

Section **Psychiatry**

Original Article

A Prospective Study on Psychological Profile of Male Alcoholic Patients Visiting Psychiatry OPD in a Tertiary Care Teaching Hospital

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ABSTRACT

Background: Treatment outcome is very essential. Hence for successful treatment and management of alcohol dependent cases, it is essential to understand their personality. **Methods:** Present cross sectional hospital based study was conducted in the Department of Psychiatry, Pacific Institute of Medical Sciences, Udaipur. Alcohol dependence syndrome and uncomplicated withdrawal state patients only were included in the present study. Age less than 18 and more than 60 years, patients with mental retardation, patients with personality disorders were excluded. **Results:** Majority of subjects belongs to upper low socioeconomic status (n=10), middle socioeconomic status (n=6), low socio economic status (n=2) and upper middle socioeconomic status (n=2). Maximum number of patients were from rural areas than urban areas. Majority of males in the high-risk level of severity of alcoholism has banging head against something, to the extent that caused a bruise to appear type of behavior. **Conclusions:** Majority alcoholics were from low social classes, were illiterate, were married, unskilled workers. Hence these group people should be paid proper attention to prevent the occurrence of alcoholism among them.

Keywords: Alcoholism, Psychiatric profile, Withdrawal state

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INTRODUCTION

It is felt that liquor abuse or reliance on liquor is identified with identity issue. They are thought to be sincerely juvenile. They may wind up alcoholic as they are harmed. They have feeling of frailty and feel lacking. They can't satisfy their jobs and thus may wind up reliant on liquor. Be that as it may, as a general guideline, not all with such identity will wind up alcoholic. So, it is thought that personal maladjustment may be a risk factor. The overall personality is related to the treatment outcome. Hence for successful treatment and management of alcohol dependent cases, it is essential to understand their personality.^[1] Some believe that alcoholism and anxiety disorders go hand in hand. They exist as co-morbidity. Many studies have also uncovered this

association. The studies report that this association is complex and multifaceted. Hence the management is complicated and difficult if the co- morbidity exists.^[2] Drunkards tend to hurt self as well as other people. Manhandle can prompt self-harmful conduct. They end up hostile to social regularly. Liquor abuse is specifically engaged with numerous criminal circumstances. Investigations of these drunkards in connection to their statistic and social attributes are required. Such examinations help to toss light on distinguishing hazard factors and recognize the individuals who are inclined to grow such practices. Hence present study was conducted to study the psychiatric profile of patients with alcoholism.

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METHODS

Cross sectional hospital based study was conducted in the Department of Psychiatry, Pacific institute of Medical Sciences, Udaipur. Alcohol dependence syndrome and uncomplicated withdrawal state patients only were included in the present study. Age less than 18 and more than 60 years, patients with mental retardation, patients with personality disorders were excluded.

A total of 20 male patients were included in the present study on the basis of inclusion and exclusion criteria. They were diagnosed as having alcohol dependence syndrome using ICD-10 coding. After their verbal informed consent, data was collected from them. ICD-10 criteria used to diagnose the alcoholism group, total subjects were 20 Male patients. For the purpose of this study, the word 'alcoholism' is used to indicate alcohol dependence syndrome (ICD-10). Alcohol use disorders identification test (AUDIT) was applied and score noted for each patient. Detailed history was recorded. The tools used were the alcohol use disorders identification test (Audit), deliberate self-harm inventory, International Classification of Diseases (ICD-10), WHO 1992.^[3]

The alcohol use disorders identification test (AUDIT)^[4]

The alcohol use disorders identification test (AUDIT) incorporates questions about the quantity and frequency of alcohol use in adults. AUDIT compares favourably with other instruments in detecting risky drinking. Developed by the World Health Organization (WHO) for use in primary care settings to identify persons whose alcohol consumption has become hazardous or harmful has proven useful among medical, surgical, and psychiatric inpatients

Total score interpretation

A score of 8 or more is associated with harmful or hazardous drinking. A score of 15 or more in men, is likely to indicate alcohol dependence.

RESULTS

As far as socioeconomic status of the study population is considered, Majority of subjects belongs to upper low socioeconomic status (n=10), middle socioeconomic status (n=6), low socio economic status (n=2) and upper middle socioeconomic status (n=2).

Table 1. Self-injurious behavior in the study group. N=20

Self-injurious behavior	Male
Yes	4
No	16
Total	10

Table 1 shows self-injurious behaviour was found in 20% (n=4) male patients.

Majority of males in the high-risk level of severity of alcoholism has banging head against something, to the extent that caused a bruise to appear type of behaviour.

DISCUSSION

Majority of subjects belongs to upper low socioeconomic status (n=10), middle socioeconomic status (n=6), low socioeconomic status (n=2) and upper middle socioeconomic status (n=2). Majority of the patients were Hindus as compared to Muslims and Christians. n=14 were illiterate, n=3 were having primary school education, (n=2) studied up to high school level, intermediate level literacy was seen among (n=1). n=16 were unskilled, (n=2) were semiskilled, and (n=2) were skilled. Maximum were from rural areas (71.25%) and 29.75% were from urban areas. Majority of males in the high-risk level of severity of alcoholism has banging head against something, to the extent that caused a bruise.

Pillai A et al studied association between low social class and alcohol use disorders.^[5] They also studied the alcohol drinking patterns. They also studied the adverse outcomes among male drinkers. They found that the rural people consumed more dangerous quantities of alcohol than urban residents. Similar finding has been reported in the present study. The higher drinking quantity was associated with low level of education and low social class. We also report the similar findings. Older age, low education, being separated were found to be risk factors for more frequent heavy drinking.

CONCLUSION

Majority alcoholics were from low social classes, were illiterate, were married, unskilled workers. Hence these group people should be paid proper attention to prevent the occurrence of alcoholism among them.

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