

ORIGINAL ARTICLE

Depression in the Primary Caregivers of Patients with Substance use Disorder

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ABSTRACT

Background: Caregiving to substance-use disorder patients had a significant impact on mental and physical health which needs some modalities to be developed to support the caregiver's self-care.**Objectives:** To determine the frequency of depression among caregivers of patients with Substance use disorder**Setting:** Department of psychiatry, Ganga Ram Hospital, Lahore**Material and Methods:** Total 100 caregivers of either gender of age 20 to 50 years old, of patients with substance use disorder. All those with significant physical, surgical, or psychiatric illness and/or mental retardation, dependence of more than one drug simultaneously, intravenous drug users, history of any past psychiatric illness in caregivers, care givers with medical problems (Diabetes, Hypertension, Asthma and COPD) that may mask depressive symptoms were excluded. For Substance use disorder DSM5 criterion was applied to the patient.**Conclusion:** We concluded that frequency of depression is higher among caregivers of patients with Substance use disorder which needs early intervention to reduce their mental health.

INTRODUCTION

Substance abuse has been on the rise all across the world, including in Pakistan, and substance use disorders are one of the most important public health issues. It is widely acknowledged as a complicated bio psychosocial phenomenon and is referred to as a "family disease." In 2013, it is estimated that 246 million people, or one out of every twenty persons between the ages of 15 and 64, consumed an illicit substance.¹

According to a poll, alcohol was the most commonly used substance in South Asia (21.4 percent), followed by cannabis (3.0 percent) and opioid (0.7 percent). Seventeen to twenty-six percent of alcohol users met the International Classification of Diseases (ICDs) 10 criteria for dependency. As the number of patients increases, so do the issues faced by caregivers of various groups of patients. This causes issues, challenges, or negative events in the lives of the patient and his or her family members. According to studies, caregivers of substance-abusing individuals face a tremendous hardship.² Substance Use Disorder (SUD) is a high-risk condition for parent-child interactions and sibling development.³ The majority of users are male, single, and have a low educational level. In terms of the presence of depressive symptoms, users were found to be more depressed than carers.⁴

Primary caregivers of patients with mental diseases have a high risk of mental issues, family strain, and poor quality of life. Caregivers of alcoholic and heroin-addicted patients bear a moderate-to-heavy burden of caregiving.⁵ According to studies, the majority of patients suffering from substance abuse and addiction are from low-income families who live in rural areas. Caregivers for alcoholic patients range in age from 25 to 40 years old, with the majority being females and unemployed.⁶ The severity of substance dependence has a strong association with family burdens like leading to depression in the caregivers as well.⁷

The basis for this study is that there have only been a few local studies on the strain on caregivers, specifically on wives and mothers of drug abusers and substance abusers / dependents. The study's goal is to find out how many caregivers of patients with substance use disorders suffer from depression. The goal is to give importance to the attendants of these patients while taking care of the patients. Early interventions, such as routine examinations of caregivers' depression level and available social support, can aid in the prevention or reduction of depression

among these caregivers. Knowing the actual burden of depression among caregivers will highlight the problem and aid in its management.

METHODOLOGY

This study was planned at Ganga Ram Hospital Lahore and included 100 caregivers of either gender of age 20 to 50 years old, of patients with substance use disorder as per operational definition included in the study. To keep number of substance used balanced, equal numbers of patients of each substance were included. We excluded all those with significant physical, surgical, or psychiatric illness and/or mental retardation, dependence of more than one drug simultaneously, intravenous drug users, history of any past psychiatric illness in caregivers, care givers with medical problems (Diabetes, Hypertension, Asthma and COPD) that may mask depressive symptoms.

After the approval from the Ethical Review Committee, cases of substance-use disorder / substance dependency, meeting the inclusion criteria were enrolled in the study after informed consent. For Substance use disorder DSM5 criterion was applied to the patient.

All data regarding the socio demographics of, the cases of substance dependency and the caregivers / attendants of these cases were documented. Details of substance (alcohol/heroin/cannabis/cocaine) and patients' clinical profile were also recorded. Informed written consent was sought from caregivers. The researcher would conduct interview with respondents and DSM-5 criteria for depressive disorders were applied for caregivers. All the information was recorded on a performa. Socioeconomic status was categorized as poor (monthly family income <50,000), middle (monthly family income <300,000) and upper class (monthly family income>300,000). Educational status can be primary if completed 5th standard, secondary if completed till 10th standard and higher if education is above 10th standard.

We analyzed the data by using SPSS-20. Categorical data was analyzed to determine the percentages and mean with standard deviation was calculated for the continuous data. Data of the number of caregivers with history of depression was stratified for age, gender and socio-economic status and post stratification data analysis was done using chi square test to determine the

significance in the difference in data stratified, with p value of less than 0.05 taken to be significant.

RESULTS

The results revealing demographic information of the participants is explained in Table 1. In our study, depression was recorded in 69%(n=69) whereas 51%(n=51) had no findings of this morbidity. (Fig. 1) In Table 2, frequency of depression according to different variables is calculated as 57.5% and presented in Fig. 1. In Table 2 various variables are correlated with depression in caregivers.

