

Psychiatric morbidity in the families of mentally- ill patients

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Aim of the work: to detect psychiatric morbidity among relatives who live with the patient, to detect different types of burden that occurs in the families of chronic mentally ill patients and to identify the factors leading to morbidity.

Study design: not mentioned but we can consider it as cross sectional, case control study.

Method: the study consists of 80 patients (40 patients with neurotic disorder and 40 with chronic psychotic disorder) arranged in 4 groups; 1st group consists of 20 patients with O.C.D. and their families, 2nd group consists of 20 patients with chronic anxiety disorder and their families, 3rd group consists of 20 patients with chronic schizophrenia and their families 4th group consists of 20 patients with chronic affective disorder and their families, And 20 patients with chronic D.M. as controls. They are subjected to the following scales: a-full psychiatric history and clinical examination (for the patients only). b-Structured Clinical Interview (for patients and relatives). c-General Health Questionnaire. d-Family burden interview schedule. d-the spouse of the affected patients are subjected to Beck inventory and Taylor scale for anxiety.

Results: the study reveals that spouses of the manic patients are the most liable group to develop anxiety disorders. Husbands of manic wives have highest rate of anxiety disorder among all the studied groups.

Anxiety symptoms tend to be higher among the relatives of the neurotic groups than the psychotic groups. Relatives of psychotic patients are more likely to be severely depressed, while relatives of patients of the other groups are more likely to have mild to moderate depression. Wives of neurotic patients; OCD and GAD are more likely to have severe anxiety than the relatives of the other groups. 30% of relatives of male patients and 20% of relatives of female diabetic control are found to have anxiety symptoms. All those with anxiety symptoms are relatives of diabetic patients with unsteady blood sugar levels, frequent complications and admission to hospitals. Relatives of female manic patients are the most socially restricted group, followed by relatives of male manic patients. The control group shows no impaired social function that is attributed to the patient illness. There's significant difference between all groups of mental disorder and the control group as regards the scores on the social readjustment rating scale (SRRS), the controls scored significantly less. Anxiety symptoms and even GAD are the most frequent diagnosis among the relatives of patients with currently manic episode; however the frequency of depressive symptoms cannot be ignored, especially among the children and the wives of the male patients.

Conclusion: Relatives of mentally ill patients are at increased risk for various psychiatric morbidity as well as many psychosocial stressors and burdens.