

QUALITY OF LIFE AMONG PATIENTS WITH
SCHIZOPHRENIA ATTENDING PSYCHIATRIC CLINIC OF
HOSPITAL UNIVERSITI SAINS MALAYSIA

By

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Dissertation Submitted in
Partial Fulfillment of the Requirement for
The Degree of Master of Medicine
(PSYCHIATRY)



UNIVERSITI SAINS MALAYSIA

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MAY 2010

ACKNOWLEDGEMENTS

Bismillahirrahmanirrahim

First and foremost, praise to Allah, the most compassionate and most merciful, whose blessing have helped me through the entire process of completion of this dissertation. I would like to express my deepest gratitude and thanks to the following individuals who have helped me during the preparation of this dissertation and during the course to pursue the Master of Medicine (Psychiatry) in School of Medical Science, Universiti Sains Malaysia, Kelantan.

- ❖ Professor Dr Mohd Razali Salleh, Supervisor and Lecturer of Psychiatry, Department of Psychiatry, HUSM
- ❖ Dr Tengku Alina Tengku Ismail, Lecturer of Community Medicine Department, HUSM
- ❖ Associate Professor Dr. Mohd Jamil Yaacob, Head Department and Lecturer of Psychiatry, Department of Psychiatry, HUSM
- ❖ Dr Shanooha Mansoor and all the lecturers in the Department of Psychiatry who have given guidance, knowledge and support for the dissertation and the course
- ❖ All the staffs in psychiatry clinic HUSM and the participants who were willing to give their cooperation in this study.

Last but not least, I would like to express my warmest gratefulness to my dearest husband; Kolonel Dr. Mohd Shah Mat Esa, my dearest parents; Hj Abd Wahid Jusoh and Hj Asiah Awang and my beloved children; Nur Izzah Munira, Arif Danial Esa, Nur Amalin Sofea and Altaf Hafiy Esa, for their love, patience, understanding, prayer and encouragement throughout my postgraduate years.

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LIST OF ABBREVIATIONS

CDSS	Calgary Depression Scale for Schizophrenia
DSM	Diagnostic and statistical manual
EPS	Extra pyramidal symptoms
et al	And the rest
FGAs	First generation antipsychotics
HRPZ II	Hospital Raja Perempuan Zainab II
HUSM	Hospital Universiti Sains Malaysia
NMHR	National Mental Health Registry
PANSS	Positive and Negative Symptom Severity of Schizophrenia
QoLI-Brief	Brief version of Lehman's Quality of Life Interview
QOL	Quality of life
SGAs	Second generation antipsychotics
SPSS	Statistical Package for Social Sciences
USM	Universiti Sains Malaysia

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ABSTRAK

KUALITI KEHIDUPAN PESAKIT SKIZOFRENIA DI KLINIK PSIKIATRI HOSPITAL UNIVERSITI SAINS MALAYSIA

PENGENALAN

Penilaian kualiti kehidupan telah di kenalpasti sangat membantu di dalam memahami kesan penyakit dan penjagaan kesihatan keatas kehidupan seseorang terutama di dalam penjagaan pesakit mental kronik. Ia seterusnya dapat membantu dalam menjelaskan sebarang bentuk intervensi yang perlu di ambil dalam usaha meningkatkan kualiti kehidupan mereka. Kualiti kehidupan adalah dinilai dari pelbagai sudut dan ianya berkait rapat dengan banyak faktor.

OBJEKTIF

Tujuan kajian ini dijalankan adalah untuk menentukan kualiti kehidupan secara subjektif dan faktor-faktor yang mempengaruhinya seperti faktor sosio demografi, klinikal dan tahap kefungsiian di kalangan pesakit skizofrenia di dalam komuniti.

KAEDAH KAJIAN

Satu kajian hirisan lintang dilaksanakan keatas 206 orang pesakit skizofrenia yang tinggal di dalam komuniti di klinik pesakit luar psikiatri, Hospital Universiti Sains Malaysia dari 1 Mei hingga 31 Oktober 2008. Kaedah persampelan sistematik telah digunakan di dalam kajian ini. Subjek yang telah memberi kebenaran untuk melibatkan diri di dalam kajian ini telah ditemuramah menggunakan borang kajiselidik sosio demografi dan ciri ciri klinikal. Kualiti

kehidupan secara subjektif dan tanda-tanda kemurungan dikaji menggunakan skor QoLI-Brief dan CDSS. Tanda-tanda psikopatologi di kaji menggunakan skor PANSS dan tahap kefungsiian menggunakan skor PSP. Analisis diskriptif, penurunan logistik ringkas dan berganda telah digunakan didalam analisis statistik.

