occurrences in troublesome home atmosphere.

Menstrual and obstetric history

As regards menstrual history, *Zarif et al, 1999* reported that there was high prevalence of menorrhagia and dysmenhorrea in females suffering from PMDD. While there was no association between PMDD and parity, age of menarche, mode of delivery or infertility. Also there was no relation between PMDD and level of estrogen and progesterone (during late luteal phase) or prolactin. (*Mikhael et al, 2000*)

Psychiatric co morbidity

Zarif et al, 1999 reported that females who suffered from PMDD had high prevalence of anxiety and depressive symptoms. The commonest symptoms were irritability and mood swing followed by restlessness depression, anxiety, loneliness and crying.

This result was consistent with *Mikhael et al, 2000* who revealed that the most prevailing symptoms were nervousness, irritability, anger, inability to relax and restlessness and the most common depressive symptoms were altered appetite, tearfulness, sadness, difficulty in concentration, loss of interest and lethargy. While change in sleeping habit was reported in 50% of case.

Physical illness

Mikhael et al, 2000 reported that the most prevailing physical symptom was headache and the least was weight gain. Table (30)

Table (30): prevalence of physical symptoms of PMDD among 200 nurses from Banha University hospital

Headache	90%
Breast tenderness	80%
Easy fatigue	80%
Altered appetite	70%
Bony ache	50%
Weight gain	30 %

Mikhael et al, 2000

While **Rizkalla et al, 1993** studied 159 female students at the faculty of medicine Suez Canal University and found that the most prevailing symptoms were abdominal colic, back ache and general fatigue. Table (31)

Table (31): Prevalence of physical symptoms of PMDD in a sample of 159 students at faculty of medicine Suez Canal University

Abdominal pain colic	74%
Back ache	74%
General fatigue	74%
Irritability aggressiveness	64%,
Lack of concentration	50%
Isolation	50%
Burst of energy and activity	12%
Skin problems	12%

Rizkalla et al, 1993

Post partum depression

Prevalence

Youssef et al, 1985 studied the prevalence of post-partum psychological disturbance and found that 24.5% had psychiatric symptoms among a sample formed of 53 female delivered at el Hussein hospital , 21 female admitted to el Abbassaya hospital in the purperium and 16 female admitted to kasr El Maadi hospital in the purperium. Table (32)

Table (32): The prevalence of post-partum psychiatric symptoms among a sample of 53 female delivered at el Hussein hospital, 21 female admitted to el Abbassaya hospital in the purperium and 16 female admitted to kasr El Maadi hospital in the purperium

Adjustment disorder with depressed mood	13.2%
Maternity blues	7.5%
Atypical bipolar disorder	3.8%

Youssef et al, 1985

Ahmed et al, 2002 stated that the prevalence of post partum depression in a sample of 840 Egyptian women attending ante natal clinic at Ain Shams university hospital & El Zaher health center was 11.1 %.This result was consistent with **Mikhael et al, 2007** who found that the prevalence of post partum depression was13 % and depression during pregnancy was 12.41% in a study done on1800 women followed up in outpatient clinic in the department of gynaecology and obstetrics in Benha University Hospitals.

Socioeconomic state

Mikhael et al, 2007 reported that the high prevalence of depression was in low socio-economic classes.

Risk factor

Youssef et al, 1985 stated that the risk factors are unemployment, positive family history of mental illness, neurotic mood, and negative attitude of husband and sex of the baby. While *Ahmed et al, 2002* reported that 73.8% had different level of stress as result of general life event where the majority was located under moderate & high level of stress and having more than one factor. The most common life event stress was unstable relation with husband, baby care stress, and low family income. On the other hand, *Mikhael et al, 2007* found that the risk factor for post partum depression was unwanted pregnancy, female babies and breastfeeding less than 3 months.

Past history

There was high significant relation between history of postpartum depression and developing postpartum depression. (*Ahmed et al, 2002*) (*Mikhael et al, 2007*)

Gynaecological and Obstetric history

Regarding the parity, primigravida had the highest prevalence of developing depression during pregnancy. While postpartum depression was more common among primiparous women. The highest percentage of postpartum depressed women was reported among female with history of PMDD, those who complained of mood symptoms during intake of oral contraceptive pills and caesarean section. (*Mikhael et al, 2007*)

Interestingly, there was no significant difference regarding the age of first pregnancy, number of pregnancy, age of menarche or history of abortion and developing postpartum depression (*Youssef et al, 1985*)

Physical illness

Ahmed et al, 2002 found that there was no significant relation between medical disease and development of postpartum depression while there was significant relation between occurrence of obstetric complications and developing postpartum depression.

Psychiatric symptoms

Mikhael et al, 2007 stated that the depressive symptoms encountered among pregnant women were sleep disturbance, altered appetite, loss of interest and lethargy. While the depressive symptoms among postpartum women were sense of being sad, tearfulness, crying, loss of interest, sleep disturbance and altered appetite. Suicidal thoughts were manifested among 5.37% of depressed pregnant women and among 15.38% of postpartum depressed women.

Pregnancy Related Obsessive Compulsive Disorder (Assad et al,2001)

Asaad et al, 2001 studied 100 pregnant females attending antenatal care clinics and found that pregnant females were at higher risk of developing obsessive compulsive disorder.

Regarding the obsessive compulsive symptoms, religious thoughts were the most common followed by cleanliness thought and rituals then impulses related to harming the fetus. Positive family histories as well as the presence of obsessive-compulsive personality both were found to be important risk factors.

Epidemiological psychiatric study on a sample of female in al Dakahlia governate in Egypt *El Sayed et al,2008*

In a study done on of 302 females in al Dakahlia *El Sayed et al,2008* report that the prevalence of psychiatric disorder according to general health questionnaire was 36.4% of the sample and according to SCID was 30.4% . The prevalence of bipolar disorder was 11.5% while the prevalence of anxiety disorder was 8.2%.

Risk factor

Females were at higher risk for development of psychiatric disorder in presence of one or more risk factor as age group 18-30 years, very low socio economic state, unmarried, educated and working female.

Past history

9.7% of the sample had past history of similar psychiatric condition, 2.1% had past psychiatric history 6.5% had past history of admission in psychiatric hospital while 23.9% had past medical or surgical history.

Family history

6.5% had family history of same psychiatric condition and 5.4% had family history of other psychiatric disorder.

Premorbid personality

It was found that dependant personality had the highest prevalence of psychiatric disorder followed by histrionic personality than avoidant and finally obsessive personality. (*El Sayed et al, 2008*)

Violence against women a study of prevalence and psychiatric consequence *Mohamed et al, 2007*

Mohamed et al, 2007 studied the prevalence of violence against women. The study was conducted on 1158 females attending Al-Zahraa Hospital Outpatient Clinic, the sample was divided into 2 groups, group I consisted of 620 females attending general medical clinic & gynaecological clinic and group II consisted of 538 females attending psychiatric outpatient clinic.

Mohamed et al, 2007 studied the prevalence of physical abuse during the past year in general medical and psychiatric clinic attendee. Table (35)

Table (33): Prevalence of physical abuse in medical and psychiatric clinic attendee from the studied sample

General medical outpatient clinic	43.2%
Psychiatric clinic	86.8%
Psychotic patients	86.5%
Major depression	84%

Mohamed et al, 2007

The life time prevalence of psychological abuse in general medical outpatient was 42.1% compared to psychiatric outpatient 52.7%.

On the other hand, the prevalence of childhood sexual abuse was 7.5% while the prevalence of sexual abuse in adulthood was 6.2%.

Psychiatric co morbidity

25.9% of abused female had major depression and 14.7% had generalized anxiety disorder, 60% of depressed patients expressed death wishes and 10.4% had attempted suicide.

As regard childhood sexual abused females, the prevalence of major depressive disorder was 33.3% while somatoform disorder & lower abdominal pain was 11.1%.

Precipitates for abuse:

Mohamed et al, 2007 estimated refusing man request for intercourse as the main trigger for the abuse. Table (34)

Table (34): Prevalence of precipitates for female abuse in the studied sample

Refusing man request for intercourse	69.9%
Asked for money	60.8%
House duty	34.1%
Disobedience	14.9%
Jealousy	10.2%

Mohamed et al, 2007

Table (35): List of epidemiological studies done on women mental health

Study	Author	Site	Tool	Subject	Result
Post-partum psychological disturbances Epidemiological view	Youssef et al,1985	El Hussein University hospital El Abbassay mental hospital kasr El Maadi hospital	• SCID • MMSE • Hildreth scale for mood	53 female delivered at el Hussein hospital 21 female admitted to el Abbassaya hospital in the puerperium , 16 female admitted to kasr el maadi hospital in the puerperium	24.5% had psychiatric symptoms 13.2% had adjustment disorder with depressed mood
Prevalence of premenstrual syndrome in medical student impact on cognitive function	Rizkalla et al,1993	The faculty of medicine Suez Canal university	• Menstrual Distress Questionnaire • WAIS	159 female students	7.2% of the female had severe premenstrual syndrome
Psychosocial-demographic study of premenstrual dysphoric disorder in a sample of Egyptian women	Zarif et al,1999	Ain Shams University Hospital faculty of medicine and nursing schools.	• EPQ • Taylor Manifest Anxiety Scale. • BDI • Guilford Scale. • Menstrual Distress Questionnaire • Dealing with illness coping Inventory	Females 15- 45 year	PMDD prevalence was 6.59% Premenstrual exacerbation was 3.65%.

Study	Author	Site	Tool	Subject	Result
Psychobio social study of premenstrual dysphoric disorder	Mikhael et al,2000	Benha University hospital	• BDI • EPQ • Biological investigation	200 nurses in childbearing period	7% were found to fulfill the criteria of PMDD 51%had premenstrual symptoms
Pregnancy Related Obsessive Compulsive Disorder (A study in an Egyptian sample	Assad et al,2001	antenatal care clinics at Ain Shams university hospital	• SCID I • SCID-II • Y.B.O.C	100 pregnant females 100 non pregnant females	The pregnant females were at higher risk of developing obsessive compulsive disorder
Prevalence of post partum depression among women with high risk factors	Ahmed et al,2002	ante natal clinic at Ain Shams university hospital & el Zaher health center	• SCID • Life Event Stress • BDI	840 pregnant women	The prevalence of post partum depression was 11%

Study	Author	Site	Tool	Subject	Result
Prevalence and Risk Factors of Depression in Pregnancy and Puerperium	Mikhael et al,2007	outpatient clinic in the department of gynecology and obstetrics in Benha University Hospitals	• BDI	1800 women pregnant or six months post partum	The prevalence of Depression was 12.41% women during pregnancy and 13 % women during postpartum period
Violence against women a study of prevalence of psychiatric and psychiatric consequence	Mohamed et al,2007	General medical gynecological and psychiatric outpatient clinic at AlZahraa University hospital	• Standardized psychiatric assessment. • SCID I & II. • World SAFE • questionnaire	620 females from general medical & gynecological clinic 538 females from psychiatric outpatient clinic	The prevalence of physical abuse in medical outpatient was 43.2% and in the psychiatric patient was 86.8%
Epidemiological psychiatric study on a sample of female in al Dakahlia govern-ate in Egypt	El Sayed et al,2008	Al Dakahlia govern ate	• Life Event Scale • GHQ • SCID	302 adult female with age ranging from 18-50 years	The prevalence of psychiatric disorder was 36.4%

Liaison psychiatry

Prevalence

On a study done by *El Gamal et al, 2001*, the prevalence of psychiatric morbidity of 500 patients' in general medical department of Kasr El Aini hospital was 42% according to general health questionnaire. The prevalence of psychiatric morbidity based on DSM-IV criteria was 16.7% in a study done on 251 patients admitted to El Hussein University hospital (*Mohamed et al, 2004*).

While the prevalence of co-occurring psychiatric disorders among medically ill patients was 26.3% in a study done on 350 patients admitted at internal medicine department at Tanta University hospital based on DSM IV criteria (*Abd El Hay et al, 2005*).

Age

There was no association between age of the patient and psychiatric morbidity (*El Gamal et al, 2001*)(*Abd El Hay et al, 2005*)

Gender

Mohamed et al, 2004 reported that somatization and obsessive compulsive symptoms were higher among female patients while male patients were more liable to develop depressive and anxiety symptoms. *Abd El Hay et al, 2005* stated that the prevalence of psychiatric disorder was higher among female patients.

Marital state

El Gamal et al, 2001 and *Mohamed et al, 2004* stated that there was significant association between psychiatric morbidity and unmarried patients. This result was inconsistent with *Abd El Hay et al, 2005* who revealed that the marital state have no significance on the occurrence of mental disorder.

Education

There was no significant association between psychiatric morbidity & level of education (*El Gamal et al, 2001*).

Occupation

There was significant association between psychiatric morbidity and unemployment in medical patients (*El Gamal et al, 2001*) (*Mohamed et al, 2004*) (*Abd El Hay et al, 2005*).

Risk factor

Medical patients with long stay, repeated hospitalization, chronic illness, CNS disorder and past history of mental disorder were at higher risk of psychiatric morbidity (*El Gamal et al, 2001*).

Psychiatric comorbidity

El Gamal et al, 2001 found that the major depressive disorder was 25% in which most of the patient reported moderate to severe degree while there was no case of substance related disorder, nor psychosis reported. He also found that 60% of patients had 2 or more personality disorder. The commonest was mixed personality disorders among medically ill patients. Table (36)

Table (36): Prevalence of psychiatric disorder in a sample of 500 patients' in general medical department of Kasr El Aini hospital

Major depressive disorder	25%
Mixed anxiety depression	15%
Adjustment disorder	20%
Organic brain syndrome	1%

El Gamal et al, 2001

On the other hand, ***Mohamed et al, 2004*** revealed that the prevalence of somatoform disorders was 38.1% among medical ill patients with no reported cases of substance related disorder, psychosis nor delirium. Table (37)

Table (37): Prevalence of psychiatric disorder in a sample of 251 patients admitted to El Hussein University hospital

Somatoform disorders	38.1%
Anxiety disorders	35.7%
Adjustment disorders	33.3%
Major depressive disorder	23.8%
Obsessive compulsive disorder	14.3%

Mohamed et al, 2004

Table (38): List of epidemiological studies done in liaison psychiatry

Study	Author	Site	Tool	Subject	Result
Psychiatric morbidity in general medical department of Kasr el Aini hospital	El Gamal et al,2001	Kasr El Aini University hospital	• GHQ • MMSE • BDI • Personality Assessment Schedule • Psychosocial Stressors Assessment • Dealing with illness Coping Inventory	500 in patients admitted at Kasr El Aini University hospital	The prevalence of psychiatric morbidity was 42%
Incidence of psychiatric comorbidity among physically ill patients admitted to el Hussein	Mohamed et al,2004	El Hussein University hospital	• GHQ • SCL-90	251 patients admitted at El Hussein University hospital	The prevalence of psychiatric morbidity was 16.7%
Psychosocial correlates of axis I mental disorders among medical inpatients	Abd El Hay et al, 2005	internal medicine department at Tanta University hospital	• SCID • Perceived Stress Scale • Multi-dimensional Scale of Perceived Social Support	350 patients admitted at internal medicine department at Tanta University hospital	The prevalence of psychiatric disorders was 26.3%

Suicide

Age

In a study done on suicide attempter *El Mahalawy et al, 1985* found the highest rates of suicide attempter collected from Ain Shams University Hospital and Dar El Shefa hospital and Mensheyt El Bakry hospital was in teenagers and early twenties with no reported case below age of 15 years. In contrary (*Bassim et al,2005*) stated that the prevalence of suicide attempt was higher in the adult age group(20-40years).

