Original Article

Socio - Demographic Profile of Patients Attending in Outpatient Department in a General Hospital - An Observational Study

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Abstract

Background : Bangladesh has had tremendous development when it comes to health. With greater emphasis given to health, more and more people has become health conscious and seek medical attention early in their disease course. Our study looked at the pattern of the medicine OPD consultation in a peripheral center.

Methodology: It was an observational study where all patients coming to the outpatient department of a 250 bed general hospital cum newly formed medical college were included in the study. Data was collected viewing the OPD patient registry and a short questionnaire over a three month period.

Results: Over a three months period, a total of 2344 patients were seen in OPD. Among them, 1247 were male (53.19%),1097 were female(46.81%). Most of the patients belonged to the 35-54 age group(47%). Only 3%(70 patients) required admission. Among the patients seeking consultation, around 79% were actually seeking consultation, rest were looking for free medicine. Majority patients had PUD(982).630 patients had IBS.

Conclusion: Over the years, there has been a shift in health awareness among Bangladeshi people which is reflected in our study.OPD need more attention for effective functioning of hospitals.

Keywords: Medicine, outpatient department, Bangladesh.

Introduction

Bangladesh has become the basket with a bottom from being bottomless within a span of only thirty years of independence. With around 25 government medical colleges in various parts of the country, people have become more and more health aware over the years. The remarkable improvement in healthcare in Bangladesh is reflected in its achievement of Millennium Development Goal in health.¹ The efficacy of any healthcare delivery system largely depends on its ability to handle patients in outpatient department, how quickly services are being given and quality of the treatment provided. Adequate management of time as a physician is always difficult as

there is only 24 hours in a day. In most tertiary centers, outpatient service is one of the most crucial parts of management as an effective OPD can reduce the unnecessary patient load in wards. Dhaka Medical college Hospital, being the busiest hospital, had about two hundred thousand OPD consultation in the year 2009.²

We conducted a hospital based survey to determine the number of patients seeking consultation in a medicine outpatient department in a 250 bed general hospital, their nature of consultation and reason behind their

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Materials and Methods

It was a cross sectional observational study covering the period of three months from August 2012 to October 2012. All patients seeking consultation in medicine outpatient department were the study subjects. Patients were thoroughly examined after a brief history and questioned using a short pre formed questionnaire keeping within ethical grounds. All data were recorded.

Results

Over a three months period, a total of 2344 patients were seen in OPD. Among them, 1247 were male (53.19%), 1097 were female (46.81%)(Fig.1)

Number of Patients in OPD acording to sex (in percentage, N= 2344)

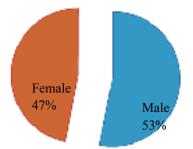


Fig.1: Showing sex difference of patients (N=2344)

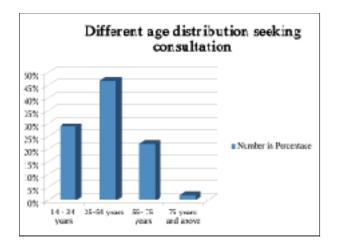


Fig.2: Age distribution of patients seeking consultation

Age distribution of the patients showed that 29% of the patients belonged to age group of 14-34, 47% to 35-54, 22% belonged to 55-74 and 2% belonged to those who are older than 75 years (Fig.2).

Among the patients seeking medical attention, 79% of the patients were self motivated, 16% came to collect free medicine, 3% were referred by other physicians whereas only 1% was referred by other hospitals (Table I).

Table I: Showing type of consultation:

Reason for referral	Percentage of Patients
Self	79%
Other Hospital	1%
Other practitioners	3%
Free Medicine	16%

Table II: Top ten symptoms among patients (N= 2344)

Disease	Percentage
Problems related to indigestion	69%
/excess gas formation	
Weakness	31%
Fever(Not Documented)	24%
Fever(Documented)	17%
Low back pain	14%
Breathlessness	13%
Reduced Sleep	13%
Joint Pain	3%
Dermatological problems	1%
Headache	1%

*some patient presented with multiple symptoms

Analysis of the patient's symptoms showed that most common symptom was indigestion/excess gas formation (69%). Weakness was complained by 31% of patients. 24% patients complained of feverish feeling but fever was not documented. Low back pain was complained by 14% patients, breathlessness and reduced sleep was complained by 13% patients each.

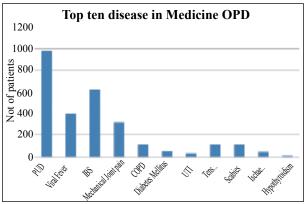


Fig.3: Common Diseases in Medicine OPD

Among the patients consulted, majority of the patients (982) were provisionally diagnosed as having peptic ulcer disease (PUD). 630 patients were diagnosed to have Irritable bowel syndrome. 320 patients had mechanical joint pain. Diabetes was present in 49 patients, COAD in 113 patients, tension type headache in 112 patients, 113 patients were suffering from scabies, 42 from ischaemic heart disease, 34 from UTI.

Discussion

A general characteristic of OPDs is waiting rooms full of patients. But it has its demerits as some patients will be lost in the long waiting period. Another fact is that in a crowded OPD, physicians often do not have adequate time to give to patients leading to dissatisfaction among their patients. Indeed, awareness by some sick people of long waiting times deters them, and they seek alternative medical relief.^{3, 4}

With the ever increasing population, doctors now a day has less and less time for patients. In Bangladesh, the scenario is even worse as seen in our study with all the holidays, in an average a doctor has to see around 40 patients a day. In a study in 1995, 41 % doctors felt a decline in the amount of time spent for patients seen.⁵ In our study we found that a total of 2344 patients had been seen in our OPD over a three months period. Socio demographic profiling of our population revealed that 53% of the patients were male and 47 % of the patients were female (fig.1). This is a very important fact as male to female ratio is almost equal and reflects on the aspects of women empowerment and wellbeing. It also emphasizes the increased level of awareness among our women population. A study done in DMCH Neurology OPD also showed similar findings. ⁶ Age distribution analysis showed that most of the patients belonged to 35-54 years (47%). Next was the young aged between 14-34 years (29%). 22% of the population was aged between 55-75, and 2% had age over 75 years (fig.2). This reflects the overall increase in our life expectancy as people are becoming more and more health conscious.

When asked regarding the reason for consultation, 79% of the respondents had self motivated consultation, 1% was referred by another hospital and 3% by other practitioners. One interesting fact that was revealed in our study that around 16% of the patients attended the OPD just for the access to free medicine that is provided by the government hospitals as a subsidiary. When asked many answered that they believed that hospital

supplied medicine has better efficacy than other medicines sold outside. A study done in India also showed 72% patient had self referral which is comparable to our study.⁷

Their symptom analysis showed among various presentations, most of the patients had GIT related symptoms (69%). An important presentation was feverish feeling around the night time which was undocumented but had an important psychological effect on the patients (31%). Further examination failed to show any pathology in these patients.

After evaluation, majority of the patients (982) were provisionally diagnosed as having peptic ulcer disease (PUD). 630 patients were diagnosed to have irritable bowel syndrome. None of the patients were investigated as there was no facility for either endoscopy or colonoscopy. 320 patients had mechanical joint pain. Diabetes was present in 49 patients, COPD in 113 patients, tension type headache in 112 patients. 113 patients were suffering from scabies, 42 from ischaemic heart disease, 34 from UTI (fig.3).

Conclusion

As a third world country, we have inadequate manpower in health sector to cope with the rising expectation of our own people. As OPD is an important part of a good hospital, our timely attention to develop orderly OPD to provide service can result in better outcome of the patients.

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