Table 1: Demographic Details of the attendants of the patients (n=120)

Variable		No. of patients	%
Age	20-40	79	65.83333
	41-55	41	34.17
Gender	Male	51	42.5
	Female	69	57.5
Marital status	Married	84	70
	Single	36	30
Educational status	Primary	64	53.3
	Secondary	31	25.8
	Higher	25	20.8
Type of substance abused	Alcohol	48	40
	Cannabis	33	27.5
	Heroin	39	32.5
Socioeconomic Status	Poor	66	55
	Middle	39	32.5
	Upper class	15	12.5

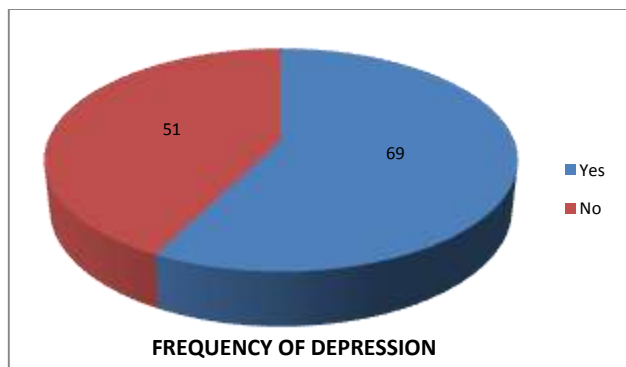


Fig 1:

Table 2: Frequency Of Depression According To Different Variables

Variable		Yes	No	P value
Age	20-40	39(32.5%)	40(33.33%)	0.007
	41-55	30(25%)	10(8.33%)	
Gender	Male	21(17.5%)	30(25%)	0.001
	Female	48(40%)	21(17.5%)	
Marital status	Married	41(34.17%)	43(35.83%)	0.003
	Single	28(23.33%)	8(6.67%)	
Educational status	Primary	36(30%)	28(23.33%)	0.88
	Secondary	19(15.83%)	12(10%)	
	Higher	14(11.67%)	11(9.17%)	
Type of substance use	Alcohol	27(22.5%)	21(17.5%)	0.41
	Cannabis	22(18.33%)	11(9.17%)	
	Heroin	20(16.67%)	19(15.83%)	
SES	Poor	38(31.67%)	28(23.33%)	0.93
	Middle	23(19.67%)	16(13.33%)	
	Upper class	8(6.67%)	7(5.83%)	

DISCUSSION

We believe that our country is a varied country with the world's largest population and a significant caseload of substance users. Alcohol consumption is increasing in younger age groups, 14-15 indicating a growing concern with substance abuse. As a result, understanding the various aspects of the link between substance use disorder and the family in the Pakistani context is of interest.

In this cross-sectional survey of primary caregivers of patients with mental illness in Sir Ganga Ram Hospital, Lahore 69% of the cases had depression and it is close to a local study i.e. 65%.⁹ Another study conducted at Mumbai India reveals 80% of the primary caregivers of patients with substance abuse had depression and 34 of them had severe type depression.¹⁰ These findings endorse our results.

A recent Egyptian study investigated population with clinical substance abuse and revealed its strong association with depression and anxiety disorders, depression. Their stats 97% of varied type of depression.¹¹ Geoffrey Maina and colleagues¹² shared the experience of substance use disorder caregiving showing 77.27% of the participants as females, they revealed that giving care to individual addicted with a substance use may increase the cause of anger, worry, shame, anxiety, behavioral problems and depression within family unit. It was concluded that caregiving to substance use disorder had a significant impact on mental and physical health which needs some modalities to be developed to support the caregiver's self-care.

Another trial¹³ qualitative trial explains difficulties of experienced, needs and coping of caregivers. They reveal that family attendants and substance users may negatively affect with social, psychological and economic aspects and due to this social stigma, the caregivers have limited social support around their environment. It may lead to intra-family conflicts and this reason may create hindrance in caregiving. The caregivers explained financial support as first need while dealing with substance use disorder individuals as they experience to sell their property in addition to take loans/borrowing money to cater their financial needs.

Sun X et al revealed in a study that 7.4 percent of caregivers had little or no load, 40.2 percent, 39.5 percent, and 12.9 percent had a mild, moderate, and severe burden, respectively. The carers' mean depression score was 10.0 +5.3, and 137 (53.5 percent) of caregivers were depressed.⁸

In a local study, caregivers of drug use disorder patients were shown to have a prevalence of sadness and anxiety of 65 percent and 46.2 percent, respectively. 'Depression and anxiety' were reported to be prevalent among 'caregivers' with substance use disorder. In order to improve the whole rehabilitation process, the methods should also be followed for the well-being of carers.⁹

Domestic violence is also observed in substance user, particularly alcohol users. The stats of domestic violence vary over time, and may involve sexual, physical, and emotional abuse. It may include physical violence to the spouse, snatching the jewelry/money for substance use continuation etc may affect mental health of the caregivers.

Though a lot of studies are done evaluation caregivers of individuals with Alzheimer's disease concluded higher frequency of depression among caregivers,¹⁶ however, there is a paucity in researcher among caregivers of substance user. We recommend that some other multicenter trials may be conducted to validate our results.

CONCLUSION

We concluded that frequency of depression is higher among caregivers of patients with Substance use disorder which needs early intervention to reduce their mental health.

Limitations of the Study: As it is a single hospital study and small number of cases was studied in a small duration of time, the results of this study might be of limited. Study should be done in other hospitals and cities, and caregivers / attendants of these patients should also be treated and care should be taken.

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