Gender

El Mahalawy et al, 1985 reported that 69% of suicide attempter was female while male suicide attempter was 31 %.this result was consistent with (*Bassim et al,2005*) who revealed that 64.2% of suicide attempter at the poison center were female.

On the other hand, *El Mahalawy et al, 1985* stated that male suicide attempter had high tendency for introversion while female suicide attempter had high tendency for psychotism on Eysenck personality questionnaire.

Education

As regards education *El Mahalawy et al, 1985* found that the suicide attempters were more common among educated people than among illiterate.

Marital state

El Mahalawy et al, 1985 found that the single and divorced person has high rates for suicidal attempt. This result was consistent with *Bassim et al, 2005* who stated that 55.3% of suicide attempters were single.

In a study done on females students in Ain Shams University *Abdel Al et al, 1995* found that single students had high risk for suicidal feelings.

Risk factor

As regard risk factor for suicidal feeling and attempt, it was found that overcrowding was an important factor in attempted suicide. (*El Mahalawy et al, 1985* while loneliness and bereavement were not an evident factor (*Abdel Al et al, 1995*).

Socioeconomic state

The low social class show higher prevalence of suicide attempt than higher class (*El Mahalawy et al, 1985 (Bassim et al,2005)* while *Abdel Al et al, 1995* reported no association between social class and suicidal feelings.

Occupation

El Mahalawy et al, 1985 stated that the suicide attempt was common among students and unemployed women. This result was consistent (*Bassim et al,2005*) who revealed that 27% of suicide attempters were unemployed.

Suicidal intent

El Mahalawy et al, 1985 found that 80% of attempter had no intent to die and the suicide attempt was “cry for help” in addition 97% of suicide attempt was in presence of other. Those who have intent to die complained already of formal psychiatric illness and 70% of suicide attempter made suicidal threat mostly on the same day.

Method of attempted suicide

Concerning Method of attempted suicide 81.3% of suicide attempters used overdose of drugs (in which 60.4% of them used analgesics and hypnotics), followed by self injury 17.7% *El Mahalawy et al, 1985 (Abdel Al et al, 1995)*. In *Bassim et al, 2005* study the organophosphorus insecticide was the most common used by suicide attempter in poison control center 54.1% followed by cardiopulmonary drugs .

The violent methods were rare according to *El Mahalawy et al, 1985* while *Abdel Al et al, 1995* report that 25% of attempted suicide employed violent material as jumping from height and burning.

Suicidal ideation

Abdel Al et al, 1995 stated that 28% of the studied subjects had suicidal ideation in the past year with 1% had serious suicidal thought and 10% had suicidal attempt actually.

Prevalence of suicidal feeling

In a study done on medical students the prevalence of suicidal feeling was 12.6 % Students with suicidal feeling had experienced more stressful event, somatic illness and minor psychiatric symptoms particularly depression (*Okasha et al, 1980*).

The prevalence of suicidal feeling in the suicide attempter was 85 % *El Mahalawy et al, 1985* compared to 73% of the whole sample of female students in Ain Shams University reported suicidal feeling during past year (*Abdel Al et al, 1995*)

Previous attempt

31% of suicide attempters had previous attempt *El Mahalawy et al, 1985* While 66% of those attempted suicide had previous attempt in the past year (*Abdel Al et al, 1995*).

Family history

12% of attempters had family history of psychiatric illness *El Mahalawy et al, 1985*

Past history

El Mahalawy et al, 1985 declared that 13% of attempters had past history of psychiatric illness.

Psychiatric illness

El Mahalawy et al, 1985 stated that 83.5% of suicide attempter had psychiatric illness and the suicide attempt usually occur in first attack of illness. 40.7% of suicide attempter had psychiatric symptom present less than 4 weeks. This result was consistent with (*Abdel Al et al, 1995*) who stated that 68% of students with suicidal feelings had psychiatric symptoms less than one month in which insomnia and depressed mood were a risk factor for suicidal feelings (*Abdel Al et al, 1995*). Table (39)

Table (39): Risk factor for suicidal feeling among a sample of females students in Ain Shams University

Insomnia	65%
Depressed mood	61%
Loss of concentration	58%
Anxiety	58%

(*Abdel Al et al, 1995*)

In *El Mehaliawi et al, 1985* study 46.16% of suicide attempters had depressive illness most of them had mild or moderate depression while 19.7% had personality disorder the commonest was histrionic personality in female and antisocial personality in males. In addition 12% were receiving psychiatric care when they attempted suicide where the most common medication was antidepressant. Table (40)

Table (40): Prevalence of psychiatric disorder in suicide attempter collected from Ain Shams University Hospital and Dar El Shefa hospital and Mensheyt El Bakry hospital

Depressive illness	46.16%
Anxiety	31.9%
Personality disorder	19.7%
Manic depressive illness	11%
Schizophrenia	5.5%
Organic brain syndrome	2.2%

El Mahalawy et al, 1985

Bassim et al, 2005 reported that 30.5% of suicide attempter had mood disorder, 12.9% had depressive disorder, and 10.2% had adjustment disorder. Regarding personality disorder, 17% of suicide attempter had a personality disorder the commonest was borderline personality disorder 14.7%. On the other hand, anxiety disorder account for 9.6% while 5.3% had psychotic disorder.

Psychological stresses

The most common psychological stresses in males according to *El Mahalawy et al, 1985* were bereavement 36% and the least common was work stress. Table (41)

Table (41): Prevalence of psychological stress in males' suicide attempter

Bereavement	36%
Examination	18% ,
Money worries	14%
Work	14%

El Mahalawy et al, 1985

The most common psychological stresses in females according to ***El Mahalawy et al, 1985*** were also was bereavement 36%. Table (42)

Table (42): Prevalence of psychological stress in females' suicide attempter

Bereavement	37%
family stress	24%
marital stress	18%
Money worries	16%
Work stress	2%

El Mahalawy et al, 1985

In a study of ***Abdel Al et al, 1995*** it was found that emotional problems accounted to be 81% followed by scholastic problems 75% and lastly financial problems 47%. While in ***(Bassim et al, 2005)*** emotional stress account for 14.7% of attempted suicide.

Physical illness

Abdel Al et al, 1995 report that the somatic symptoms and visit to a physician were risk factor for suicidal feeling. The commonest symptom was palpitation 56% difficulty in breathing 25% this result was inconsistent with **El Mahalawy et al, 1985** who revealed no association between physical illness and suicide attempt. Table (43)

Table (43): prevalence of physical symptoms associated with suicidal feeling in a sample of females' students in Ain Shams University

Palpitation	56%
Difficulty in breathing	25%
Hand tremors	21%,
Gastro intestinal troubles	18%
Excess sweating	16%
Urinary troubles	14%.

Abdel Al et al, 1995

Table (44): List of epidemiological studies done on suicide

Study	Author	Site	Tool	Subject	Result
Prevalence of suicidal feelings in a sample of non consulting medical students	Okasha et al, 1980	faculty of medicine Ain Shams University	Self reporting Questionnaire	516 students of faculty of medicine Ain Shams University	The prevalence of suicidal feeling was 12.5%
Psycho socio epidemiological study of attempted suicide in an Egyptian population	El Mahalawy et al, 1985	El Demerdash Dar El Shefa Heliopolis Menshiat El Bakry hospital	- Suicidal feeling questionnaire - Suicidal risk scale - Special sheet - Extreme response test - Hamilton scale - EPQ	The suicide attempters presented to the hospitals	The suicide attempt was common among women teenagers divorced and single person
Psycho socio epidemiological study of suicidal feelings in a sample of Egyptian students	Abdel Al et al, 1995	Faculty of art Faculty of science	suicidal feeling Questionnaire	246 female students of Faculty of art and Faculty of science	73% of students reported suicidal feeling during past year

Psychiatric study on a sample of students of faculty of medicine Al Azhar University Ali et al, 2006

The sample was 483 male students in second grade in faculty of medicine Al Azhar University with age ranging from 18.7-23 years.

The tools used were General Health Questionnaire, Symptoms Checklist, Eysenck Personality Questionnaire, WALIS Wolpe, Lazarus Assertiveness Scale, Beck Depression Inventory and Semi Structured Interview. According to General Health Questionnaire 28% of the sample was positive. No significant difference was found between different age group.

As regards risk factors, psychiatric disturbance was higher among those from urban area, students of non functioning father, students of working mother, parental loss, extended family, first order of birth and smokers' students. According to EPQ neuroticism and extroversion were higher among those with psychiatric disorder. According to Symptoms Checklist 12.7% of the sample had anxiety symptoms followed by depressive symptoms 10.9%. Table (45)

Table (45): Prevalence of psychiatric disorder according to symptoms checklist in a sample of male students at faculty of medicine Al Azhar University

Anxiety symptoms	2.7%
Depressive symptoms	10.9%.
Somatic symptoms	8.3%
Obsessive compulsive symptoms	6%
Psychotic symptoms	1.9%

(Ali et al, 2006)

As regard Beck Depression Inventory 10.6% of the sample was depressed. Also, according to Semi Structured Interview 21.5% of medical students had psychiatric disorder. The prevalence of depressive disorder was 4.8% (major depression 2.9% dysthymia 1.9%) while anxiety disorder was 11.3% (generalized anxiety disorder 2.3%, obsessive compulsive disorder 1.7% specific phobia 2.6% ,social phobia 1.2% panic attack 2.5% and post traumatic stress disorder 0.4%). Regarding the prevalence of adjustment disorder *Ali et al, 2006* found that it was 3.3% while sleep disorder was 0.8% somatoform disorders 1.03 % and lastly the prevalence of Personality disorders was 0.6 %.

Table (46): Epidemiological study done on Psychiatric study on a sample of students of faculty of medicine Al Azhar University

Study	Author	Site	Tool	Subject	Result
Psychiatric study on a sample of al Azhar faculty of medicine students	Ali et al, 2006	faculty of medicine Al Azhar University	• GHQ • SCL • EPQ • WALS Wolpe Lazarus Assertiveness Scale • BDI • Semi Structured Interview	483 male students in second grade in faculty of medicine Al Azhar University	According to Symptoms Checklist 12.7% of the sample had anxiety symptoms followed by depressive symptoms 10.9%

Substance use disorder

The non medical use of psychoactive substances among secondary schools male students in Egypt (Soueif *et al*, 1979)

The title was clear specifying the target population.

The aim was clearly mentioned.

The study design was not mentioned also the sampling method was not clear.

The assessment tool was questionnaire assessed for its reliability.

The statistical methods were not mentioned.

The results were illustrated in tables.

The discussion was integrated in results.

The Limitations of the work and future ***recommendations*** were mentioned.

Drug abuse among Egyptians (Serag El Din et al, 1988)

The title clarifying that the study was done on Egyptian sample.

The aim of the study was clearly stated, giving an explanation for why the study was carried out.

The design of the study was not mentioned.

The sample Cases were selected from students of both faculties of medicine & faculty of commerce Ain Shams University. The researcher mentioned how he obtained his sample which is important for validity of the study.

Assessment tools self reported questionnaire.

Statistical tests used in study were not mentioned.

The results were illustrated with tables.

The discussion was mentioned yet the results were not compared with other studies in other cultures.

The Limitations of the work and future **recommendations** were mentioned.

Heroin abuse (a study of its psycho demographic, and clinical aspects among Egyptian inpatients) (Fahmy, et al 1989)

The title clarifies that the study discuss psycho demographic and clinical aspects of heroin abuse yet the sample was generalized.

The aim of the study was clearly stated, giving an explanation for why the study was carried out.

The study design case control was used which is appropriate to the aim.

The pilot study was preceding the study to apply any necessary modifications & to have an idea about possible difficulties & limitations.

The samples was clearly defined also the source of the cases was clearly justified, all cases were inpatients yet the cause of this choice wasn't mentioned.

The assessment tools that were used in the research were adequately described and were referenced.

The statistical methods were well described.

The results were presented in tables, which help for, better understanding.

The discussion was mentioned yet the results were not compared with other studies in other cultures.

The recommendations were discussed in details.

Substance non medical use among secondary school student in Assuit City (*Demerdash et al, 1992*)

The title was clear identifying the target population.

The aim of the study was clearly stated, giving an explanation for why the study was carried out.

The samples were clearly defined while ***the study design*** was not mentioned.

The assessment tool was mentioned without details.

The statistical methods were not mentioned.

The results were presented in tables and texts which help for, better understanding.

The discussion were compared with other researches, whether supporting the same findings or establishing other findings. Also there were explanations of some findings.

The recommendations and ***the limitations*** were not mentioned.

Epidemiological study of addicts admitted to Maamoura psychiatric hospital in Alexandria (Abou Khatwa et al, 1997)

The title was clear identifying the sample.

The aim of the study was stated.

The samples was defined as all patients admitted at the addiction unit Maamoura psychiatric hospital in Alexandria in a six month while **the study design** was not mentioned

The assessment tool was mentioned.

The statistical methods were mentioned.

The results were presented in tables and texts.

The discussion were compared with other researches, whether supporting the same findings or establishing other findings. Also **the recommendations** were integrated in the discussion.

Psychosocial correlates of substance abuse: a study in an Egyptian sample (Abd El Azim et al, 2001)

The title was simply stated but it is generalized as it did not specify the target population.

The aim of the study was obviously mentioned, with good rationalization.

The study design was Cross-sectional which is appropriate to the aim of the study. **The sample** was recruited according to inclusion & exclusion criteria, also the source of the cases was clearly justified, and controls were matched properly.

The study proper was preceded by **pilot study** to justify the study proper.

Assessment tools were mentioned and referenced.

Statistical methods clearly stated.

The results were simply presented and illustrated with tables. The tables were self explanatory with brief text comments.

The discussion The results were discussed and analyzed in details and compared to literature.

The recommendations and suggestions were mentioned by the end of the study.

