

Consultation-liaison psychiatry in a medical college hospital

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Abstract

This study was done to evaluate the trend of liaison of different clinical department with Psychiatry considering their referral rate to the Psychiatry Unit of Khulna Medical College Hospital. The study was done over a twelve month period (Jan 2012 to December 2012). All the patients (672) referred by different departments were included. Among the patients, 72.9% was referred by Medicine & 8.9% by Pediatrics department. Major depressive disorder, Anxiety disorders and Schizophrenia was found in 19.6%, 18.7% and 14.2% respectively. Status of Consultation-Liaison Psychiatry needs to be improved by concerned physicians to deliver a better service to the patients in this hospital.

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Introduction

Consultation Psychiatry may be defined as " an area of clinical Psychiatry which includes diagnostic, therapeutic, teaching and research activities of Psychiatrists in the Non-psychiatric parts of the general hospital.¹ It is now established that 1/3rd to 2/3rd of the patients of different medical, surgical and gynecological units have significant psychiatric symptoms which is amenable to treatment by Psychiatrists.^{2,3} Also the fact that psychiatric patients may present to the medical or surgical units due to antecedent physical illness and may need additional care by Psychiatrists. The clinical problems containing a medical-psychiatric interface not only offer clinical challenges but also are areas for new knowledge and better intervention.⁴ The first so called Consultation-Liaison Psychiatric service was opened in 1902 at Albany Hospital, New York, USA.⁵ But it did not emerge as a prominent psychiatric subspecialty until the remedicalization of the psychiatric profession in the 1970s.⁶ Consultation- liaison Psychiatry is an essential part of medical student training in Europe and America.⁷ But the picture in Bangladesh is not same. The Psychiatrists of Bangladesh are now under pressure to improve the relationship between Psychiatry and Non-psychiatric departments of general hospitals. They have to prove themselves as an integral part of medicine and distinct from non-medical psychologists and social workers. In the medical wards of the hospitals, Psychiatrists must play many roles: skillful and brief interviewer, good Psychiatrist and Psychotherapist, knowledgeable

teacher and efficient physician who understands the medical aspects of the case.

Methods and materials

This study was conducted over a 12 month period (from January 2012 to December 2012) in Psychiatry OPD and different wards in Khulna Medical College Hospital. All the patients, referred by different units of this medical College hospital irrespective of sex, education and economic status were included as study population. Patients who voluntarily agreed were interviewed. The total number of our study population was 672. A semi-structured questionnaire was completed for all patients. Socio-demographic criteria and related informations were obtained. Subsequently all the patients were diagnosed by using DSM-IV-TR by qualified psychiatrists. The data was processed and analyzed and findings were compared with other similar studies carried out in home and abroad.

Results

Table-I Shows the frequency distribution of department of referral. The department of medicine referred 72.9% of total cases. Pediatrics, Skin, ENT, Gynae & Obstetrics, Orthopedics and Surgery department referred 8.9, 7.8, 6.1, 1.6, 1.3, 1.1 percent respectively.

Regarding frequency distribution on gender basis, among the referred cases 55.1% were female (375) and 44.9% were male (302).

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Table I

Frequency distribution of department of referral

Name of the department	Number	Percentage
Medicine	490	72.9
Pediatrics	60	08.9
Skin	53	07.8
Surgery	08	01.1
Orthopedics	09	01.3
ENT	41	06.1
Gynae	11	01.6

Table-II Shows the frequency distribution of psychiatric disorders among the referred cases on the basis of DSM-IV-TR criteria. Major depressive disorder was highest referral case (19.6%). Anxiety disorders and Schizophrenia were 18.7% and 14.2% respectively. Among the referred cases Sexual dysfunction, Deliberate self harm, Substance related disorders, Conversion disorder were 8%, 7.1%, 6.2%, 5.3% respectively.

Table II

Frequency distribution of Psychiatric disorders

Psychiatric Disorder	Number	Percentage
Schizophrenia	95	14.2
Bipolar Mood Disorder	73	10.8
Major Depressive Disorder	131	19.6
Anxiety Disorders	125	18.7
Acute Confusional State	29	04.4
Sexual Dysfunction	53	08.0
Substance Related Disorders	41	06.2
Conversion Disorder	35	05.3
Seizure Disorder	23	03.5
Deliberate Self-harm	47	07.1
Others (PD, TD,RLS, PDD CD, Pseudocyesis),	20	02.9

Discussion

This study was focused on referral of both in and outdoor patients. These patients were suffering from either some sort of Psychiatric disorders only or associated with other general medical condition. Different studies show that the prevalence of Psychiatric disorders among the attending patients in the hospitals observed to a range from 10% to more than 50%.^{2,3,8,9}

In our study number of female patients is high. This finding is not consistent with other Studies.¹⁰ But it is clear that number of female patients is

increasing day by day in our all clinical setting. Perhaps this is due to socio-cultural suppression of the female gender. Most of the patients were referred from department of medicine (72.9%). This finding is similar to other studies.^{10,11} Surprisingly the referral rate from Pediatrics, Skin and ENT department were 8.9, 7.8 and 6.1 percent respectively.

Major depressive disorder was found in 19.64% cases, which is consistent to other studies.^{3,10} Anxiety disorder was found in 18.75% cases. Other studies showed different pictures. This may be due to increasingly difficult social circumstances and poor adaptive ability of the people with present competitive life style. Of the referred cases Schizophrenia was 14.2%. This finding is similar with other studies done in different places.⁹⁻¹² Acute confusional state was only 4.4%. In other studies it ranges from 20% to 69.4%.^{8,9,11-13} The disparity between the referral rate for psychiatric consultation and the extent of psychopathology in other clinical settings is striking and it is clear that only few patients are referred. This trend is not suitable for better services in our profession at present.

Conclusion

Now it is necessary for psychiatric assessment and the collaborative management of patients for medically unexplained symptoms or psychiatric disorders co morbid with another medical condition.

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