

# A Study To Assess The Health-Related Quality Of Life Among Depression Patients In Different Health Centre Of Gujarat State.

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## Abstract

**Background:** All depressive disorders are characterised by feelings of melancholy, emptiness, or irritability, together with physical and cognitive abnormalities that seriously impair the sufferer's ability to function. Thus, the current study's objective is to evaluate the health-related quality of life of depression patients who have been admitted to Gujarat State's mental hospital.

**Material & Method:** Descriptive research design was used to carry out the study. A total of 200 depressive patients included as participants through purposive sampling technique.

### Results:

Study found that 48.5% of the participants had mild depression score, 7.5% had moderate depression and 0.5% had severe depression symptoms. 66.5% participants had average QOL score, 23.5% had Poor QOL score while 10% had Good QOL score.

There was significant association found between depression score and demographic variables such as age and gender. There was a significance association between the QOL and demographic variables such as education status and gender

**Conclusion:** Findings of our study revealed that quality of life was poor among hospitalized patient in mental hospital. Gender, educational status and age were significantly associated with depression score and quality of life of the participants.

**Keywords:** Depression, patient, assessment, health related, quality of life.

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Date of submission: 21-07-2024

Date of acceptance: 31-07-2024

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## I. Introduction

A person who is depressed typically exhibits a number of these symptoms: feelings of melancholy, hopelessness, or pessimism; low self-esteem and increased self-deprecation; diminished energy and vitality; sluggishness in thought or behaviour; loss of appetite; and insomnia or disturbed sleep.<sup>1</sup> Depression is a type of mood illness that results in a chronically depressing and uninteresting state. All depressive disorders are characterised by feelings of melancholy, emptiness, or irritability, together with physical and mental abnormalities that have a substantial impact on the person's ability to function.<sup>2</sup> Major depressive illness has a complex aetiology, involving both hereditary and environmental variables. Although persons without a family history of depression might nonetheless have depression, first-degree relatives of depressed people are around three times more likely to experience depression than the overall population.<sup>3</sup> An estimated 3.8% of people suffer from depression, including 5.7% of individuals over 60 and 5% of adults (4% of males and 6% of women). Depression affects about 280 million people worldwide.<sup>4</sup> 9.5% of older women and 7.4% of older men reported having depression. The main health-related variables linked to depression in older men and women were poor self-rated health, multi-morbidity status, physical activity, difficulties with activities of daily living (ADL), and instrumental ADL (IADL).<sup>5</sup>

Christopher Rockson et al (2024) found that 6.3% of the patients suffered from major depression, and 1.7% had dysthymia in their study samples. Among those depressed, 35% had moderate depression, and 65% had severe depression. Female gender, nuclear family, living alone and literacy status were significantly linked with depression.<sup>6</sup> Arvind B. A et al (2019) revealed weighted prevalence of lifetime and current Depressive Disorders (DD) as 5.25% and 2.68%, respectively. Prevalence was highest in the 40–59 age groups (3.6%), among females (3.0%) and those residing in cities with population >1 million (5.2%). Age, gender, place of residence, education and household income were found to be significantly associated with current DD.<sup>7</sup>

Quality of life (QOL) can be defined as the totality of an individual's physical, emotional, social, occupational, and spiritual well-being, as well as their general state of health. Quality of life (QOL) is defined

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as "individuals perceptions of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards, and concern" by the World Health Organisation.<sup>8</sup> Many things have a favourable or unfavourable impact on QOL. Weary, nervous, worried about the family and the future, and struggling to meet basic needs. A stable social network, financial stability, and hope for a better future all enhance quality of life.<sup>9</sup> The term "quality of life" (QOL) refers to a wide range of factors, including an individual's physical and mental well-being, degree of freedom, social connections, and interactions with silent environmental elements. QOL is now seen as a significant factor and prognostic indication of mental disease, and it is advised that it be included into the clinical assessment and treatment of those with severe mental illness.<sup>10</sup>

People with depression have lower quality of life due to the nature of symptoms (loss of interest, depressed mood, lack of interest in enjoyable activities, low self-esteem, psychomotor retardation, and other) and associated illnesses, as well as social, occupational, and cognitive impairments.<sup>11</sup> The following factors were found to have a statistically significant correlation with the health-related quality of life of people with depression: age of patients, depression onset, medication non-adherence, comorbid illness, and poor social support.<sup>12</sup>

According to **Hanaa Mounir Hassan et al. (2019)**, the subscales measuring psychological health among depressed patients had the largest percentage of poor, and the subscale measuring environment had the lowest percentage. Additionally, it was shown that among depression patients, family issues accounted for the largest percentage of factors affecting QOL, while social factors accounted for the lowest percentage.<sup>13</sup> Due to the immune-compromising effects of stress associated with a low quality of life, individuals with depression may be more susceptible to medical issues such as chronic heart disease, diabetes, and hypertension.<sup>14</sup>