Substance use disorders among female secondary school students in Cairo (Hashem et al 2002)

The title the subject was addressed substance use disorders among female secondary school students in Cairo, yet the study refers to all students who reported that they had taken non-prescribed drugs or illegal substances.

The aim of the study was mentioned.

The study design was survey design was used.

The study proper was preceded by **pilot study** to justify the study proper.

The sampling method was mentioned.

Assessment tools were mentioned and referenced.

Statistical methods were clearly stated.

The results were presented in clear way.

The discussion the results were compared with other previous researches, whether supporting the same findings or establishing other findings with reasonable explanation for different results.

The recommendations and suggestions were mentioned by the end of the study.

Substance use disorders among male general secondary school students in Cairo (Ahmed et al, 2005)

The title was clear identifying the target population.

The aim of the study was clearly stated, giving an explanation for why the study was carried out.

The target population and **sampling method** were clear. The sample was a stratified random sample with proportionate sample size to the different strata of Cairo male secondary schools. Yet **the study design** was not clearly mentioned.

The assessment tools were conducted using MEDSPAD (Mediterranean School Project on Alcohol and other Drugs) survey design which is appropriate to the aim of the study.

The study proper was preceded by **pilot study** to justify the study proper.

The statistical methods used to analyze the collected data were listed with explanation of their use.

The results were clearly presented and illustrated with tables. The tables were simple, self-explanatory with brief text comments.

The discussion contained analysis and possible explanation of the results with comparison to several international studies.

Psychological Profile and Prevalence of Psychoactive Substance

Use among Suez Canal University Students in Ismailia (Yousef et al, 2005)

The title was clear identifying the target population.

Aim of the study was clearly stated.

The study design was a cross sectional descriptive study.

Sampling method simple random sample and how the sample size was obtained was stated in details.

Assessment tools was explained in details and referenced while

Statistical analysis was mentioned in brief.

Results were illustrated in tables and text.

The discussion the results were discussed in details rationalized and compared to other previous local and international studies.

Several **recommendations** were listed by the end of the study.

Substance dependence in a sample of Egyptian adolescents

(Eid et al, 2006)

The title did not reflect the sample as case control study.

The aim was clearly stated.

The study design was case control study but it was not clearly mentioned.

The sample composed of 2 groups the patients groups and the control group. The sample was selected according to certain inclusion and exclusion criteria.

Assessment tools was stated in details and referenced.

Data analysis and **statistical analysis** were mentioned in brief.

The results were illustrated in tables and graphs in addition to text to explain the tables.

The discussion contained analysis and possible explanation of the results with comparison to several international studies.

Several **recommendations** for further research were listed by the end of the study.

Mood disorder

An epidemiological study of depressive symptoms in rural and urban population in Egypt (*Abdel hamid et al, 1989*)

The title was clear regarding the studied phenomena.

The aim of the study was clearly stated giving an explanation for the purpose of the study.

The design of the study was not mentioned by the author. **The sample technique** was systematic random sample.

Assessment tools the researcher explained in details their use.

The statistical methods needed to be described in more details the researcher only referred to using "the possible statistical parameters".

The results were presented in tables accompanied with brief comments for clarification of the important notes.

The discussion of results contained analysis, possible explanations of the results with comparison with other studies.

Recommendations The study ended up with several practical and clinical suggestions together with recommendations for research.

Prevalence & family dysfunction of unspecified depressive disorder among outpatient clinic attendants (*Fahmy et al, 2004*)

The title was specifying what would be study in depression but without identifying the site or specialty of the outpatient clinic.

Aim of the study was clearly mentioned.

Study design was cross sectional study.

The sample includes 1500 subjects attending primary health care unit and 900 subjects attending psychiatric outpatient clinic. The **sampling methods** were cluster type.

Assessment tools were named without details. The same was for **statistical analyses**.

The **results** were illustrated in tables and **discussed** in comparison to other studies.

Recommendations of the study were general and not specific to the study proper.

Epidemiological aspect of depression among Assuit university students (*El Gendawy et al,2005*)

The title is stated in a simple way specifying the phenomenon to be studied and the target group.

The rationale and aim of the work were mentioned in details explaining the importance of depressive disorder as reason for disability.

The study design was cross sectional study.

The sample size and the sampling calculation were explained in brief.

The assessment tools were mentioned and described.

The statistical methods used for data analysis were also explained.

The results were listed in tables that most of them were self explanatory, with brief comment.

The discussion of results contained analysis, possible explanations of the results with comparison with other studies.

Recommendations The study ended up with several practical and clinical suggestions together with recommendations for research.

The limitations of the work were not mentioned.

Neurotic disorder

Psycho-demographic study of anxiety in Egypt (The first application of PSE in its Arabic version) okasha et al, 1981

The title is generalizing the study to Egypt although the sample selection did not represent the whole Egyptian population.

The aim of the study was not mentioned.

The study design is descriptive cross-sectional, but that was not clearly mentioned.

The sampling population was clarified and ***the sampling method*** was haphazard sample increasing the chance of bias. Also the ***sample size*** calculation was not justified.

The methods of assessment and diagnosis were specified and briefly explained.

The statistical methods used for data analysis were not mentioned.

The results were presented, discussed and explained in details. They were illustrated with tables and a graph that were informative. The results were not compared with other studies. ***The discussion*** was integrated in the presentation of results.

Limitations of the work and future ***recommendations*** were not mentioned.

The Prevalence of Obsessive Compulsive symptoms in a sample of Egyptian Psychiatric Patients (Elkholy et al., 1997)

The title is simply stated, limiting the results to the sample studied.

The aim of the study showed exactly why the study was done and the areas to be covered by it.

Study design it is a case control study as it compared between psychiatric patients and normal controls. The study design was not mentioned.

Sample design Stratified random sampling was used. The sample also was collected according to clear inclusion and exclusion criteria for both the patients and the control groups.

Sample size was not mentioned how the sample size was calculated.

Tools used for psychiatric assessment were explained and referenced with description of how they would be used. **The statistical methods** were named briefly.

The results were stated and illustrated with tables which were informative yet some of them were complicated.

There was a detailed **discussion** of the results and comparison with the related studies.

Recommendations were mentioned in details and were classified into clinical and research recommendations.

Limitations of the study were mentioned by the end of the study.

Socio-demographic, clinical and psychometric profile of a sample of Egyptian patients with social phobia (El Raey et al,2001)

The title clarified the target population, and point to be studied with limitation of the results to the sample included.

The aim is clearly stated specifying the points to be studied.

The study is case-control as the social phobia patients were compared to normal individuals. That is a suitable design for that study yet the **study design** was not mentioned.

The sampling population, method used for sample collection and calculation of sample size were not clear.

The assessment tools were named and referenced with no explanation of them or how they were applied.

The statistical tools used for data analysis were not mentioned.

The results were simply presented and illustrated with tables that were self explanatory.

The discussion included analysis and possible explanation of the results with comparison to previous studies.

Several **recommendations** were mentioned by the end of the study

Limitations of the work were not mentioned.

Prevalence of anxiety among medical students in different grades:

An Egyptian Study *Bakr et al,2005*

The title was simple and clear.

Aim of the study was mentioned.

Study design was cross sectional yet it was not mentioned.

The sample was 1034 medical students in Faculty of medicine Ain Shams University.

Assessment tools were mentioned in brief.

Statistical analyses were named.

Results were illustrated in tables which was informative.

The discussion included explanation and analysis of data in correlation to other related studies.

Clinical recommendations depending on literature were suggested by the end of the study.

***Prevalence of body dysmorphic disorder in an Egyptian sample
(Guemei et al, 2005)***

The title clarified the purpose of the study and limited the results to the studied sample.

The aims of the study were stated precisely with specification of the point to be studied.

The study design was chosen to be cross sectional; which is a suitable design to study the prevalence of a certain problem.

The sampling method: The sample was collected using cluster random sampling as mentioned in the study.

The sample size calculation was not justified.

A pilot study was conducted to detect any difficulties in the applications of the tools.

Assessment tools were explained in details with their advantages and disadvantages.

Statistical analyses were mentioned.

Results were illustrated in tables, graphs and texts.

The discussion of results contained analysis, possible explanations of the results with comparison with other studies.

Recommendations of the work were mentioned in details.

Body image dissatisfaction and its relationships with psychiatric symptomatology eating beliefs and self esteem in Egyptian females adolescents (*Hatata et al, 2008*)

The title was clear describing the studied phenomena and the target population, yet it is too long.

Aim of the study was clearly stated.

The study design was cross sectional.

Assessment tools were mentioned and referenced.

Statistical methods were mentioned.

Results were clearly mentioned and illustrated in tables.

Discussion includes analysis of the results and comparison to previous studies.

Recommendations were discussed by the end of the study.

Child and adolescent psychiatry

Psychiatric-Epidemiological-Psychosocial study of stammering in Egyptian children (Bishry et al, 1970)

The title was clear and to the point.

Aim of the study was clearly stated giving an explanation for why the study was carried out.

Study design was case control study. Yet it was not mentioned. **Sample** was random sample but **Sample size** was not calculated.

Assessment tools were mentioned and referenced.

Statistical methods were mentioned.

Results and discussion the results were clearly mentioned and discussed and compared to previous studies.

Limitations of the study and **Recommendations** were not discussed by the researcher.

An epidemiological study of conduct disorder in primary school children (*Hamouda et al, 1984*)

The title is stated in a simple way specifying the phenomenon to be studied and the target group.

The aim of the work was mentioned in details.

The **study design** was divided into survey study and in depth study

Assessment tools were explained.

Statistical analyses were mentioned in details.

The results were illustrated in tables, graphs and texts.

Discussion of the results contained analysis, possible explanations of the results with comparison with other studies.

Recommendations of the study were mentioned.

An epidemiological study of depression among sample of Egyptian adolescent 15-18 years old of both sexes (*Mohamed et al, 1989*)

The title is descriptive of the content of the study with specification of the target population.

The aim of the study was mentioned by the author.

The method by which the sample was chosen was not clarified in the research methodology. Also the way by which **the size of the sample** was calculated and how it was justified was not described.

Assessment tools used were stated. There was a need for discussing the reliability of the clinical interview as a tool to diagnose depression.

The statistical methods needed to be clarified in more details.

The results were presented and illustrated using tables that were informative and self explanatory.

The discussion included analysis of the results and comparison between them and other related studies.

Study of anxiety disorder among students of secondary nursing schools in Benha university hospital (*Abd El Hady et al, 1994*)

The title is stated in a simple way specifying the phenomenon to be studied and the target group.

The aim of the work was mentioned.

The **study design** was not clarified. The **sample size** was all school nurse students at Benha University.

The assessment tools were mentioned, described and referenced.

The statistical methods used for data analysis were not mentioned.

The results were listed in tables that most of them were self explanatory, with brief comment.

The discussion of results contained analysis, possible explanations of the results with comparison with other studies.

The limitations and **recommendations** were not mentioned.

Epidemiology of behavior disorders in primary school children (6-11years) in urban and rural areas in Egypt (*Ibrahim et al, 1994*)

The title specified both the target population and the points to be studied

The aim of the work was clearly stated and it was repetition of the title of the study.

The study design is case-control. It is a suitable design for such a study as it helps in understanding associations and etiology of certain behaviour or disease.

The sampling method and calculation of **the sample size** were not clear making it hard to depend on the results to be generalized.

The assessment tools used were listed with no explanation of them or their use or how they would be applied. They also were not referenced.

The statistical methods used for data analysis were explained.

The results were informative and self explanatory. They were simply presented and illustrated with tables and texts.

The discussion of results included possible explanations of the data collected and comparisons with previous studies.

Epidemiological study of attention deficit hyperactivity disorder in elementary school in Alexandria governate (*Rashed et al, 1994*)

The title is stated in a simple way specifying the phenomenon to be studied and the target group.

The aim of the study was clearly stated.

The study design was cross sectional and **the sample** was selected using multistage stratified random sampling technique.

Tools of assessment and diagnosis were just named and referenced.

The statistical methods used for data analysis were not clarified.

The discussion included analysis of the result. The results were compared with several studies.

Limitations of the study and recommendations were not mentioned.

Prevalence of some psychiatric symptoms in adolescent student in Assuit (El Sherbini et al,1995)

The title was clearly and simply stated identifying studied phenomena and the target population.

The aim of the study was clear giving an explanation of why the study was carried out.

Study design Cross sectional design was used, yet that was not mentioned.

Sample design was stratified random sample from 6 preparatory and secondary schools in Assuit. **Sample size** was mentioned.

The tool was Middle Sex Hospital Questionnaire which was referenced.

The statistical methods used in the study were not mentioned.

The results: the results were properly stated and illustrated with tables and graphs which were informative. The results were **discussed** in details, rationalized and compared to other previous local and international studies.

Recommendations were listed by the end of the study.

The prevalence of obsessive compulsive symptom in a sample of Egyptian students (*Ismail et al,1998*)

The title was clear identifying the studied phenomena and the target population

Aim of the study was mentioned.

Study design was not mentioned.

Sampling methods was clarified in details.

Assessment tools were explained and referenced.

A pilot study was preceding the study proper to estimate the sample size and to test for the questionnaire.

Statistical analysis was mentioned.

The results were presented and illustrated using tables and graphs that were informative and self explanatory.

Discussion contained analysis, possible explanations of the results with comparison with other studies.

Recommendations were mentioned in details.

Epidemiological study of psychiatric disorder in school children from age 9-12 year in Alexandria (*Abu Rayan et al, 2001*)

The title was clear identifying the studied phenomena and the target population but the studied phenomena need to be more specific.

Aim of the study was mentioned in form of questions.

The sample size was mentioned. *The sampling method* was not clarified.

The study was done on school children. The second section of study was done on children attending the outpatient clinic in student hospital.

Assessment tools were mentioned briefly and *Statistical analyses* were named.

The results were illustrated in tables and that were simple and informative.

Discussion of the results contained analysis, possible explanations of the results with comparison with other studies.

Recommendations were mentioned in details.

Prevalence of generalized anxiety disorder and its risk factors in a sample of schools and universities students (*Hammouda et al,2002*)

The title was clear regarding the studied phenomena and the target population.

The aim of the work was mentioned briefly.

The **study design** was cross sectional study. The **sample size** was 1200 students it was stratified random sampling.

Tools of assessment were mentioned but not **the statistical analyses**.

Results were clearly mentioned in texts and illustrated in tables.

Discussion of the results was stated in comparison to others studies.

Limitation of the study and recommendations were not mentioned.

Childhood phobia: Screening among a sample of non-referred primary school Egyptian children (Abou-Hatab, 2004)

The title was clear regarding the studied phenomena and the target population.

Aim of the study was clearly stated giving an explanation for why the study was carried out.

