



## RESEARCH ARTICLE



# Study of prevalence of psychiatric manifestations in pulmonary tuberculosis patients

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### Abstract

**Introduction-** tuberculosis is thought to be an incurable disease, and a lot of stigma is associated with it. A mere diagnosis of tuberculosis can be a psychological trauma for a person, giving rise to varied psychiatric symptoms. A high incidence of depression and anxiety has been found in pulmonary tuberculosis patients. **Aims and objectives-** to study the prevalence of psychiatric components associated with patients of pulmonary tuberculosis. **material and methods-** It was an observational cross sectional study. Total 100 patients of pulmonary tuberculosis who are on ATT were selected and patients who had prior or concomitant psychiatric manifestation and taking treatment for their psychiatric illness were excluded from study. **psychiatric assessments** was done by using quettaionaire pattern by using zung depression scale, mini mental state examinations and neuropsychiatry inventory. **Results and discussion-** The high incidence of depression and anxiety found in patients of pulmonary tuberculosis could be due to the various psychosocial stresses faced by the patient like social stigma attached to the illness, set back in occupation, social isolation with damaged status. **Keywords:** pulmonary tuberculosis, depression, anxiety, zung depression scale, mini mental state examination.

## 1 | INTRODUCTION

The diagnosis of pulmonary tuberculosis has been a cause of lot of fear and anxiety since thousands of years, because of the lack of any effective treatment and the high morbidity and mortality associated with it. Subsequently, the advent of chemotherapy markedly reduced the morbidity and mortality. Unfortunately, in spite of the advances in treatment, the misconceptions about tuberculosis still persist. Even now tuberculosis is thought to be an

incurable disease, and a lot of stigma is associated

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with it. A mere diagnosis of tuberculosis can be a psychological trauma for a person, giving rise to varied psychiatric symptoms.

The purpose of this study is to investigate factors associated with medication nonadherence among patients suffering from tuberculosis with emphasis on psychopathology as a major barrier to treatment adherence (1, 2). On the other hand, studies report high prevalence rates of psychiatric comorbidity among patients with drug-resistant tuberculosis (3) and that prevalence of depression significantly correlates with severity and duration of the disease (4, 5). A high incidence of depression and anxiety has been found in pulmonary tuberculosis patients. (6–9) de Araújo et al. (10) found a positive and independent association between common mental disorders and tuberculosis.

## 2 | MATERIAL AND METHODS

The study was conducted in department of medicine Bundelkhand medical college sagar in the Duration of 6 months July 2017-dec 2017. it was an observational cross sectional study. Total 100 patients of pulmonary tuberculosis who are on ATT were selected and patients who had prior or concomitant psychiatric manifestation and taking treatment for their psychiatric illness were excluded from study. psychiatric assessments was done by using quettaionaire pattern by using zung depression scale, mini mental state examinations and neuropsychiatry inventory.

## 3 | RESULT

In Table 1 According to Duration of illness in pulmonary tuberculosis patients, In Table 2 **Frequency of depression in pulmonary tuberculosis patients** and in table Table 3 **Frequency of anxiety in pulmonary tuberculosis patients**.

## 4 | DISCUSSION

our study shows 90 pt(90%) of tuberculosis had some kind of psychiatric illness rest 10% patients had not

**TABLE 2: Frequency of depression in pulmonary tuberculosis patients**

S.no.	Depression	Pulmonary tb pt.
1.	Mild	21(6.72%)
2.	Moderate	8(2.56%)
3.	Severe	3(.96%)

**TABLE 3: Frequency of anxiety in pulmonary tuberculosis patients**

S.no.	Anxiety	Pulmonary tb pt
1	Mild	30(11.7%)
2.	Moderate	5(1.95%)
3.	Severe	4(1.56%)

any symptoms related to psychiatric component. out of 90% pt depression (32%) and anxiety 39% were most common. 9.9% pt had symptoms of irritability, 1% had altered night time behaviour, 3% had altered appetite, 4% had agitation and 0% had suicidal tendency.

The psychological aspects of tuberculosis have always been a topic of interest over the centuries. Our study shows that depression and anxiety disorders were the commonest illness found in patients of pulmonary tuberculosis. These findings are comparable with some of earlier works (6–9). In our study, a greater incidence of depression and anxiety was seen in these with longer duration of illness. A similar observation has been reported by Srivastava et al. (9) and Natani et al. (10) This positive correlation might be due to the longer period of suffering, and stigma of social isolation, The high incidence of depression and anxiety found in patients of pulmonary tuberculosis could be due to the various psychosocial stresses faced by the patient like social stigma attached to the illness, set back in occupation, social isolation with damaged status.

## 5 | CONCLUSION

A lot of fear and misconception is still prevalent about pulmonary tuberculosis, leading to a high incidence of psychiatric morbidity. It has been seen that psychiatric illness can lead to poor drug compliance, resulting in drug resistance and increased morbidity and mortality due to pulmonary tuberculosis.

# STUDY OF PREVALENCE OF PSYCHIATRIC MANIFESTATIONS IN PULMONARY TUBERCULOSIS PATIENTS

**TABLE 1: According to Duration of illness in pulmonary tuberculosis patients**

Duration of illness	Total patients	No of patients with depression	No of patients with anxiety	No of patients with irritability	No of pt with night behaviour	No of pt with altered appetite behaviour	No of patients with agitation	No of pt with suicidal tendency
15 days-3month	10	5	3	1	0(0.%)	1	0(0%)	0
3 month-7month	30	16	8	3	0	1	2	0
>7 month	60	21(35%)	28(10.2%)	7(4.2%)	1	1	2	0
Total	100	32(28.8%)	39(35.1%)	11(9.9%)	1(.9%)	3(2.7%)	4(3.6%)	0

The study was a cross-sectional one and has limitation to the interpretation of its finding. A longitudinal perspective would have reflected more on the causal relation or the strength of association.

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Conflict of interest:

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