Evaluation of Psychiatric Disorders in Children: An Institutional Based Study

Krishan Kumar Sharma¹, Mohammad Aslam Khan^{2*}

¹Associate Professor, Department of Psychiatry,

Mayo Institute of Medical Sciences, Lucknow, Uttar Pradesh, India.

²Associate Professor, Department of Pediatrics,

Al-Falah School of Medical Sciences & Research Centre, Faridabad, Haryana, India.

ABSTRACT

Background: Generally, the child/adolescent in question would not have initiated the consultation or may not be in agreement with the need for a consultation. Hence; the present study was conducted for assessing psychiatric disorders in children.

Materials & Methods: A total of 500 school-going children were enrolled. Complete demographic and clinical details of all the patients were obtained. We used a semi-structured questionnaire to obtain sociodemographic and other relevant clinical information about the children and their families from their parents or caregivers and a validated parent version of the Development and Well-Being Assessment for measuring psychopathology. All the results were recorded in Microsoft excel sheet and were subjected to statistical analysis using SPSS software.

Results: A total of 500 school-going children were evaluated. Psychiatric disorder was found to be present in 46.4 percent of the patients. While correlating the psychiatric disorder with advancing age and male gender, significant results were obtained. Among various psychiatric disorders, anxiety and

depression were the most common psychiatric disorders encountered.

Conclusion: There is a high prevalence of psychiatric disorders among school going children.

Key words: Psychiatric disorders, Children.

*Correspondence to:

Dr. Mohammad Aslam Khan,

Associate Professor, Department of Pediatrics.

Al-Falah School of Medical Sciences & Research Centre,

Faridabad, Haryana, India.

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INTRODUCTION

Optimal assessment and treatment of psychiatric illness in children and adolescents includes modifications in diagnostic and treatment techniques, appreciation of variations in the clinical presentation of psychiatric disorders, an understanding of the spectrum of etiologies of behavioral disturbance, and knowledge of psychosocial and medical interventions. Assessing children and adolescents is challenging.^{1,2}

Generally, the child/adolescent in question would not have initiated the consultation or may not be in agreement with the need for a consultation. The consultation may or may not even be sought for the most impairing problem at hand. While children may be able to report the nature of symptoms, they may not be very good at reporting the timing and duration of their problems. They may not report problems if they are embarrassing or show them in a bad light. Clinical assessments with children and adolescents are, therefore, elaborate and require the clinician to be astute and

conscientious in obtaining information from multiple sources and settings, i.e., the child, parents, teachers, and other caregivers.^{3,4} There are bound to be discrepancies in the report; nevertheless, multi-source information is a requirement during diagnosis and management. Assessment and treatment are generally multidisciplinary. Information may also be gathered in a staged manner to not overwhelm the child and family. Gathered information has to be shared across professionals involved in the care of the child and family.⁵ Hence; the present study was conducted for assessing psychiatric disorders in children.

MATERIALS & METHODS

The present study was conducted for assessing psychiatric disorders in children. A total of 500 school going children were enrolled. Complete demographic and clinical details of all the patients were obtained. We used a semi-structured questionnaire

to obtain sociodemographic and other relevant clinical information about the children and their families from their parents or caregivers and a validated parent version of the Development and Well-Being Assessment for measuring psychopathology. All the results were recorded in Microsoft excel sheet and were subjected to statistical analysis using SPSS software.

Table 1: Prevalence of psychiatric disorder among children

Psychiatric disorder	Number	Percentage
Present	232	46.4
Absent	268	53.6
Total	500	100

Table 2: Correlation of psychiatric disorder with age and gender

Psychiatric disorder	r- value	p-value
With age (advancing age)	-1.008	0.001 (Significant)
With Gender (boys)	-2.642	0.000 (Significant)

RESULTS

A total of 500 school going children were evaluated. Psychiatric disorder was found to be present in 46.4 percent of the patients. While correlating the psychiatric disorder with advancing age and male gender, significant results were obtained. Among various psychiatric disorders, anxiety and depression were the most common psychiatric disorders encountered.