Study design was cross-sectional study. The ***sampling technique*** was not mentioned.

Tools of assessment were mentioned and referenced.

Statistical methods were well described.

Results were clearly mentioned in texts and illustrated in tables.

Discussion of the results was stated in comparison to others studies.

Recommendations: it is clearly mentioned.

Limitations of the study: were stated by the author.

Social phobia in secondary school and university student an Egyptian study (Ragheb et al, 2005)

The title is descriptive of the study.

Aim of the work was precise, clearly stated specifying certain questions to be answered through the study.

The study is a cross sectional study. The ***study design*** was not mentioned.

The sample was selected using multi-stage random sampling technique. The selection of sample was not justified.

The ***sample size*** calculation was not clear. The number of the dropouts was mentioned but with no explanation of the cause.

The assessment tools used were explained in details and referenced.

A pilot study was done to obtain feedback from the subjects.

The statistical methods used to analyze the collected data were listed with explanation of their use.

The results were simply presented and illustrated with tables that were informative and detailed.

The results were ***discussed*** and analyzed with possible explanations of them and were compared with previous studies.

Limitations of the work were mentioned.

Recommendations for research and several clinical recommendations were mentioned by the end of the study.

Prevalence of Obsessive Compulsive Disorder among female secondary school students in Cairo (Soltan et al., 2005)

The title was clearly and simply stated.

The aim of the study was clear, giving an explanation of why the study was carried out.

Study design Cross sectional design was used, yet it was not mentioned.

A pilot study was done and helped in the assessment of how the tools were used later.

Sample design and the method of sampling were not clear. That would make it hard to simply infer the results of the study to the whole population.

Sample size was mentioned.

The tools the neuro-psychiatric evaluation tools used in this study are valid and were properly described and referenced. The details of ***the statistical methods*** used in the study were described.

The results the results were properly stated and illustrated with tables which were informative. The results were ***discussed*** in details, rationalized and compared to other previous local and international studies.

Several ***recommendations*** for further research and early diagnosis of OCD were listed by the end of the study.

**Social anxiety disorder among a sample of Egyptian children
(Hassan et al, 2006)**

The title is stated in a simple way specifying the phenomenon to be studied and the target group.

The rationale and aims of the work were mentioned in details explaining why this study was done.

The sample was multi stage stratified random sample. Yet **the sample calculation** and the **study design** were not clarified.

The assessment tools were mentioned and described in details clarifying how they will be applied.

A pilot study was conducted and it was beneficial as it gave idea about the prevalence of anxiety in childhood and reliability and validity of questionnaire.

The results were illustrated in many tables and graphs that were simple and informative.

The discussion of results was detailed and the results were compared to the results of other related studies.

Recommendations were mentioned in details.

Prevalence of social anxiety symptoms among a sample of Egyptian adolescents (*Mohamed et al, 2007*)

The title was simple and clear identifying the studied phenomena and the target population.

Aim of the study was mentioned in form of questions.

The sample was multiple stage random sampling. *The study design* was not mentioned.

Assessment tools were explained in details.

Statistical analyses were clarified.

The results were illustrated in many tables and graphs that were simple and informative.

Discussion of the results contained analysis, possible explanations of the results with comparison with other studies.

Recommendations were mentioned in details.

Limitations of the study were mentioned in brief.

The prevalence of child abuse and its effect on the mental health

(Riyadh et al,2007)

The title did not specify the target population. Also effect on mental health is generalized.

The aim of work was detailed identifying the target population and the purpose of the study.

The study design was a survey and the sample was randomly selected.

The assessment tools used were described and referenced while statistical analysis was not mentioned.

The results were presented in text. The authors did not find similar statistics regarding the prevalence of child abuse in Egypt.

Clinical **recommendation** was suggested by the end of the study.

Limitations of the work were not mentioned.

Prevalence of social anxiety disorder in late childhood and early adolescence among schools in Cairo (*Ibrahim et al, 2008*)

The title was simple and clear identifying the studied phenomena and the target population.

Aim of the work was clearly mentioned.

The sample was multiple stage random sampling. **The study design** was not mentioned.

Assessment tools were DSM-IV-TR criteria for depression and social phobia.

Results were presented in tables and graphs accompanied with texts.

Discussion of the results contained analysis, possible explanations of the results with comparison with other studies.

Recommendations and **limitations of the study** were reported in brief.

Prevalence of depression in a sample of Egyptian secondary schools female students *Sabry et al, 2008*

The title is simple and clarifying the target population and the studied phenomena.

The aim of the study was clearly stated.

The study design was cross sectional study.

Sample size the total number of the sampling population was mentioned and the sample size was calculated. But the bases of calculation of the sample size were not clear.

A pilot study was conducted to test the response compliance and the logistic and administrative difficulties which might face the survey.

The assessment tools used in the study were described in details and referenced.

The statistical methods used for data analysis were mentioned.

The results were presented and illustrated with tables and graphs that were self explanatory with brief text comments that clarified the data.

The discussion included analysis and explanation of the results with comparison to the previous studies.

Several **recommendations** and suggestions were mentioned by the end of the study.

Geriatric psychiatry

Depressive illness in the elderly psychosocial and demographic study (El Khouly et al 1993)

The title is descriptive for the phenomenon to be studied but with generalization of the results as the sample was not clear.

Aim of the study was not mentioned.

Study design was case control but it was not mentioned .also the *sampling methods* and the sample size was not stated.

The tools used for assessment were explained, discussed for reliability and validity and referenced.

The statistical methods used for data analysis were named.

The results were presented and illustrated using tables and graphs that were informative and simple.

The discussion of results included detailed analysis with possible explanations and comparisons with the previous studies.

Recommendations were not mentioned.

Limitations of the study were not mentioned.

Correlation between sociodemographic characteristic & occurrence of psychiatric disorder among geriatric in 2 areas in Egypt one rural & one urban (*Abdel Hady et al, 1999*)

The title was descriptive and clarifying the sample studied but it was too long.

The aim was clearly stated with explanation.

The study design was descriptive cross sectional. The sampling methods and sample size were explained in details.

The tools used for assessment were described in details and referenced.

A pilot study was conducted to finalize the questionnaire and refine the study design.

Statistical analysis was named.

The results were clearly presented and illustrated with tables and text. The tables were informative and self explanatory.

The discussion The results were discussed and explained in details with comparison with literature.

Recommendations were mentioned by the end of the study proposing a program for geriatric health promotion.

Depressive symptoms among elderly living in geriatric homes in Alexandria (Abd El Kawy et al 2004)

The title described the study with limitation of the results to the studied sample.

The aim was clearly stated to determine Depressive symptoms among elderly living in geriatric homes in Alexandria and to assess the effect of intervention program.

Study design was case control and pretest and post test design to evaluate the impact of intervention program.

Sampling methods were not mentioned.

Assessment tools were mentioned briefly.

Statistical analyses were not mentioned.

Results were illustrated in tables accompanied with brief texts.

The discussion The results were discussed and explained in details with comparison with literature.

Clinical and training **recommendations** were mentioned by the end of the study.

Limitations of the study were not mentioned.

Prevalence of Depression among Residents Living In Elderly

Homes in Cairo (Abdel Aal, 2005)

The title is stated in a simple way specifying the phenomenon to be studied and the target group.

The aim of the work was mentioned in brief.

The study design is a case control study which is a suitable design to reach the aims.

The sampling method and the **sample size** calculation were clear. All subjects were selected according to certain inclusion and exclusion criteria that were explained.

The assessment tools were mentioned and described in details and referenced.

Statistical methods used for data analysis and correlation were clarified

The results were simply presented and illustrated in details. The tables were simple and self-explanatory.

The discussion included analysis of the results with possible explanation of them and demonstration of how these results agree or contrast with previously published work.

Limitations and recommendations were not mentioned in the study.

Depressive disorders among a sample of Egyptian old patients in a medical ward (*Saleh et al, 2007*)

The title is descriptive for the phenomenon to be studied and the target population.

The aim of the study was clearly and specifically stated.

Study design is case control **the sample size** was clarified and the subjects were selected according to certain inclusion and exclusion criteria. Yet Calculation of **sample size** was not clear.

Pilot study was conducted before the study proper in order to justify study proper and to test the tools.

The tools used for assessment were explained, discussed for reliability and validity and referenced.

Statistical tools used for data analysis were named explaining their use.

The results were presented and illustrated using tables that were informative and self explanatory. The text comments highlighted some tabulated data.

The discussion included detailed analysis, explanation of results and comparison of the results with other studies.

Limitations and recommendations of the study were mentioned.

Women mental health

Post-partum psychological disturbances (Epidemiological view)
(Youssef et al, 1985)

Title of the study did not reflect the study proper.

The aim of study was clearly stated giving an explanation for the purpose of the study.

Sampling method was random sample yet the *study design and the sample size* were not mentioned clearly.

Assessment tools were stated in details yet *Statistical analyses* were mentioned without any details.

Results were illustrated in tables and figures.

The discussion of results contained analysis, possible explanations of the results with comparison with other studies.

Recommendations were mentioned in the end of the study. Clinical importance of findings was mentioned.

Prevalence of premenstrual syndrome in medical student impact on cognitive function (*Rizkalla et al, 1993*)

The title was clear and sample.

Aim of the study was clearly stated giving an explanation for why the study was carried out.

Sample population was all females' students in faculty of medicine Suez Canal University.

Assessment tools were described in details and referenced.

Statistical analysis was stated in brief.

Results were illustrated in tables and texts.

The discussion of results included detailed analysis with possible explanations and comparisons with the previous studies.

Recommendation and limitation of the study were not mentioned.

Psychosocial-demographic study of premenstrual dysphoric disorder in a sample of Egyptian women (Zarif *et al*, 1999)

The title was clear, presenting the research question but not specifying the study population.

The aim of study was clearly stated giving an explanation for the purpose of the study.

Study design was not mentioned.

The sampling method was stratified random sample.

Pilot study was conducted to help in calculation of the sample size for the study proper.

Assessment tools were stated in details and referenced.

Statistical analysis mentioned in brief.

Results were illustrated in tables and figures.

The discussion: The results were discussed and explained in details with comparison with literature.

Recommendations were mentioned in the end of the study. Clinical importance of findings was mentioned.

Limitations were not mentioned in the study.

**Psychobio social study of premenstrual dysphoric disorder
(Mikhael et al, 2000)**

The title was simple yet it did not specify the target population.

Aim of the study was detailed identifying the purpose of the study.

Study design was case control all subjects were selected according to certain inclusion and exclusion criteria that were mentioned. As regards the sample size was nurses of Benha University hospital.

Assessment tools psychometric and biological measurements were mentioned. Yet **the statistical methods** used for data analysis were not clarified.

Results were illustrated in tables.

The discussion included analysis of data and comparison with other studies.

Several **recommendations** were suggested by the end of the study.

Limitations of the work were not mentioned.

Pregnancy Related Obsessive Compulsive Disorder (A study in an Egyptian sample (Asaad et al, 2001)

The title clarifying that the study was done on Egyptian sample.

The aim was stated clearly and to the point.

The study design comparative study as the study compared between pregnant and non-pregnant females. Yet the study design was not mentioned.

The sample size and ***method of sampling*** were not clarified. That would make it hard to infer the results of the study to the whole population.

The assessment tools were explained and referenced and the statistical methods were named clarifying their use.

The results were properly described and illustrated with tables.

The results were ***discussed*** in details and compared to previous literature.

Recommendations for further research and research topic were suggested by the end of the study.

The limitations of work were not mentioned.

Prevalence of post partum depression among women with high risk factors (Ahmed et al, 2002)

The title is descriptive for the phenomenon to be studied.

The aim of the study was clearly and specifically stated.

Study design was prospective study which is a suitable design for such a study. Yet study design was not mentioned.

The time, place and sampling population were clarified and the subjects were selected according to certain inclusion and exclusion criteria but it is still the sample size was not justified.

The tools used for assessment were explained, discussed for reliability and validity and referenced.

The statistical methods used for data analysis were mentioned.

The results were presented and illustrated using tables and graphs that were informative and simple.

The discussion of results included detailed analysis with possible explanations and comparisons with the previous studies.

Several clinical **recommendations** and suggestions for research were mentioned.

Limitations of the study were not mentioned.

Prevalence and Risk Factors of Depression in Pregnancy and Puerperium (Mikhael et al,2007)

The title was simply stated but it is generalized as it did not specify the target population.

The aim of the study is precise specifying the point to be studied.

The study design was not mentioned.

Sampling method and sample size was explained. Yet the bases of calculation of the sample size were not clear.

Tools of assessment and diagnosis were just named without any explanation of their use or method of application.

The statistical methods used for data analysis were not clarified.

The results were illustrated in tables that were simple, self explanatory with brief comments.

The discussion of the results included analysis of data with comparison with other studies.

Recommendations were not mentioned.

Violence against women a study of prevalence and psychiatric consequence (*Mohamed et al, 2006*)

The title is descriptive for the phenomenon to be studied but with generalization of the results as the sample was not clear. It does not show the comparison between violence in psychiatric and non psychiatric patients.

The aim of the study is precise specifying the point to be studied.

The research started with four **hypotheses** that were simple and specific.

The study design was not mentioned. Also the sampling methods were not mentioned.

The tools used for diagnosis of patients were described in details ensuring their validity and reliability and were referenced.

The statistical methods used for data analysis were named.

The results were simply presented and illustrated with tables and graphs. The tables were self explanatory with brief text comments.

The discussion The results were discussed and analyzed in details and compared to literature. The discussion also contained verification of the hypotheses of the study.

Clinical **recommendations** and suggestions were mentioned by the end of the study.

Epidemiological psychiatric study on a sample of female in al Dakahlia govern ate in Egypt (El Sayed et al, 2008)

The title is simple, presenting the research question and specifying the study population.

The aim is clearly stated.

The study was designed as a descriptive study. The study design was not mentioned. The sample methods and size were mentioned.

Tools of assessment were mentioned and described in details but not the *statistical methods*.

The results were presented in tables and graphs that were informative and self explanatory.

The results then were *discussed* in details, analyzed and compared to other studies.

Liaison psychiatry

Psychiatric morbidity in general medical department of Kasr el Aini hospital (*El Gamal et al, 2001*)

The title was simple clarifying the studied phenomena and the target population.

Aim of the work was mentioned in precise way.

Study design was 2 stage design (survey study and in depth study).

The sample was chosen according to determined inclusion and exclusion criteria.

The survey study was conducted on 500 consecutive patients while depth study was carried on 55 patients from those who had been assessed in the survey randomly.

The assessment tools were explained in details and referenced.

Statistical analyses were mentioned.

The results were simply presented and were illustrated with tables. The tables were informative with brief text that highlighted some data.

