

Prevalence of dementia at psychiatry inpatient department: A hospital based study

Mayur Kiran Muthe

¹Associate Professor, Department of Psychiatry, Dr Ulhas Patil Medical College and Hospital, Jalgaon, Maharashtra, INDIA.

Email: mayurmuthe@gmail.com

Abstract

Introduction: Dementia is an emerging health problem, as the elderly population is increasing so is the prevalence of dementia. Cognitive impairment prevalence also increases with increasing age. As such, there is scarcity of prevalence studies from Northern India due to ethnic and sociocultural diversities. There is regional variation in prevalence of cognitive decline as well as risk factors from region to region. **Aims and Objectives:** To study Prevalence and various factors associated with Dementia at Psychiatry Inpatient Department. **Methodology:** This was a cross sectional, hospital based study in all the patients who diagnosed as Dementia and admitted to the Psychiatry inpatient department at tertiary health care center during the year Mar 2013 to Mar 2014. After obtaining informed consent from each subject, data were collected on a preformed proforma. Hindi-mini-mental state examination (HMSE) was used in each subject. In an elderly person with a HMSE score <23, detailed history and physical examination was done on a pretested proforma. Clinical diagnostic criteria used was Diagnostic and statistical manual for Mental disorder fourth edition Text Revision (DSM-IV-TR) for Alzheimer's disease and Vascular dementia.¹⁹ As per above diagnostic criteria only 30 patients were included in this study during the period of one year. **Result:** As per diagnostic criteria and patients in inpatient department were all above the age of 60 years in that also the most common age group was 60-69 years age group i.e. (63.33%). After that 70-79 (23.33%) and >80 (13.33%). In the study population males were more than females i.e. (56.67%) and (43.33%) respectively. (70.00%) was illiterate as compared to (30.00%) were literate. Most common Diagnosis of Dementia was of Senile (70.00%) followed by Vascular (Atherosclerosis) (16.67%); Alzheimer's disease (10.00%) and (3.33%) Other Diagnosis (3.33%). Most common Risk factor associated; found in our study was Heavy alcohol Consumption (33.33%) followed by Atherosclerosis (23.33%), Obesity (BMI>30) (16.67%), Diabetes (10.00%), Family history (6.67%), Known case of Psychiatric illness (3.33%), H/O Head injury (3.33%), H/O Smoking (3.33%). **Conclusions:** As this diseases is associated with some of the risk factors like Heavy alcohol Consumption, Atherosclerosis, Obesity, Diabetes, Family history, Known case of Psychiatric illness, History of Head injury, history of Smoking so these factors should be avoided and routine mild exercises like yoga and meditation should be promoted in aged persons.

Keywords: Dementia, DSM-IV, Hindi-mini-mental state examination (HMSE).

* Address for Correspondence:

Dr. Mayur Kiran Muthe, Associate Professor, Department of Psychiatry, Dr. Ulhas Patil Medical College & Hospital, N.H.No.6, Jalgaon-Bhusawal Road, Jalgaon, Khurd, Jalgaon-425309 Maharashtra, INDIA.

Email: mayurmuthe@gmail.com

Received Date: 18/06/2015 Revised Date: 15/07/2015 Accepted Date: 19/08/2015

Access this article online

Quick Response Code:



Website:

www.statperson.com

DOI: 02 December
2015

INTRODUCTION

Age is the single biggest risk factor for dementia. Once you hit age 65, your risk of developing Alzheimer's disease doubles every five years, according to the Centers

for Disease Control and Prevention. You can't hold back the clock, but there are many other things you can do to keep your brain healthy as you get older²¹. Dementia is an emerging health problem, as the elderly population is increasing so is the prevalence of dementia^{1,2,3,4,5,6}. Cognitive impairment prevalence also increases with increasing age.^{7,8,9} As such, there is scarcity of prevalence studies from Northern India due to ethnic and sociocultural diversities. There is regional variation in prevalence of cognitive decline as well as risk factors from region to region.¹⁰ Epidemiological studies of dementia in person ≥ 60 years in urban and rural population of southern India had obtained prevalence rates of 27-33.6/1000 and 34-36/1000, respectively^{11,12,13}. In a population aged ≥ 65 years from reported prevalence rate of dementia is 13.6/1000 and 18/1000 from a rural

community of Ballabgarh, Northern India and urban community of Mumbai, India respectively^{14,15}

AIMS AND OBJECTIVES

To study Prevalence and various factors associated with Dementia at Psychiatry Inpatient Department.