HASIL KAJIAN

Kebanyakan pesakit adalah dari golongan Melayu (96.1%), tidak berkahwin (67.5%), tidak bekerja (62.6%), pelajaran sehingga tahap sekolah menengah (72.8%) dan pendapatan bulanan keluarga kurang dari RM 500 sebulan (48.5%). Purata umur semasa pertama kali mendapat rawatan ialah 24.6 (SD 8.9) tahun. Median jangkamasa mendapat penyakit dan menerima rawatan ialah 10 tahun (IQR 10) kedua-duanya. Sebahagian besar mendapat rawatan monoterapi dengan ubat antipsikotik atipikal (57.3%) dan mempunyai simptom psikiatri pada tahap rendah. Sebahagian kecil sahaja mengalami kemurungan (26.7%). Ramai mempunyai kesulitan yang sedikit (45.6%) ke sederhana (53.9%) di dalam kefungsiian mereka. Berkenaan kualiti kehidupan secara subjektif, kebanyakan subjek berpuas hati dalam setiap bahagian kualiti kehidupan walaupun perhatian harus diberikan dalam bahagian hubungan sosial dimana hampir separuh subjek mengenal pastinya sebagai kurang memuaskan. Faktor-faktor yang signifikan dengan kualiti kehidupan secara subjektif adalah simptom psikopatologi umum (OR=1.20, 95% CI=1.05,1.37) dan simptom kemurungan (OR=2.36, 95% CI=1.09, 5.07). Faktor-faktor lain seperti sosio demografi, klinikal dan tahap kefungsiian tidak menunjukkan apa apa kaitan dengan kualiti kehidupan secara subjektif.

KESIMPULAN

Kualiti kehidupan secara subjektif di kalangan pesakit skizofrenia di dalam komuniti di Hospital Universiti Sains Malaysia adalah memuaskan. Ia berkait rapat dengan simptom psikopatologi umum dan simptom kemurungan.

ABSTRACT

QUALITY OF LIFE AMONG PATIENTS WITH SCHIZOPHRENIA ATTENDING PSYCHIATRIC CLINIC OF HOSPITAL UNIVERSITI SAINS MALAYSIA

INTRODUCTION

Quality of life assessments assist greatly in understanding the impact of illness and healthcare on patients' general well being, especially in the care of chronic mental patients. This inturn helps to identify the specific interventions needed to improve their quality of life. Quality of life is assessed in broad range of different domains and is known to be associated with various factors.

OBJECTIVES

The aim of this study is to determine the subjective quality of life and its association with socio demographic and clinical factors, and level of function among patients living with schizophrenia in community.

METHOD

A cross sectional study was conducted on 206 stable patients with schizophrenia living in community under psychiatric outpatient clinic, HUSM from 1st May to 31st October 2008. Systematic random sampling was applied and consented respondents were interviewed using

Socio demographic and Clinical Characteristics Questionnaire. Brief version of Lehman's Quality of Life Interview - validated Malay Version was used to assess subjective quality of life, Calgary Depression Scale for Schizophrenia for depressive symptoms, Personal and Social Performance Scale for level of function and Positive and Negative Symptom Severity of Schizophrenia scale for psychiatric symptoms. Descriptive analysis, simple and multiple logistic regression were appropriately used for statistical analysis.

RESULT

Majority of the study participants were Malay (96.1%), single (67.5%), unemployed (62.6%), educated until secondary level (72.8%) with a family income of less than RM 500 per month (48.5%). The mean age at first treatment is 24.6 (SD 8.9) years old. The median of both overall duration of illness and receiving treatment were 10 years (IQR 10). Majority were on monotherapy with atypical antipsychotics (57.3%), had mild psychiatric symptoms while a small number had depression (26.7%). Many had mild (45.6%) to moderate (53.9%) difficulties in functioning. Regarding the subjective quality of life, most participants were satisfied in every domain of quality of life even though concern was raised in social relations domain where nearly half perceived it as low. The significant associated factors for subjective quality of life were general psychopathology (OR=1.20, 95% CI=1.05,1.37) and depressive symptoms (OR=2.36, 95% CI=1.09, 5.07). Other socio demographic and clinical factors, and level of function were not significantly associated with subjective quality of life.

CONCLUSION

The subjective quality of life among patients with schizophrenia living in community under follow-up at Hospital Universiti Sains Malaysia was perceived as satisfactory. The quality of life is strongly associated with the general psychopathology and severity of depressive symptoms.