The discussion included explanation and analysis of data in correlation to other related studies. **Recommendations** were integrated in the discussion.

Incidence of psychiatric comorbidity among physically ill patients admitted to El Hussein University hospital & its impact on the duration of hospital stay (Mohamed et al,2004)

The title was clear explaining the point to be studied also the target population. Yet it is too long.

Aim of the study was precise and clear.

The study design was not mentioned. **The Sample** was 251 patients but the sample size calculation technique was not stated.

A **pilot study** was done before the study proper. Yet its aim was not clarified.

Assessment tools used were mentioned and referenced. While statistical analyses were not stated.

The results were presented in tables, graphs and texts that were informative and simple.

The discussion included detailed analysis and explanation of the results with comparison with previous studies.

Clinical recommendations were mentioned by the end of the study.

Psychosocial correlates of axis I mental disorders among medical inpatients (*Abd El Hay et al, 2005*)

The title was clear in identifying the studied phenomena but without specification of target population.

Aim of the study was mentioned clarifying why this study had been done.

Study design was case control yet it was not mentioned. Also **the sample techniques** were not mentioned.

Assessment tools were mentioned and referenced.

Statistical analysis was named.

Results were presented in texts tables and graphs which was clear and informative.

Discussion of the results was presented with possible explanation and in comparison to other studies.

Recommendations and **limitations** of the studies were not mentioned.

Suicide

Prevalence of suicidal feelings in a sample of non consulting medical students (*Okasha et al, 1980*)

The title was clearly stated, specifying the phenomena to be studied and the target population.

Aim of the study was not mentioned.

The method of sampling and basis of calculation of **sample size** were not mentioned. The study included 516 medical students. Also the **study design** was not mentioned.

The tools used for assessment in the study were not referenced or explained.

Statistical tools used to analyze the results were not mentioned in the methodology of the study.

The results were clearly stated and illustrated with tables and that were simple and informative. The results were also **discussed** and compared with other studies.

Limitations of the study and recommendations were not mentioned.

Psycho socio epidemiological study of attempted suicide in an Egyptian population (*El Mahalawy et al, 1985*)

The title was clear identifying the studied phenomena.

Aim of the study was mentioned in details.

The study design was not mentioned.

The sampling methods were mentioned in details.

Assessment tools used was clarified.

Statistical methods used for data analysis were explained and referenced.

The results were simply presented and illustrated with tables and texts.

In the ***discussion*** the results were analyzed in details and explained with correlation to previous studies.

Psycho socio epidemiological study of suicidal feelings in a sample of Egyptian students (*Abdel Al et al, 1995*)

The title was clear as regards the point to be studied and the target population.

The aim of work was clearly stated.

The study design was not mentioned.

The **sample size** was mentioned but not the **sampling methods**.

Tools used for assessment were explained in brief.

Statistical tests used for data analysis were mentioned.

Results were simply presented and illustrated with tables and texts. The tables were self-explanatory and informative.

The discussion of results was detailed with possible explanation and comparison with literature.

Recommendations were mentioned by the end of the study.

Epidemiology and psychiatric morbidity in suicide attempter at poison control center (*Bassim et al, 2005*)

The title was clear as regards the studied phenomena.

Aim of the work was clear mentioned.

The study design was cross sectional but it was not mentioned. *The sample size* was clear.

Pilot study was done before the study proper to assess reliability of questionnaire and determine the sample size.

Assessment tools were explained in details.

Statistical analyses were mentioned.

Results were illustrated in tables and graphs accompanied with texts.

Discussion of the results were presented and compared to other studies.

Limitations of the study and *recommendations* were mentioned by the end of the study.

Psychiatric study on a sample of students of faculty of medicine Al Azhar University (Ali et al, 2006)

The title was generalized as regards studied phenomena. Yet it specifies the target population.

Aim of the work was clear.

The study design was cross sectional but it was not mentioned. **The sample size** was clear but not **the sampling methods**.

Pilot study was done. Yet it was not clarified its aim.

Assessment tools were explained in details.

Statistical analyses were not mentioned.

Results were illustrated in tables accompanied with texts.

Discussion of the results were presented and compared to other studies.

Limitations of the study and **recommendations** were mentioned by the end of the study.

DISCUSSION

Psychiatric Epidemiology

It's the field which seeks to measure the prevalence of mental illness in society. It is a subfield of the more general epidemiology. *(Susser E. et al, 2006)*

Epidemiology has already contributed a great deal to psychiatric research. The discipline has been used extensively for studying the frequency of mental disorders in communities across the world. Increasingly, it is also being used to examine the causes of mental disorders, including biological and genetic causes, utilizing the major risk factor designs of case control and cohort studies *(Wyatt et al, 2000)*.

For ideal epidemiological study, it should give an idea about the prevalence of a disorder in the general population and it should also illustrate the effect of different socioeconomic factors on the distribution of the illness. Through epidemiological studies, the different risk factors and how they contribute to the development of the illness can be explored. Results should be presented in clear way with description of the statistical methods used and compared with those of previous studies giving explanation for the differences. Finally, the actual size of the problem will be known for better and suitable management.

This work targeted to make use of epidemiological studies on psychiatric disorders in Egypt in order to identify the gaps in Egyptian researches to overcome these defects in the future.

In this study several databases were explored in the period from December 2008 to February 2009 to collect epidemiological studies done in Egypt on psychiatric disorders. The databases searched were those of libraries of faculty of medicine Ain Shams University, faculty of medicine Al-Azhar University, faculty of medicine Cairo University, as well as Egyptian Journal of Psychiatry, Current Psychiatry and other available Journals. All the databases were searched till the time of data collection.

Of a total of 59 studies collected, the majorities were the epidemiological studies concerning psychiatric disorder in child and adolescent (18 studies), substance use disorder (10 studies), studies addressing women mental health (9 studies), those addressing geriatric psychiatry (5 studies), neurotic disorders (6 studies) and mood disorders (3 studies). Also there were additional conditions that may be a focus of clinical attention such as suicide (4 studies), liaison psychiatry (3 studies) and lastly a study on psychiatric disorder in a sample of students of faculty of medicine Al Azhar University. All the studies included in the review were done by Egyptian researchers on different samples of the Egyptian population, as the review was meant to highlight the epidemiological characteristics of psychiatric disorders in the Egyptian community.

Regarding researches done on **epidemiology of substance use disorders**;

Most of the studies concerned with substance abuse were targeting schools and universities students who constitute the age group that highly exposed to substance use. Other studies were concerned with patients admitted in hospitals or attending outpatient clinic. The later were concerned mainly with psychosocial correlation to substance abuse.

Concerning **mood disorder**, studying the epidemiology of mood disorder is an important step to know the actual size of the problem, so that a proper planning for health services can be carried out. This will result also in suitable management. It was noted that most of these studies focused mainly on depression. Other types of mood disorders were not discussed in details. There is lack of such large surveys that involve many geographical areas in Egypt to assess the epidemiology of mood disorders. The studies discussing the specific epidemiological characteristics of mood disorders when occurring in special age groups are still deficient.

As regards the Egyptian studies on epidemiology of **neurotic disorders**; it was noticed that most of them were either hospital-based, as the samples were collected from out-patients and inpatients of psychiatric hospitals, and private clinics or from hospitals and clinics of other medical specialties or the samples were collected from colleges and schools. The community based and house held studies were few.

Selection of studied groups is mostly due to the feasibility of these population and easier sample collection, as well as there is high prevalence of neurotic disorder in medical and psychiatric patients.

Actually, there are a relatively large number of epidemiological studies concerning **child and adolescent psychiatry** in comparison to other psychiatric disorders. This is mostly due to the availability of the target population and the accessibility to the sample in schools and universities.

Regarding **old age psychiatry** the main interest was for depression in this age group. Also, these studies clarified some risk factors as the effect of institutionalization on elderly and the influence of medical problem on occurrence of depression.

Epidemiological psychiatric studies about **women mental health** were scanty and exploring only few aspects of the women psychiatric well being. The aspects studied were those addressing peri-menstrual dysphoric disorder (PMDD) and its sequele on women's quality of life and functioning. A variety of studies were referred to psychological health for women during pregnancy and post partum period as women vulnerability rise during this time intervals. Also there was study for violence against women and its psychiatric consequences.

On reviewing studies of **liaison psychiatry**, the 3 studies found were addressing the same subject. The psychiatric comorbidity of physically ill patients admitted in hospital and its effect on duration of hospitalization. In addition it illuminated the influence of social support on this group of patient.

Another subject represented a point of concern of epidemiological studies; it is the **suicidal feeling and suicidal attempt**. The studies revealed high prevalence of suicidal feeling which needs interference to help those individuals to overcome their crisis and to provide a social support.

Finally a survey concerning **mental health** of medical students in Al Azhar University using several scales as GHQ and EPQ was reviewed.

Limitations of the Work

Due to the wide scope of the topic of the study as it included epidemiological studies done on psychiatric disorders, it was hard to collect the Egyptian studies conducted in that field putting into consideration the limited time of the study and difficult access to the Egyptian literature. So, the studies were searched only in the libraries of the three large Egyptian universities located in Cairo and the main Egyptian journals of psychiatry that makes the review missing the studies published elsewhere.

In Cairo University (The library of faculty of medicine):

The studies in the field of neuro-psychiatry were collected and organized in chronological order since 1995. These studies were easily accessible. Studies before 1995 were not available.

In Al-Azhar University:

All the studies obtained from Al-Azhar University were written in Arabic with English summary. At time of data collection Al-Azhar University libraries showed restrictions to data access and obtaining reprints wasn't available, which was an obstacle that been faced.

Critical appraisal:

After the review of available Egyptian literature, critical appraisal of the studies included in the review was done. General observations were collected during appraisal and they apply to most of the studies appraised, these observations were:

- Most of the studies' titles included generalization that was not justified during conduction of the research as there was no specification of the sample included in the study or the exact aspects of the disorder to be studied.

- The aim of the study was clearly stated in the majority of the studies. In most of the cases there was more than one aim which were been fulfilled by the end of the studies.

- Only few studies had a clearly stated research question, while the majority did not. A clearly stated specific research question is important to choose a suitable study design and to select proper sample with suitable sample size.

- The study designs used were frequently not mentioned clearly, described or rationalized. Not clarifying the study design raises questions about the results reached.

- It was noticed that most of the studies used observational designs mainly cross-sectional and case-control designs.

▪ These designs are characterized by being simple, easy and low cost designs compared to other designs. Prospective cohort design is rare in Egyptian research. That might be due to the limited time for the studies and the limited budget of the research as most of the studies are M Sc. or MD theses. Also, the difficulties in following up the patients for long times and increased possibility of dropouts may be contributing factors.

▪ Sampling population was not rationalized in most of the studies. It was frequently selected according to the university where the study was registered. That is because they are more feasible and time saving; that made the sampling populations not representative for the target populations of most of the studies and decreased the external validity of the sampling population (the ability to generalize from the study results to the target population) with increased sampling bias. Moreover, that deprived several places in Egypt of being studied as they are away from the research centers.

▪ Details of calculation of samples size were not mentioned except in few studies. Suitable sample size is mandatory to give on accurate picture of what is going on in the target population.

The assessment tools were usually explained in details with proper referencing. Yet in studies extracted from journal the tools were just mentioned.

RECOMMENDATIONS

1. Establishing a national register system for all Egyptian researches and studies is an essential need. Presence of such system will allow recording of all Egyptian studies and so obtaining of these studies will be easier.
2. There is a need for further systematic reviews addressing different psychiatric disorders, it is better to be with narrower scope of research to discuss only one specific aspect of psychiatric disorders.
3. A more comprehensive national Egyptian survey involving all Egyptian governorates is needed to assess the prevalence of different psychiatric disorders.
4. More recent studies are needed to explore the specific epidemiological and clinical characteristics of psychiatric disorders.

SUMMARY AND CONCLUSION

Psychiatric Epidemiology

It's the field which seeks to measure the prevalence of mental illness in society. It is a subfield of the more general epidemiology. (Susser *et al*, 2006)

This work targeted to make use of epidemiological studies on psychiatric disorders in Egypt in order to identify the gaps in Egyptian researches to overcome these defects in the future. So that work aimed at:

- Systematically reviewing & appraising the available Egyptian epidemiological studies on psychiatric disorders.

In this study several databases were explored in the period from December 2008 to February 2009 to collect epidemiological studies on psychiatric disorders in Egypt. The databases searched were those of libraries of faculty of medicine Ain Shams University, faculty of medicine Al-Azhar University, faculty of medicine Cairo University, as well as Egyptian Journal of Psychiatry, Current Psychiatry and other available Journals. All the databases were searched till the time of data collection.

Of a total of 59 studies collected the majorities were the epidemiological studies concerning psychiatric disorder in child and adolescent (18 studies), substance use disorder (10 studies), studies addressing women mental health (9 studies), and those addressing neurotic disorder (6 studies), geriatric psychiatry (5 studies), and mood disorder (3 studies).

Also there were additional conditions that may be a focus of clinical attention such as suicide (4 studies) and liaison psychiatry (3 studies) and lastly a study on psychiatric disorder in a sample of students of faculty of medicine Al Azhar University.

On appraising the selected studies, we try to criticize each study in objective points as the title, aim of the work, the sampling methods and the assessment tools used in those studies. Also the results and discussion were criticized. Lastly the recommendation and limitation of studies were stated or not.

Summary of M.Sc and M.D thesis of Ain Shams University will be presented in appendix.

Conclusion: although the great effort spent in the Egyptian research it was noticed that it lacks coordination to offer complimentary data about the profiles of different psychiatric disorders. Further effort is needed to collect the available research to construct a national data base that will help in planning for the future research according to the needs of the community.