According to **Verma A. (2023)** et al, 49% of 103 participants experienced depression, with moderate depression accounting for the majority (23.8%). Multivariate analysis results revealed that individuals with uncontrolled hypertension and diabetes, sedentary lifestyles, associated comorbidities, and a history of COVID-19 infection had significantly higher odds of depression, as did those who lost a family member as a result of COVID-19.<sup>15</sup> The quality of life mean ( $\pm$ SD) scores for individuals with depression were  $41.3 \pm 7.5$ ,  $42.8 \pm 8.2$ ,  $38.9 \pm 8.9$ , and  $41.8 \pm 6.5$  for the physical, psychological, social, and environmental categories, according to **Shumye S. et al. (2019)**. The results of the multiple regression analysis demonstrated that the following factors were statistically significant predictors of the health-related quality of life of people with depression in all or at least one domain of quality of life: respondents' age, the age at which the depression first appeared, perceived stigma, living situation, degree of social support, and length of illness.<sup>16</sup> On the basis of review of literature and clinical experience researchers intended to conduct study with objective to assess health related quality of life of patient with depression.

**Problem Statement: "A study to assess the health related quality of life among depression patients in different health centre of Gujarat state".**

### **Objective**

- To evaluate the health related quality of life of patient with depression.
- To correlate the finding of Quality of life with demographic variables

## **II. Material And Methods**

**Research approach:** - Quantitative research approach

**Research Design:** - Non-experimental descriptive research design.

**Research Setting:** Study was conducted in mental hospitals of Gujarat state.

**Population :-** Study population consisted of all depressive patients who admitted in mental hospitals and fulfil the inclusion criteria.

**Sampling technique and sample** The sample included 200 depressive patients who admitted in different mental hospitals of Gujarat and selected through non probability purposive sampling technique.

**Research Tool:** Data collection tool has three sections:

**Section –I:** Socio-demographic variables

The items were; Age of patient, gender, Educational status, marital status, type of depression and any other comorbidity.

Section- II – Hamilton depression scale.

Section- III – WHO Quality of life (BREF) tool

**III. Results:-**

**Section A: Description of selected socio-demographic variables of the participants;**

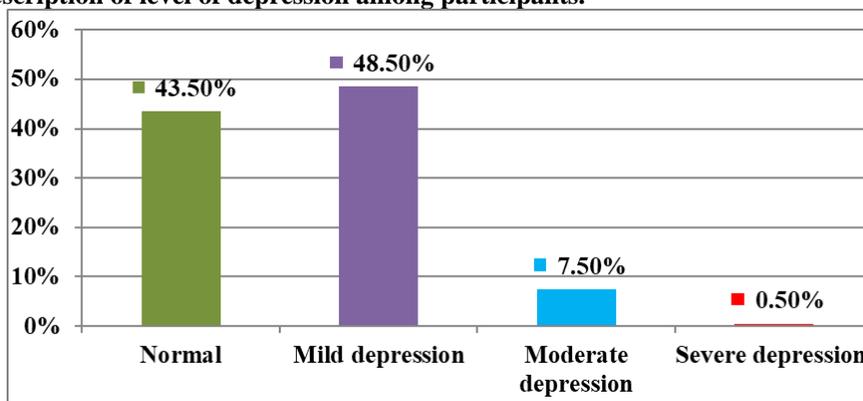
**Table 1. Frequency and percentage wise distribution of samples based on socio-demographic data (n=200)**

| Sr. No. | Personal Data          |                   | Frequency (F) | Percentage (%) |
|---------|------------------------|-------------------|---------------|----------------|
| 1.      | Age in year            | Less than 20 year | 16            | 8%             |
|         |                        | 21-40 Year        | 110           | 55%            |
|         |                        | 41-60 year        | 61            | 30.5%          |
|         |                        | above 60 year     | 13            | 6.5%           |
| 2.      | Gender                 | Male              | 122           | 61%            |
|         |                        | Female            | 78            | 39%            |
|         |                        | Other             | 0             | 0%             |
| 3.      | Education status       | SSC               | 66            | 33%            |
|         |                        | HSC               | 122           | 61%            |
|         |                        | Graduation & more | 56            | 28%            |
| 4.      | Marital status         | Married           | 108           | 54%            |
|         |                        | Unmarried         | 92            | 46%            |
| 5.      | Type of depression     | Mild              | 98            | 49%            |
|         |                        | Moderate          | 77            | 38.5%          |
|         |                        | Severe            | 25            | 12.5%          |
| 6.      | Any other co morbidity | HTN               | 20            | 10%            |
|         |                        | DM                | 18            | 9%             |
|         |                        | other             | 16            | 8%             |
|         |                        | None              | 146           | 73%            |

As per Table 1

- According to age, around half of the participants 55% were in to age group of 21-40 years, 30.5% were in 41-60 years, 8% were in age group of less than 20 year and 6.5% were in age group of Above 60 years.
- Regarding gender, 61% were Male and 39% were female.
- With regard to educational status, 61% participants had HSC, 33% had SSC and 28% had Graduation and more.
- As regard to marital status of the participants 54% were unmarried and 46% were married
- In connection with type of depression, 49% participants had mild level of depression, 38.5% had moderate level of depression and 12.5% participants had severe level of depression.
- In connection with any other comorbidity, 73% participants had no comorbidity, 10% had HTN, 9% had DM and 8% had other diseases.