MATERIAL AND METHODS

This was a cross sectional, hospital based study in all the patients who diagnosed as Dementia and admitted to the Psychiatry inpatient department at tertiary health care center during the year Mar 2013 to Mar 2014. After obtaining informed consent from each subject, data were collected on a preformed proforma. Hindi-mini-mental state examination (HMSE) was used in each subject. This is modified a modified version of mini-mental state examination (MMSE) in vernacular language with less emphasis on calculation ability, designed mainly for illiterate Hindi speaking population.^{16, 20} it is validated measure for evaluating cognitive decline. HMSE score of ≤ 23 has sensitivity of 81.3% and specificity of 60.2%.^{17,18}. In an elderly person with a HMSE score < 23 , detailed history and physical examination was done on a pretested proforma. Clinical diagnostic criteria used was Diagnostic and statistical manual for Mental disorder fourth edition Text Revision (DSM-IV-TR) for Alzheimer's disease and Vascular dementia.¹⁹. As per above diagnostic criteria only 30 patients were included in this study during the period of one year.

RESULT

Table 1: Distribution of the patients with respect to Various Socio Demographic Characters

| Age | No. (%) |
|----------------------------|-------------|
| 60-69 | 19(63.33%) |
| 70-79 | 7 (23.33%) |
| >80 | 4 (13.33%) |
| Sex | |
| Male | 17 (56.67%) |
| Female | 13 (43.33%) |
| Educational Status | |
| Illiterate | 21 (70.00%) |
| Literate | 9 (30.00%) |
| Diagnosis | |
| Senile | 21 (70.00%) |
| Vascular (Atherosclerosis) | 5 (16.67%) |
| Alzheimer's Disease | 3 (10.00%) |
| Other | 1 (3.33%) |

From Table 1: As per diagnostic criteria and patients in inpatient department were all above the age of 60 years in that also the most common age group was 60-69 years age group i.e. (63.33%). After that 70-79 (23.33%) and >80 (13.33%). In the study population males were more

than females i.e. (56.67%) and (43.33%) respectively. (70.00%) was illiterate as compared to (30.00%) were literate. Most common Diagnosis of Dementia was of Senile (70.00%) followed by Vascular (Atherosclerosis) (16.67%); Alzheimer's disease (10.00%) and (3.33%) Other Diagnosis (3.33%).

Table 2: Distribution of the patients as per history of Associated Risk Factors

| Risk Factors | No. (%) |
|-----------------------------------|------------|
| Heavy alcohol Consumption | 10(33.33%) |
| Atherosclerosis | 7(23.33%) |
| Obesity (BMI>30) | 5(16.67%) |
| Diabetes | 3 (10.00%) |
| Family history | 2 (6.67%) |
| Known case of Psychiatric illness | 1(3.33%) |
| H/O Head injury | 1(3.33%) |
| H/O Smoking | 1(3.33%) |

From Table 2: Most common Risk factor associated; found in our study was Heavy alcohol Consumption (33.33%) followed by Atherosclerosis (23.33%), Obesity (BMI>30) (16.67%), Diabetes (10.00%), Family history (6.67%), Known case of Psychiatric illness (3.33%), H/O Head injury (3.33%), H/O Smoking (3.33%).

DISCUSSION

One of the consistent findings across various studies is that the prevalence of dementia increases proportionately with age²². In our study we have Observed Most common Risk factor associated; found in our study was Heavy alcohol Consumption (33.33%) followed by Atherosclerosis (23.33%), Obesity (BMI>30) (16.67%), Diabetes (10.00%), Family history (6.67%), Known case of Psychiatric illness (3.33%), H/O Head injury (3.33%), H/O Smoking (3.33%). And, most common diagnosis in the patients were Senile dementia (70.00%), Vascular (Atherosclerosis) (16.67%), Alzheimer's disease (10.00%). most common age group was 60-69 years age group i.e. (63.33%). After that 70-79 (23.33%) and >80 (13.33%). In the study population males were more than females i.e. (56.67%) and (43.33%) respectively. (70.00%) was illiterate as compared to (30.00%) were literate.

CONCLUSIONS

As this diseases is associated with some of the risk factors like Heavy alcohol Consumption, Atherosclerosis, Obesity, Diabetes, Family history, Known case of Psychiatric illness, History of Head injury, history of Smoking so these factors should be avoided and routine mild exercises like yoga and meditation should be promoted in aged persons.