REFERENCES

- **Abd El Aal S. (2005):** Prevalence of depression among residents living in elderly homes in Cairo Current Psychiatry, 12:359-368
- **Abd El Al H. (1995):** Psycho socio epidemiological study of suicidal feelings in a sample of Egyptian students. M Sc. Thesis **supervised by** Prof Farouk Lotaif Prof Naglaa El Mehaliawi Prof Abdel Nasser Mahmoud. Faculty of Medicine Ain Shams University
- **Abd El-Azim K. (2001):** Psychosocial correlates of substance abuse: a study in an Egyptian sample. MD thesis **supervised by** Prof Farouk Lotaief Prof Naglaa El Mahalawy Prof Aida Seif El Dawla Prof Tarek Assad. Faculty of medicine – Ain Shams University
- **Abd El Hady A. (1999):** Correlation between sociodemographic characteristic & occurrence of psychiatric disorder among geriatric in 2 areas in Egypt one rural & one urban. M .D Thesis **supervised by** Prof Gaber Sayed Prof Mohamed El Garhy Prof Mohmoud Hammouda Faculty of Medicine Al Azhar University
- **Abd El Hady R. (1994):** Study of anxiety disorder among students of secondary nursing schools in Benha university hospital. Benha medical Journal 11:209-219
- **Abd El Hamid R. (1989):** An epidemiological study of depressive symptoms in rural and urban population in Egypt. MD. Thesis **supervised by** Prof Ahmed Okasha Prof Mostafa Kamel Prof Rafik Hannalla. Faculty of Medicine Ain Shams University
- **Abd El Hay M. , Ezzat S., Abou Hatab H. (2005):** Psychosocial correlates of axis I mental disorders among medical inpatients. Egyptian Journal of Psychiatry 24:127-133

- **Abd El Kawy Y. Attia M.,Ayoub A.(2004):** Depressive symptoms among elderly living in geriatric homes in Alexandria Egyptian Journal of Psychiatry 23:161-174
- **Abou-Hatab M. (2004):** Childhood phobia: Screening among a sample of non-referred primary school Egyptian children. Current Psychiatry 11:127-144
- **Abou Khatwa S., Kamel F., Youssef R., Attia M., Fawal K. (1997):** Epidemiological study of addicts admitted to Maamoura psychiatric hospital in Alexandria. The Journal of the Egyptian Public Health Association, 22 :88-112
- **Abu Rayan,M. (2001) :**Epidemiological study of psychiatric disorder in school children from age 9-12 year in Alexandria. M.D Thesis **supervised by** Prof Mohmoud Hammouda Prof Mohamed H. Bahary Prof Mohamed Owida. faculty of medicine Al Azhar University
- **Ahmed A.A (2005):** Substance use disorders among male general secondary school students in Cairo. MD thesis **Supervised by** Prof. Adel Sadek Prof Mohamed Ghanem Prof Amany Haroun El-Rasheed Dr. Maged El-Setouhy Faculty of medicine – Ain Shams University
- **Ahmed H., El Gendi F., Abdel Fatah S., El Sheikh M., Aly K. (2002):** Prevalence of post partum depression among women with high risk factors. The New Egyptian journal of medicine 26:45-53
- **Ali M. (2006):** Psychiatric study on a sample of students of faculty of medicine Al Azhar University. M Sc. Thesis **supervised by** Prof Mohmoud Hammouda Prof Abd El-Ghany .Faculty of Medicine Al-Azhar University

- **Asaad T., Ismail K. (2001):** Pregnancy Related Obsessive Compulsive Disorder (A study in an Egyptian sample. Current Psychiatry, 8 :326-331
- **Bakr I, El-Sayed N. (2005):** Prevalence of anxiety among medical students in different grades:An Egyptian Study. Current Psychiatry, 12: 98-105
- **Bailey L. , Vardulaki K., Langham J. and Chandramohan D. (2005):** Introduction to Epidemiology first edition Open University Press
- **Bassim R. (2005):** Epidemiology and psychiatric morbidity in suicide attempters at the poison control center Ain Shams University Hospitals. M.D thesis supervised by Prof Ahmed Okasha , Prof Adel Sadek, Prof Essam Badawy, Prof Tarek Assad , Prof Tarek Okasha
- **Bishry Z. (1970):** Psychiatric-Epidemiological-Psychosocial study of stammering in Egyptian children. M.D Thesis **supervised by** Prof. Abbass Hassan Prof Mohamed Soueif Prof. Ahmed Okasha faculty of medicine Ain Shams University
- **Demerdash A., Fathi A., Ibrahim A.R., El-Tohamy S., Omran S. (1992):** Substance non medical use among secondary school student in Assuit City. Egyptian Journal. of Psychiatry,15:155-162
- **Eid H. (2006):** Substance dependence in a sample of Egyptian adolescents. MD Thesis **supervised by** Prof Mommtaz Abdel Wahab Prof Lamis El Ray Prof Salwa Erfan faculty of medicine Cairo University
- **El Gamal M. (2001):** Psychiatric morbidity in general medical department of Kasr el Aini hospital. MD Thesis **supervised by** Prof Said Abdel Azim Prof Trandil El Guindy Prof Lamis El Ray faculty of medicine Cairo University

- **El Gendawy H., Hadhood M., Shams El Din R., Shabib A. (2005):** Epidemiological aspect of depression among Assuit university students. Assuit Medical Journal, 29: 147-158
- **El kholy G. (1997):** the Prevalence of Obsessive Compulsive symptoms in a sample of Egyptian Psychiatric Patients. MD thesis **supervised by** Prof Ahmed Okasha Prof Farouk Lotaief Prof Abdel Moneim Ashour Prof Naglaa El-Mahalawy Prof Aida Seif-El-Dawla . Faculty of Medicine Ain Shams University
- **El Khouly M., El Nagar S., Hashem A. (1993):** Depressive illness in the elderly psychosocial and demographic study. Egyptian Journal of Psychiatry,16:73-81
- **El Mehaliawi N. (1985):** Psycho socio epidemiological study of attempted suicide in an Egyptian population. MD thesis **supervised by** Prof Ahmed Okasha Prof Mostafa Kamel Prof Farouk Lotaif. Faculty of Medicine Ain Shams University
- **El Sayed A. (2008):** Epidemiological psychiatric study on a sample of female in al Dakahlia govern ate in Egypt. MSc Thesis **supervised by** Prof Mohmoud Hammouda Prof Ahmed El Akabawy faculty of medicine Al Azhar University
- **El Sherbini A., Fadel K., Eissa M. (1995):** Prevalence of some psychiatric symptoms in adolescent student in Assuit. Egyptian journal of psychiatry,18:153-170
- **El Raey L., Abu Al-Ela I., Asaal A.(2001):** Socio-demographic, clinical and psychometric profile of a sample of Egyptian patients with social phobia. Current Psychiatry,8: 273-280

- **Fahmy M. (1989):** Heroin abuse (a study of its psycho demographic, and clinical aspects among Egyptian inpatients. MD thesis **supervised by** Prof Ahmed Okasha Prof Haider Galeb Prof Afaf H. Khalil Faculty of medicine - Ain Shams University
- **Fahmy E., El Sheikh H. (2004):** Prevalence & family dysfunction of unspecified depressive disorder among outpatient clinic attendants. Egyptian Journal of Psychiatry, 23:105-112
- **Guemei N. (2005):** Prevalence of body dysmorphic disorder in an Egyptian sample. MD thesis **supervised by** Prof Ahmed Okasha Prof Mohamed Ghanem Prof Tarek Okasha Faculty of Medicine Ain Shams University
- **Hammouda M. (1984):** An epidemiological study of conduct disorder in primary school children. M.D Thesis **supervised by** Prof Mohamed Shalaan faculty of medicine Al Azhar University
- **Hammouda M., Soliman A., Hassan A., Bahari M., Esmail A. (2002):** Prevalence of generalized anxiety disorder and its risk factors in a sample of schools and universities students. The New Egyptian Journal of Medicine, 27:45-50
- **Hatata H., Awaad M., El Sheikh M., Refaat G.(2008):** body image dissatisfaction and its relationships with psychiatric symptomatology eating beliefs and self esteem in Egyptian females adolescents. Current Psychiatry, 15:416-429
- **Hashem N. (2002):** Substance use disorders among female secondary school students in Cairo. MD thesis **supervised by** Prof Adel Sadek Prof Naglaa El Mahallawy Prof Alaa El Din Soliman Prof Amany Haroun El Rasheed Faculty of medicine – Ain Shams University

- **Hassan D. (2006):** Social anxiety disorder among a sample of Egyptian children. MSc Thesis **supervised by** Prof Khadiga Raghab Prof Adel Abou Bakr Prof Hussein Attia faculty of medicine Al Azhar University
- **Ibrahim S. (1994):** Epidemiology of behavior disorders in primary school children (6-11years) in urban and rural areas in Egypt. **Supervised by** Prof Rafik Hannalla Prof Abdel Baky. Institute of Post graduate Childhood Studies Medical department Ain Shams University
- **Ibrahim N. (2008):** Prevalence of social anxiety disorder in late childhood and early adolescence among schools in Cairo. MSc thesis **Supervised by** Prof Alaa El Din Soliman Prof Iman Abou El Ala Dr Marwa Abdel Meguid. Faculty of Medicine Ain Shams University
- **Ismail R. (1998):** The prevalence of obsessive compulsive symptoms in a sample of Egyptian students. M.D Thesis **supervised by** Prof Afaf H. Khalil Prof Ahmed Okasha Prof Khadiga Raghab .faculty of medicine Al Azhar University
- **Kessler R. (2000):** Bulletin of the World Health Organization, 4: 464-474
- **Mikhael V., Khodeir R., ElShikh H., Abdel Rahman S., ElKholy R.(2000):** Psychobio social study of premenstrual dysphoric disorder. Egyptian Journal of Psychiatry ,23:231-240
- **Mikhael V., El-Mahdy M., El-Hamady M., Oransa A., El-Khouly R., Mostafa K. (2007):** Prevalence and Risk Factors of Depression in Pregnancy and Puerperium. Current Psychiatry, 14:106-117
- **Mohamed H. (2007):** Prevalence of social anxiety symptoms among a sample of Egyptian adolescents. MD Thesis, **supervised by** Prof Khadiga Raghab Prof Said Abdel Azim Prof Adel El Demerdash Prof Mommtaz Abdel Wahab Dr Hussein Attia. faculty of medicine Al Azhar University

- **Mohamed M. (1989):** An epidemiological study of depression among sample of Egyptian adolescent 15-18 years old of both sexes. M Sc. Thesis **supervised by** Prof Ahmed El Akabawy Prof Mohmoud Hammouda. Faculty of Medicine Al Azhar University
- **Mohamed R.H. (2006):** Violence against women a study of prevalence and psychiatric consequence. MD Thesis **supervised by** Prof Afaf H. Khalil Prof Khadiga Raghab Prof Mommtaz Abdel Wahab Prof Hussein Atia faculty of medicine Al Azhar University
- **Mohamed R.R. (2004):** Incidence of psychiatric comorbidity among physically ill patients admitted to el Hussein University hospital & its impact on the duration of hospital stay. MD Thesis **supervised by** Prof Adel Al Madany Prof Farouk Lotaif Prof Mohamed H. Bahary Prof Mohamed Abdel Ghani. faculty of medicine Al Azhar University
- **Okasha A., Lotaif F., Sadek A., Bishry Z., Ashour A.(1980):** Prevalence of suicidal feelings in a sample of non consulting medical students. Egyptian Journal of Psychiatry, 199-211
- **Okasha A., Ashour A., Kamel M., Sadek A., Bishry Z., Lotaif F. (1981):** Psycho-demographic study of anxiety in Egypt. (The first application of PSE in its Arabic version). Egyptian Journal of Psychiatry, 4:57-71
- **Ragheb M. (2005):** Social phobia in secondary school and university student an Egyptian study. MD thesis **supervised by** Prof Ahmed Okasha Prof Afaf H. Khalil Prof Mohsen Gadallah A, Prof Tarek Okasha. Faculty of Medicine Ain Shams University

- **Rashed S., Hidayet N., Salama H., Ibrahim A., Salem w. (1994):** Epidemiological study of attention deficit hyperactivity disorder in elementary school in Alexandria govern ate. Bull. Alexandria Faculty of Medicine, 30:165-170
- **Riyadh M., Hassan A., Algammal M., Abdelrahman A. (2007):** the prevalence of child abuse and its effect on the mental health. Current Psychiatry, 14:483-487
- **Rizkalla N., Mishriky A., El Defrawi M., Khattab T. (1993):** Prevalence of premenstrual syndrome in medical student impact on cognitive function. Egyptian Journal of Psychiatry, 16:113-119
- **Sabry W. (2008):** Prevalence of depression in a sample of Egyptian secondary schools female students. MD thesis **supervised by** Prof Afaf H. Khalil Prof Tarek Asaad Prof Amany Haroun El Rasheed Prof Mohamed Fekry. Faculty of Medicine Ain Shams University
- **Sadock RJ, Sadock V.A. (2005):** Comprehensive text book of psychiatry, 8th (ed). Lippincott; Williams and Willkins. P 659
- **Saleh A. (2007):** Depressive disorders among a sample of Egyptian old patients in a medical ward. MSc Thesis **supervised by** Prof Sanaa Kamal Prof Abd El Hamid Hashem Prof Noha Sabry. faculty of medicine Cairo University
- **Serag El Din A. (1988):** Drug abuse among Egyptians. MSc thesis **supervised by** Prof Ahmed Okasha Prof Samiha Abdel Monem Faculty of Medicine Ain Shams University

- **Soltan M. (2005):** Prevalence of Obsessive Compulsive Disorder among female secondary school students in Cairo. MD thesis **supervised by** Prof Zeinab Bishry Prof Gihan El-Nahas Prof Iman Abou El-Ela. Faculty of Medicine Ain Shams University
- **Soueif M., El Sayed A., Honnovrah M., Darwesh Z. (1979):** The non medical use of psychoactive substances among secondary schools male students in Egypt. *Egyptian Journal of Psychiatry*, 2: 198-204
- **Susser E, Schwartz S, Morabia A, and Bromet E. (2006):** *Psychiatric Epidemiology: Searching for the Causes of Mental Disorders.* New York: Oxford University Press
- **Tsuang T. and Tohen M. (2002):** *Textbook in Psychiatric Epidemiology, Second Edition, John Wiley & Sons*
- **Wyatt R. and Susser E (2000):** US birth cohort studies of schizophrenia: a sea change. *Schizophrenia Bull* 26:255-256
- **Youssef I. (1985):** Post-partum psychological disturbances (Epidemiological view). MD thesis **supervised by** Prof Ahmed Okasha Prof Nabil Yonis. Faculty of Medicine Ain Shams University
- **Youssef I., Fahmy M., Haggag W., Elsayed O., Ahmed R. (2005):** Psychological Profile and Prevalence of Psychoactive Substance Use among Suez Canal University Students in Ismailia. *Current psychiatry*, 12: 269-285
- **Zarif N. (1999):** Psychosocial-demographic study of premenstrual dysphoric disorder in a sample of Egyptian women. MD Thesis **supervised by** Prof Afaf H. Khalil Prof Maged Abou Seeda Prof Aida Seif El Dawla. Faculty of Medicine Ain Shams University

Appendix

Summary of clinical M.D. thesis and M.Sc thesis on epidemiological studies on psychiatric disorder in neuropsychiatry Department Ain Shams University

Psychiatric-Epidemiological-Psychosocial study of stammering in Egyptian children

Author: Zeinab Bishry

Supervisors: Prof. Abbas Hassan, Prof. Mohamed Soueif, Prof. Ahmed Okasha.

Year: 1970.

Aim

To deal with stammering in children in the primary school on an epidemiological level.