DISCUSSION

Prevalence of mental disorders among children has been reported to be 14-20% in various studies. According to World Health Report (2000), 20% of children and adolescents suffer from a disabling mental illness worldwide and suicide is the third leading cause of death among adolescents. The issue of childhood psychiatric morbidity is more serious in middle and low income countries because these countries have a much larger proportion of child and adolescent population; much lower levels of health indices; poorer infrastructure and resources to deal with problems. 6-9 Main burden of care for children's mental disorders in India lies on general adult psychiatrists or paediatricians who have practically no training in child psychiatry in India. There is a huge deficiency in the number of trained professionals needed to meet the mental health needs of children and adolescents in low- and middleincome countries. Moreover, most of these professionals are settled in urban areas or work in private hospitals, further widening the gap between demand for child psychiatric care and the supply of mental health services for children and adolescents. 10-12 Hence; the present study was conducted for assessing psychiatric disorders in children.

A total of 500 school going children were evaluated. Psychiatric disorder was found to be present in 46.4 percent of the patients. While correlating the psychiatric disorder with advancing age and male gender, significant results were obtained. Among various psychiatric disorders, anxiety and depression were the most common psychiatric disorders encountered. Caqueo-Urízar A et al evaluated psychiatric disorders in children and adolescents in a middle-income Latin American country. The Sistema de

Evaluación de Niños y Adolescentes (SENA) [Child and Adolescent Evaluation System] was used to evaluate mental health indicators in a sample of students in Northern Chile. Two age-appropriate versions of the assessment were applied to a total sample of 5043 students, which included an elementary education sample of 1953 schoolchildren from fourth grade through sixth grade (ages 8 to 13 years), and a Secondary School sample of 3090 schoolchildren from seventh grade (the last year of elementary school) through the last year of Secondary school (senior high school) (ages 12 to 19 years). For each group, the version of the assessment used was determined by the students' grade level. Both samples included municipal, governmentsubsidized, and private schools. In this student population, depression, anxiety, and behavioral disorders were the main mental health problems identified, and indicators revealed a progressive increase in cases over the years, coinciding with the global epidemiological scenario. Males showed a greater presence of externalizing behaviors related to mental health problems associated with aggression and defiant behavior. However, females showed the highest number of mental health issues overall, especially regarding problems related to internalization. There are significant differences between school types.12

Jesmin A et al determine the psychiatric disorders among children and adolescents attending pediatric outpatient departments of tertiary care hospitals. They used a semi-structured questionnaire to obtain sociodemographic and other relevant clinical information about the children and their families from their parents or caregivers and a validated parent version of the Bangla Development and Well-Being Assessment (DAWBA) for measuring psychopathology. A purposive sampling technique was used. A total of 240 male and female children aged 5 to 16 years old were included in the study. The mean age of the children was 9.0± 2.6 years. The majority (71%) of children were in the 5–10 year age group. The male/female ratio was 1.2:1. Among the respondents, 18% were found to have a psychiatric disorder.

Behavioral disorders, emotional disorders, and developmental disorders were found in 9.0%. 15.0% and 0.4% respectively. Hyperkinetic disorder was the single most frequent (5.0%) psychiatric disorder. A significant number of children were found to have psychiatric disorders. Their study indicated the importance of identification and subsequent management of psychiatric conditions among the pediatric population. 13 Malhotra S et al reviewed by conducting the meta-analysis of epidemiological studies on child and adolescent psychiatric disorder from India. Sixteen community-based studies on 14594 children and adolescents; and seven school based studies on 5687 children and adolescents, reporting prevalence of child and adolescent psychiatric disorder were analyzed and overall prevalence was calculated. The prevalence rate of child and adolescent psychiatric disorders in the community has been found to be 6.46% (95% confidence interval 6.08% - 6.88%) and in the school it has been found to be 23.33% (95% confidence interval 22.25% -24.45%).14

CONCLUSION

There is a high prevalence of psychiatric disorders among school going children.

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