REFERENCES

- Shaji KS, Jithu VP, Jyothi KS. Indian research on aging and dementia. *Indian J Psychiatry*. 2010; 52:S148–52.
- Shaji KS, Iype T, Praveenlal K. Dementia clinic in general hospital settings. *Indian J Psychiatry*. 2009; 51:42–4.
- Das SK, Pal S, Ghosal MK. Dementia: Indian scenario. *Neurol India*. 2012; 60:618–24.
- Ganguli M. Depression, cognitive impairment and dementia: Why should clinicians care about the web of causation? *Indian J Psychiatry*. 2009; 51(Suppl 1):S29–34.
- Dias A, Patel V. Closing the treatment gap for dementia in India. *Indian J Psychiatry*. 2009; 51(Suppl 1):S93–7.
- Kirk-Sanchez NJ, McGough EL. Physical exercise and cognitive performance in the elderly: Current perspectives. *Clin Interv Aging*. 2014; 9:51–62.
- Galimberti D, Scarpini E. Progress in Alzheimer's disease research in the last year. *J Neurol*. 2013; 260:1936–41.
- Ramlall S, Chipps J, Pillay BJ, Bhigjee AL. Mild cognitive impairment and dementia in a heterogeneous elderly population: Prevalence and risk profile. *Afr J Psychiatry (Johannesbg)* 2013; 16:6. Epub ahead of print.
- Sheffield KM, Peek MK. Changes in the prevalence of cognitive impairment among older Americans, 1993–2004: Overall trends and differences by race/ethnicity. *Am J Epidemiol*. 2011; 174:274–83.
- Sosa AL, Albanese E, Stephan BC, Dewey M, Acosta D, Ferri CP, et al. Prevalence, distribution, and impact of mild cognitive impairment in Latin America, China, and India: A 10/66 population-based study. *PLoS Med*. 2012; 9:e1001170.
- Rajkumar S, Kumar S, Thara R. Prevalence of dementia in a rural setting: A report from India. *Int J Geriatr Psychiatry*. 1997; 12:702–7.
- Rajkumar S, Kumar S. Prevalence of dementia in the community-A rural-urban comparison from Madras, India. *Aust J Ageing*. 1996; 15:9–13.
- Shaji S, Promodu K, Abraham T, Roy KJ, Verghese A. An epidemiological study of dementia in a rural community in Kerala, India. *Br J Psychiatry*. 1996; 168:745–9.
- Vas CJ, Pinto C, Panikker D, Noronha S, Deshpande N, Kulkarni L, et al. Prevalence of dementia in an urban Indian population. *Int Psychogeriatr*. 2001; 13:439–50.
- Chandra V, Ganguli M, Pandav R, Johnston J, Belle S, DeKosky ST. Prevalence of Alzheimer's disease and other dementias in rural India: The Indo-US study. *Neurology*. 1998; 51:1000–8.
- Folstein MF, Folstein SE, McHugh PR. "Mini-mental state". A practical method for grading the cognitive state of patients for the clinician. *J Psychiatr Res*. 1975; 12:189–98.
- Ganguli M, Ratcliff G, Chandra V, Sharma S, Gilby J, Pandav R, et al. A Hindi version of the MMSE: The development of a cognitive screening instrument for a largely illiterate rural elderly population in India. *Int J Geriatr Psychiatry*. 1995; 10:367–77.
- Tsolaki M, Iakovidou V, Navrozidou H, Aminta M, Pantazi T, Kazis A. Hindi Mental State Examination (HMSE) as a screening test for illiterate demented patients. *Int J Geriatr Psychiatry*. 2000; 15:662–4.
- Text Revision (DSM-IV-TR) 4th ed. Washington DC: American Psychiatric Association; 2000. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders.
- Indarjeet Singh Gambhir, Vishal Khurana, Dhiraj Kishore, Ashutosh K. Sinha, and S. C. Mohapatra A clinico-epidemiological study of cognitive function status of community-dwelling elderly. *Indian J Psychiatry*. 2014 Oct-Dec; 56(4): 365–370.
- Anne Harding, Dementia Risk Factors. assessed on [9Nov. 2015] available at: [http://www.everydayhealth.com/news/dementia-risk-factors/]
- Llibre Rodriguez JJ, Ferri CP, Acosta D, Guerra M, Huang Y, Jacob KS, et al. Prevalence of dementia in Latin America, India, and China: A population-based cross-sectional survey. *Lancet*. 2008; 372:464–74.

Source of Support: None Declared
Conflict of Interest: None Declared