Method

the sample includes 79 stammerers school children aged between 6-12 years, another healthy 79 students were included as controls, they are selected from the same class and are matched with the cases regarding age and sex. They are subjected to Goodenough Test for intelligence in children, Verbal Fluency Test and Personality Test and EEG.

Results

The prevalence of stammering is highest in age group 6-7 years and out of 79 stammerers 51.8% of cases began their disability at age of 2-3 years and 39.3% of cases began after their speech is well established and after school entry and in 8.9% of cases the disability is noticed after the age of 9 years.

Conclusion

Stammering affects a good percent of the population. These patients are subject to great stress and suffering, there are more male than female stammerers forming sex ratio 3:1.

Post-partum psychological disturbances (Epidemiological view)

Author: Ismail Youssef

Supervisors: Prof. Ahmed Okasha and Prof. Nabil Younis

Year: 1985

Aim

To determine the prevalence of post partum psychiatric disturbances in a sample of Egyptian women delivering in the general hospitals in Egypt.

To delineate the risk factors predisposing to post partum psychiatric disturbances in Egypt.

To assess the presence of post partum psychosis.

Methods

The selected sample consisted of:

1-Ladies delivering in department of gynecology and obstetrics in El Hussein University Hospital in 50 days chosen randomly. (Group I)

2-Ladies admitted to El Abbassia mental hospital, known to have given birth within 6 months previous to admission. (Group II)

3-Ladies admitted to El Maadi Palace with a history of delivery 6 months prior to admission. (Group III)

The author used the psychiatric sheet-mini mental scale and Hildreth Scale for mood as a method of studying post-partum psychological disturbances.

Results

The author found out that psychiatric symptoms in puerperium are (adjustment disorder with depressed mood in 13.2% of the sample, maternity blues 7.5% and atypical bipolar disorder 3.8%) while risk factors are (unemployment-positive family history of mental illness-neurotic mood-negative attitude of husband-sex of the baby)

Conclusion

The depressed women had bad social conditions in comparison to non depressed women

Drug abuse among Egyptians

Author: Adel Serag El-din

Supervisors: Prof. Ahmed Okasha and Prof Samiha Abd El Monem.

Site: The study was conducted on students of both faculty of medicine & faculty of commerce Ain Shams University.

Years: 1985

Aim

To detect the crude size of substance use disorder problem among university society this represents the coming future for our country.

Method

The sample consisted of 1033 students of faculty of medicine, and 1200 students of faculty of commerce, Ain Shams university, the data were obtained by using self reporting anonymously distributed questionnaire and were completed by the students on voluntary basis.

Results

The use of caffeine was the most popular, followed by nicotine, then cannabis, and then comes alcohol, sedatives, and stimulants and lastly opiates.

Conclusion

Drug abuse is major health problem which need our attention & intervention especially among youth who represents our productive power.

Psycho socio epidemiological study of attempted suicide in an Egyptian population

Author: Naglaa El Mahalawy

Supervisors: Prof. Ahmed Okasha , Prof. Mostafa Kamel and Prof. Farouk Lotaif

Year: 1985

Aim

To throw light on suicide attempt

To provide more information on the nature and extent of attempted suicide in Egypt

To investigate possible risk factors

Methods

Case of attempted suicide was collected from Ain Shams University Hospital and Dar El Shefa hospital and Mensheyt El Bakry hospital

Case of attempted suicide is investigated by the Suicidal Feeling Questionnaire special sheet, EPQ and Extreme Response Test

Result

There was a seasonal variation in attempted suicide. The prevalence of attempted suicide was higher in females, teenagers and educated individuals.

The single and divorced person has high rates for suicidal attempt

Conclusion

Attempted suicide is not a simple problem as the rate of attempted suicide is increasing rapidly.

Heroin abuse (a study of its psycho demographic, and clinical aspects among Egyptian inpatients)

Author: Magda Fahmy

Supervisors: Prof. Ahmed Okasha, Prof. Haider Galeb and Prof. Afaf Hamed.

Site: The study was conducted in two private hospitals in great Cairo.

Years 1986 & 1987

Aim

To design a suitable national preventive program for the dilemma of heroin abuse and studying the psychosocial correlates of risk and by determining the factors which increase or decrease the likelihood of involvement into substance use.

Method

Heroin abuse studied among 78 male Egyptian heroin users, seeking detoxification from heroin dependence, all met the diagnostic criteria of the DSM-III of opioid abuse and dependence. Their ages were range between 20 and 50 years and control group consisted of 78 male Egyptian subjects, who never had the experience of taking hashish or any other narcotic substances. The control group was matched for age, residential environment and socio-economic position.

Results

Heroin abuse is associated with obvious distorted familial background, marked deterioration of scholastic performance and achievement. The initiation of gateway drugs use at young age and the presence of evident peer deviance are alarming. The majority of abusers had moderate depression & mild to moderate abstinence anxiety. Also it was found that heroin users showed significant cognitive deficits.

Conclusion

No single cause of drug dependence has been or is likely to be, demonstrated, the factors involved in drug abuse are apparently multiple.

An epidemiological study of depressive symptoms in rural and urban population in Egypt

Author: Ragab Abd El-Hamid

Supervisors: Prof. Ahmed Okasha, Prof. Mostafa Kamel and Prof. Rifky Hannalla

Year: 1989

Aim

To find out the prevalence of depressive symptomatology in two communities in Egypt, urban versus rural.

To design a possible preventive program for early detection and treatment of depressive patients.

Method

The study was carried out in selected geographical area in Monoufia governorate, a rural population (Kapher El Bagour) and an urban population (EL Bagour city). All members aged 15-50 years were included in the study. The assessment tools were using General Health Questionnaire, Beck Depression Inventory to those with high scores of the General Health Questionnaire.

Results

(1) The prevalence of major depressive disorder is 10.9% in rural population and 8.1% in urban population. It is more common among women in both urban & rural populations, it is more common among the age group of 36-45 years in both urban and rural populations.

(2) The prevalence of bipolar disorder is 2.6% in rural population and 1.4% in urban population. It is more common among old age group (46-50 years) in rural population while in urban population, it is more among young age group (18-25 years).

(3) The prevalence of dysthymic disorder is 13.3% in rural population and 6.5% in urban population. It is more common among women in both urban and rural populations; it is more common among middle age group.

Conclusion:

Both urban & rural populations have a high percentage of depressive symptoms but the rural population has a very high morbidity than that of the urban population so it will be necessary for planning health programs and for lessening the costs of health services.

Psycho socio epidemiological study of suicidal feelings in a sample of Egyptian students

Author: Howida Abdel Al

Supervisors: Prof. Farouk Lotaif , Prof. Naglaa El Mahalawy, Prof. Abdel Nasser Mahmoud

Year: 1995

Aim

To estimate the extent of suicidal feeling in a sample of Egyptian university students

To investigate the risk factors of suicidal feelings.

Methods

The sample includes 246 female students from Ain Shams University. Every student was subjected to Suicidal Feeling Questionnaire

Result

73% of female students reported suicidal feelings. Most of suicidal feeling and suicidal ideation are of minor degree.

Conclusion

The suicide rates are rising rapidly in young people. University students have suicide rates exceeding those of the corresponding age group in the general population

The prevalence of obsessive compulsive symptoms in a sample of Egyptian psychiatric patients

Author Ghada Abdou El-Kholy.

Supervisors Prof. Ahmed Okasha, Prof. Farouk Lotaief, Prof. Abdel Monneim Ashour, Prof. Naglaa El-Mahalawy, Prof. Aida Seif El- Dawla,

Year 1997.

Aim

To study the prevalence of obsessive compulsive symptoms in a sample of Egyptian psychiatric patients as well as in a matched control group.

Methods

The study included 372 psychiatric patients presented to the first time to Outpatient clinic of Ain Shams University hospitals, and 308 controls matched for age, gender, religion, and years of education. They were chosen by stratified random sampling. The data were obtained using Clinical Descriptions and Diagnostic Guidelines (CDDG) of ICD-10 Diagnostic criteria for research (DCR of ICD-10 obsession symptom section of Present state examination (PSE) 10th version and Y-BOCS

Results

The study revealed that prevalence of obsessive compulsive symptoms in clinical psychiatric population is 62.1% and in the general population is 38%. It was also found that OCS are highest in the neurotic, stress related and somatoform disorders (83.8%), followed by mood disorders (61.1%) and lastly in the schizophrenia, schizotypal and delusional disorders (47.6%). The most common obsession among neurotic, stress related and somatoform patients is miscellaneous obsessions(52.4%), while in both mood disorders and schizophrenia, schizotypal and delusional disorders groups of patients somatic obsessions are the most common (36.1% and 19.7% respectively).

Conclusion: Obsessive compulsive phenomenon was highly prevalent in normal and clinical psychiatric population; being higher in the psychiatric patients. Obsessive compulsive symptoms were most commonly associated with neurotic, stress related and somatoform disorders.

A Psycho-socio-demographic study of premenstrual dysphoric disorder (PMDD) in a sample of Egyptian women

Author Nashwa Zarif

Supervisors: Prof. Afaf Hamed, Prof. Maged Abou Seeda, Prof. Aida Seif El Dawla

Year 1999

Aim

To estimate the prevalence of premenstrual dysphoric disorder in a sample of Egyptian women

To explore the symptoms of PMDD

To search PMDD relevance to different personalities and socio-demographic factors

Methods

A sample of Egyptian females (single or married, in child bearing period) was chosen randomly with inclusion criteria of: (age from 15-45 year, regular menstrual cycles), exclusion criteria of :(presence of medical or gynecological disease, being under any drug therapy).The sample included doctors, nursing students and employees in Ain Shams University Hospitals. The authors used Eysenck Personality Questionnaire (EPQ) Taylor Manifest Anxiety Scale Beck Depression Inventory (BDI) Dealing with illness coping inventory Guilford Scale.

Results

The author found out that the prevalence of PMDD in the sample was 6.59% while premenstrual exacerbation was 3.65%. There was no significant difference between case and control as regards age, marital state, social class or history of psychiatric illness. Menorrhagia, dysmenorrhea, infertility and abortions were higher with PMDD

Conclusion

PMDD had a gross burden on the individual, family. Active cognitive coping and passive resignation were commonly used.

Psychosocial correlates of substance abuse: a study in an Egyptian sample.

Author: Khaled Abd El-Azim

Supervisors: Prof. Farouk Lotaief, Prof. Naglaa El Mahalawy, Prof. Aida Seif El Dawla, Prof. Tarek Assad.

Years: 2000

Aim

Studying various correlates of Egyptian substance abusers as a preliminary step of constructing preventive and therapeutic programs for substance abuse in Egypt

Method

The study was conducted in the Institute of Psychiatry Ain Shams University Hospitals. Studied substance abuse among 154 substance abusers (either admitted to addiction unit or attended the addiction outpatient clinic) all the abusers met the diagnostic criteria of DSM-III-R classification system of substance abuse

Results

Abusers had low levels of education & occupation also had un-stabilized marital history and troublesome familial relation. Family history, past history & personal history are important predictors for outcome of siblings regarding substance abuse. The study emphasized on the role of peers & the availability of substances as important correlates of substance abuse. 51.3% of substance abusers had axis-I comorbidity. While 56.5% of substance abusers had axis-II comorbidity.

Conclusion

Substance abuse is a complex heterogeneous multifactorial disorder, no single cause could be identified nor single patient could be similar to others. Hence tailoring a plan of management for each patient is a must.

Substance abuse disorders among female secondary school students in Cairo.

Author: Nivert Hashem

Supervisors: Prof. Adel Sadek, Prof. Naglaa El Mahalawy, Prof. Alaa Soliman and Prof. Amany Haroun.

Years: The study was initiated and completed during the educational year of 2000-2001.

Aim

To study substance use disorder among female secondary school students in Cairo

Method

The study was conducted among six schools in urban, semi-urban and rural areas in great Cairo for each area one governmental & one private schools were chosen to be studied, from each school, three classes representing the secondary educational levels were randomly selected studied substance abuse among 593 female students. The sample was assessed by: self-administrated questionnaire for the detection of substance use disorders

Results

The prevalence of substance use disorders among female 2ry school students was 18.4% [Alcohol (15.9%), illicit drugs (3.9%), Tobacco smoking (2.5%), and cannabinoids (0.7%)]. Different occasions & circumstances to use certain substances were identified. The study focused on the importance of peers in the process of substance abuse. It was also found that among tobacco smokers, illicit drugs and alcohol users, the percentages of the active users exceeded those of the passive users, while among cannabinoids users, all reported passive use.

Conclusion: Substance use disorders are a multidimensional problem. Although different substances are linked to each other yet each substance has its own correlates & it's important to know this correlates in order to prevent & manage this problem in a proper way.

Substance use disorders among male general secondary school students in Cairo

Author: Aliaa Adel

Supervisors: Prof. Adel Sadek, Prof. Mohamed Ghanem, Prof. Amanv Haroun El-Rasheed, Prof. Maged El-Setouhy

Year: 2005

Aim

To collect data on the abuse of alcohol, tobacco and other drugs among Cairo students born in 1986-1988.

Method

The sample was 638 male students distributed among six schools in urban, semi-urban and rural areas in Cairo. In each area, one governmental and, one private school were selected. For each school, three classes representing the secondary educational levels were randomly studied. Pilot study followed by study proper using MEDSPAD (Mediterranean School Project on Alcohol and other Drugs) survey design

Results

The prevalence cigarette smoking was 30.4%, alcohol 24.3%, hashish/bango 5.5%, inhalants 5.5% and other drugs (Sedatives and tranquilizers, hallucinogenic, ecstasy, amphetamines, heroin, cocaine and anabolic steroids) 11%. Those students who had never taken any illicit drug were 88.2%.

Conclusion

Substance Abuse among male adolescents represents great challenge which needs urgent attention & intervention.

Prevalence of obsessive compulsive disorder among female secondary school students in Cairo

Author Marwa Soltan.

Supervisors Prof. Zeinab Bishry, Prof. Gihan El-Nahas, Prof. Iman Abou El Ella.

Year: 2005

Aim

To study the point prevalence of obsessive compulsive disorder among the female adolescents in secondary schools in Cairo, delineating the commonest obsessive compulsive symptoms on them.

Methods

The study included 607 female secondary school students from six schools covering urban, semi-urban and rural areas in Cairo. The data were obtained using Leyton Obsessional Inventory- child version and MINI-KID

Results

The study revealed that prevalence of OCD was 1.2 %. The commonest OCS in the study sample was excess conscience. There is significant difference between urban, semi-urban and rural areas, as regards prevalence of OCD; being more in rural areas. Also, it is significantly higher in public than in private schools. Cases of OCD are 100% associated with other psychiatric disorders, especially anxiety and mood disorders.

Conclusion

On studying OCD in female secondary school students in Cairo they were found to be widely presented; as subthreshold obsessive compulsive syndrome was found in 13.01% of the studied sample, while OCD was less common found in 1.2%.

Prevalence of body dysmorphic disorder in an egyptian sample

Author: Noha Guemei

Supervisors : Prof. Ahmed Okasha, Prof. Mohamed Ghanem and Prof. Tarek Okasha

Year: 2005

Aim

To assess the prevalence of BDD in a sample of Egyptians.

To study the prevalence of co-morbidity with BDD and interpreting any differences in the context of the Egyptian culture.

Methods

The study was designed to be a cross sectional epidemiological study. The sample was selected by cluster random sampling design from university and college students in faculty of medicine and faculty of nursing-Ain Shams university, faculty of art (psychology department)-Cairo university and school of nursing El-Abassia mental hospital in the period. 503 students were chosen and subjected to General Health Questionnaire- Arabic form and Body Dysmorphic Disorder Examination Self Report.

Results

The study revealed that BDD rate was approximately 3.98%. In addition 3.18% were found to have sub-threshold BDD, 79.52% were simply dissatisfied with their appearance, and only 13.32% were found satisfied with their appearance. 70% of the sample were dissatisfied with one or more areas related to their head or face especially head, hair and nose. This was followed by thighs, buttocks, all lower body and abdomen, then calves, hips, breasts and whole body. 70% tried remedies to dissatisfying body part. Multiple relations were found between socio-demographic features and BDD. Deterioration in the academic level is higher in BDD and Sub-threshold BDD subjects than in simply dissatisfied and satisfied groups.

Conclusion

BDD is a quite common disorder as its rate was approximately 4%. All BDD patients had multiple areas of concern especially in the head and face area and most of them had tried remedies to fix the problem. BDD is also found to be associated with academic deterioration.

Social phobia in secondary school and university students: an Egyptian study

Author Moataz Magdy Ragheb.

Supervisors : Prof . Ahmed Okasha, Prof. Afaf Hamed, Prof. Mohsen Gadallah and Prof. Tarek Okasha

Year: 2005

Aim

To test the hypothesis that social phobia is prevalent among Egyptian adolescent but sufferers do not seek medical help.

To determine prevalence of social phobia in school / university student, delineate characteristic symptom profile, socio-demographic correlates and effect on quality of life.

Methods

Social phobia was assessed in 555 secondary school students who were selected from randomly chosen 2 schools districts in Cairo representing different socioeconomic states. From each district 3 schools were randomly selected; one for girls, one for boys, and one mixed school. Also, 106 and 97 students from faculty of medicine and commerce respectively were included in the study. The two faculties were randomly selected from Ain Shams University representing theoretical and applied sciences faculties.

Results

The study found that social phobia was quite prevalent in Egyptian adolescent population (19.8% and 11.3% in school and university students respectively) with higher prevalence in females. There was no significant difference between socio-demographic classes. Social phobia was associated with high degree of disability, impaired quality of life and may leave a negative effect on the students' ability to join the university after high school. There were unique differences in types and importance of various social fears between the Egyptian culture and other cultures.

Conclusion

Social phobia constitutes a major yet easily missed public health problem among Egyptian secondary school and university students. Significant difference in symptom profile was detected between males and females, and between school and university students.

Epidemiology and psychiatric morbidity in suicide attempters at the poison control center Ain Shams University Hospitals

Author: Rasha Essam El Din Bassim

Supervisors: Prof. Ahmed Okasha, Prof. Adel sadek , Prof. Assem Hassen Badawy, Prof. Tarek Assad and Prof. Tarek Okasha

Year: 2005

Aim

To find out the current prevalence of attempted suicide in a representative Egyptian sample.

To detect the psychiatric morbidity and the psychosocial factors associated with suicide attempt.

To determine the different methods of toxicological suicide attempt in Egyptian population

Methods

The study was carried on 508 suicide attempters presented to the poison control center Ain Shams University Hospitals. The sample was collected randomly on 3 chosen day. It includes both sexes and all age groups. The study proper was preceded by a pilot study to determine the sample size and the reliability of the questionnaire.

Results

It was found that 64.2% of the sample were females. The main causes of suicide were socio-familial cause, financial cause and lastly emotional cause. 27% of the sample were unemployed and 55.3% were single. *Bassim et al, 2005* reported that 30.5% of suicide attempter had mood disorder, 12.9% had depressive disorder, and 10.2% had adjustment disorder.

Regarding personality disorder, 17% of suicide attempter had a personality disorder the commonest was borderline personality disorder 14.7%. On the other hand, anxiety disorder account for 9.6% while 5.3% had psychotic disorder.

Conclusion

Suicide is a complex problem for which there is no single cause as it results from interaction of biological, genetic, psychological, social, cultural and environmental factors. Suicide is underestimated problem in Egypt which lack recent data about it`s prevalence and it demographic characteristics.

Prevalence of social anxiety disorder in late childhood and early adolescence among schools in Cairo

Author: Naglaa Adly Ibrahim

Supervisors: Prof. Alaa El Din Soliman, Prof. Iman Abou El Ella, Dr Marwa Abdel Meguid

Year : 2008

Aim of the study

The social phobia is prevalent among Egyptian children and adolescent population. Also to determine the characteristic symptoms profile and socio demographic

Methods

A representative sample was selected through multiple stage random sampling. The sample includes primary and preparatory students in Cairo, using DSM-IV-TR criteria for diagnosis of depression and social anxiety disorder.

Result

The prevalence of social phobia was 18.8%. Social anxiety symptoms were more common in girls than in boys. Also it was higher in rural area. There was positive correlation between social anxiety and depression.

Conclusion

Social phobia appears to be quiet prevalent in Egyptian children and adolescent. It is a chronic serious disabling disorder with marked reduction in the quality of life.

Prevalence of depression in a sample of Egyptian secondary schools female students

Author: Walaa Mohamed Sabry

Supervisors: Prof. Afaf Hamed, Prof. Tarek Asaad, Prof. Amani Haroun El Rasheed and Prof. Mohamed Fekry

Year: 2008

Aim of the study

To estimate the prevalence of depressive disorder in Egyptian secondary school female students

To estimate the sociodemographic correlates in the study population

Methods

The study was school based cross sectional randomized study. 602 female students participated in the study. The assessment tools include Structured Clinical Interview for DSM- IV-TR Axis I Disorder, Children Depression Inventory, Hamilton Rating Scale for Depression, General Health Questionnaire and Fahmy and El Sherbiny Social classification.

Result

The prevalence of depressive disorder was 13.3% of the sample distributed as 5% had sub threshold depressive symptoms 5% had major depressive disorder 3.3% had dysthymic disorder.

The majority of depressed students had deteriorated academic achievement, lack of outdoor activity and positive family history of psychiatric illness.

Conclusion

The high prevalence of depressive disorder in female students and many risk factors affecting adolescent depression.

مراجعة نظامية لبعض دراسات علم انتشار الاضطرابات النفسية في مصر

رسالة

توطئة للحصول على درجة الماجستير في الأمراض النفسية و العصبية

مقدمة من

الطبيبة / مديحة محمد لطفى
بكالوريوس الطب و الجراحة

تحت إشراف

أ.د. عفاف حامد خليل

أستاذ الامراض النفسية و العصبية
كلية الطب - جامعة عين شمس

أ.د. إيمان إبراهيم أبو العلا

أستاذ مساعد الامراض النفسية و العصبية
كلية الطب - جامعة عين شمس

د. مروى عبد المجيد حامد

مدرس الامراض النفسية و العصبية
كلية الطب - جامعة عين شمس

كلية الطب
جامعة عين شمس

2009

الملخص العربي

يعتبر علم الوبائيات (علم انتشار الامراض) من العلوم الاساسية فى مجال الطب والصحة العامة . كما انه يعتبر من اهم الفروع العلمية التى تساعد على فهم واستيعاب العلوم الطبية ويعتبر عامل مساعد فى إحراز التقدم والتطور فى مجال الصحة العامة . وهو أداة هامة للأطباء حيث يقوم بالربط بين عملهم وبين المرضى من ناحية استكمال الصورة الطبية اللازمة لهم ، كما أنه يعطى نظرة شاملة عن الصحة العامة فى المجتمع.

و من السمات الاساسية لدراسات علم الوبائيات انه يهتم بالكم لا الكيف اى انه كمى وليس وصفى ويميل إلى الملاحظة العلمية للظواهر وذلك باعتباره يعمل على تحديد مدى انتشار المرض بين الناس فى المجتمعات المختلفة .

يقدم لنا علم انتشار الامراض افضل الاستراتيجيات فى البحث العلمى وذلك لنتمكن من الاجابة على كل الاسئلة الدقيقة المتعلقة بالمرض النفسى (طبيعته و تشخيصه).

لقد ساهم بالفعل علم انتشار الامراض فى مجال البحث العلمى خاصة الامرض النفسية وقام الباحثون باستخدام اساليبه ونظرياته لدراسة نسب انتشار الاضطرابات النفسية فى مختلف المجتمعات فى العالم. وقد تزايد فى الآونة الاخيرة الاهتمام بهذا الفرع من العلوم لاختبار وتحديد اسباب الاضطرابات النفسية متضمناً ذلك الاسباب الجينية والبيولوجية. ؛ فقد قامت الكثير من الدراسات المصرية بمناقشة هذا الموضوع. و يجب علينا إعادة قراءة هذه الأبحاث لإلقاء الضوء على ما تم تقديمه والاستفادة منه لكى نسعى إلى المزيد من البحث العلمى الذى يغطى جميع جوانب هذا الموضوع. و قد ناقشت هذه الدراسات معدل انتشار الاضطرابات النفسية ومدى تأثرها بعامل الجنس و العمر كما تناولت ايضا العوامل الاجتماعية و الاقتصادية التى تحدد معدل هذا الانتشار بالإضافة الى عوامل الخطورة الأخرى المسببة للمرض.

رؤية البحث:

بما أن هناك الكثير من الدراسات المصرية السابقة التى تدرس وتناقش علم الوبائيات فى الامراض النفسية فيتحتّم علينا محاولة الانتفاع والاستفادة من هذه الدراسات ومن الجهود المبذولة فيها ، لوضع نظام مراجعه نظامية واضح ومفهوم لتلك الدراسات والتخطيط لاجراء دراسات بحثية مستقبلية اخرى من أجل الحصول على مراجعة نظامية بحثية متكاملة ومتطورة .

يستند الاتجاه الجديد فى الطب على البحث العلمى القائم على دلائل وحقائق مما يؤدى الى تزايد الحاجة لأقامة أسس جديدة للنقد الطبى للأبحاث التى أجريت سابقاً وذلك لضمان جودتها وصلاحياتها للنشر ولتنفيذ تطبيقاتها فى مجال الممارسة الطبية .

سيقوم هذا البحث بمراجعة نظامية لتلك الدراسات مع الوضع فى الاعتبار جمع البيانات الخاصة بها وعمل نقد طبى واضح وشامل من أجل التعرف والوقوف على أوجه القصور والنقص الموجودة فى الابحاث المصرية فى مجال علم انتشار الامراض النفسية حتى نتمكن من اجتياز العقبات والمشاكل فى المستقبل والوصول الى أفضل النتائج الممكنة فى هذا المجال.

أهداف العمل :

- 1- القيام بعمل مراجعه نظامية للدراسات المصرية السابقة المتاحة لنا فى مجال الاضطرابات النفسية .
- 2- وضع توصيات جديدة لدراسات المستقبلية .

الأجراءات :

من أجل تحقيق أهداف هذه الدراسة علينا وضع نظام مراجعى نظامى شامل لما سبق من دراسات فى مجال الاضطرابات النفسية ، وسيكون علينا استخراج قاعدة البيانات الاتيه من :

- 1- مكتبة كلية الطب –جامعة عين شمس
 - 2- مكتبة كلية الطب –جامعة الازهر
 - 3- مكتبة كلية الطب –جامعة القاهرة (القصر العينى)
 - 4- بعض مجلات الطب النفسى المصرية
- و قد تم الاطلاع على قواعد المعلوماتمن الفترة ديسمبر2008 وحتى فبراير 2009 هذه تم عمل قائمة من 59 بحث مصري فى معدل انتشارالاضطرابات النفسى و لقد تم عمل مراجعة نظامية لنتائج هذه الابحاث و مقارنتها فيما بينها.

و قد نقدت الدراسات التى تم الحصول عليها نقدًا موضوعيًا مع مناقشة نتائجها فى هذا البحث. و كانت أهم الملاحظات التى وجدت أثناء النقد تتلخص فى أن معظم الدراسات كانت معتمدة على أبحاث أجنبية لتبرير إجراء الدراسة ،و أن نتائج الأبحاث فى كثير من الدراسات تم تعميمها على نطاق واسع رغم أن طريقة اختيار العينة و حجمها لم يبررا هذا التعميم , كما أن القليل من الرسائل و الأبحاث المنشورة هو الذى تضمن

فرضية بحثية واضحة. كان توضيح مناهج البحث المستخدمة فى الدراسات المصرية التى تمت مراجعتها قليلا ما يذكر و قد لوحظ أن معظم هذه الدراسات كانت دراسات وصفية ؛ إما انتشارية أو تعتمد على المقارنة بين عينة البحث و عينة ضابطة؛ فى حين كانت الدراسات التجريبية أو التنبؤية والتى تتابع المرضى لفترات من الوقت قليلة. كما أن معظم العينات التى تم اختيارها لم تشمل قطاعات كبيرة من المجتمع المصرى.

ولذلك فقد تبين لنا أننا فى حاجة الى المزيد والمزيد من الدراسات و الأبحاث الإضافية فى هذا المجال و بخاصة أنه هناك الكثير من أوجه القصور فى الأبحاث الموجودة حاليا كما أنه من الضرورى التعاون بين العديد من المؤسسات العلمية من أجل أخراج هذه الأبحاث والدراسات فى صورة أفضل.

ولأننا نهدف إلى التكامل البحثي فقد لفت انتباهنا أنه بالرغم من احتواء الأبحاث المصرية على توصيات مستقبلية فإننا نأمل وجود إستراتيجية واضحة المعالم للتخطيط لأبحاث مستقبلية هدفها التواصل البحثي وعدم الأكتفاء بالأبحاث الحالية حتى نصل في النهاية الى صورة متكاملة عن الاضطرابات النفسية عمومًا في مصر. كما يجب توجيه الأنظار إلي أهمية اكتساب كل باحث مهارة المراجعة النقدية للأبحاث وهذا يتحقق من خلال مشاركته في أبحاث كثيرة للتدرب على الأساس العملية للبحث العلمي.