**Section- B: Description of level of depression among participants.**



**Fig. 1 Level of depression among participants**

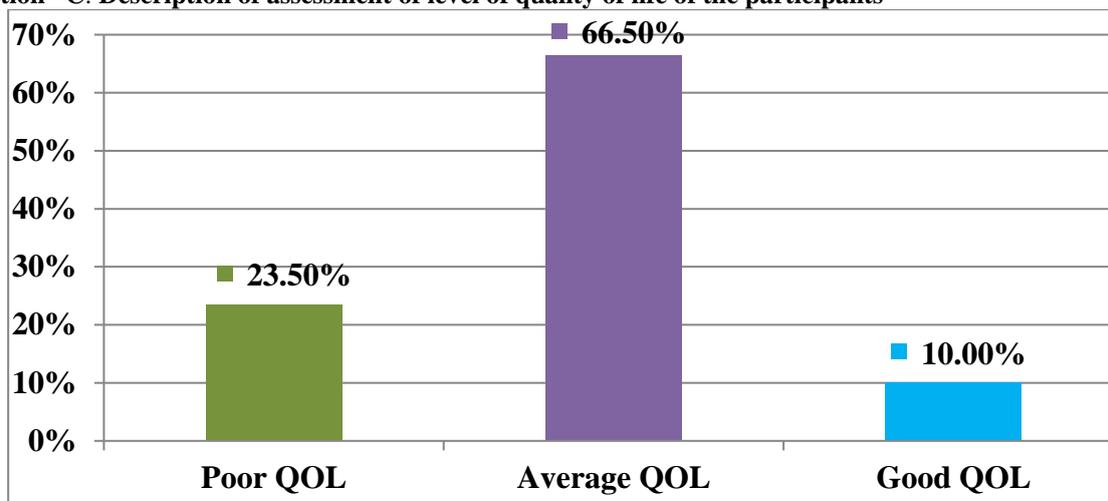
Above figure 1 depicts that, 48.50% of the participants had mild depression score, 43.50% had normal score and 7.5% had moderate depression and 0.5% had severe depression symptoms.

**Table 2. Description of range, mean, median, mode and standard deviation of participant’s depression score n=200**

|                  | Range | Mean | Median | Mode | SD   | Mean%  |
|------------------|-------|------|--------|------|------|--------|
| Depression Score | 1-23  | 8.89 | 8      | 6    | 4.85 | 16.77% |

The above Table 2 reveals that mean score on depression is  $8.89 \pm 4.85$  and mean percentage is 16.77%, median is 8 and mode is 6.

**Section –C: Description of assessment of level of quality of life of the participants**



**Fig. 2 Level of level of quality of life of the participants**

Figure 2 depicts that, 66.5% participants had Average QOL score, 23.5% had Poor QOL score while 10% had Good QOL score

**Table 3. Description of range, mean, median, mode and standard deviation of participant’s QoL score n=200**

|           | Range | Mean | Median | Mode | SD    | Mean%  |
|-----------|-------|------|--------|------|-------|--------|
| QoL Score | 42-98 | 64.2 | 65     | 42   | 16.85 | 49.44% |

The above Table 3 reveals that mean score on QOL is  $64.28 \pm 16.85$  and mean percentage is 49.44%, median is 65.00 and mode is 42.00.

**Section –D Association between level of depression and QoL score with selected socio demographic variables of the participants**

Chi-square was calculated to find out the association between depression and QoL score with selected socio demographic variables.

**Table 4. Association between selected demographic variables and the level of depression.**

| Sr. No . | Vari-able   | Category   | Freq . | Level of depression |      |            |          | d f | Table value | X <sup>2</sup> Value | Signi- ficance |
|----------|-------------|------------|--------|---------------------|------|------------|----------|-----|-------------|----------------------|----------------|
|          |             |            |        | Nor- mal            | Mild | Mode- rate | Sev- ere |     |             |                      |                |
| 1.       | Age in year | < 20 year  | 16     | 6                   | 8    | 2          | 0        | 9   | 16.91       | 17.08                | S              |
|          |             | 21-40 year | 110    | 47                  | 55   | 7          | 1        |     |             |                      |                |
|          |             | 41-60 year | 61     | 25                  | 30   | 6          | 0        |     |             |                      |                |
|          |             | > 60 year  | 13     | 9                   | 4    | 0          | 0        |     |             |                      |                |
| 2.       | Gender      | Male       | 122    | 50                  | 61   | 11         | 0        | 3   | 7.81        | 8.12                 | S              |
|          |             | Female     | 78     | 37                  | 36   | 4          | 1        |     |             |                      |                |
|          |             | Other      | 0      | 0                   | 0    | 0          |          |     |             |                      |                |

|    |                        |                     |     |    |    |    |   |   |       |      |    |
|----|------------------------|---------------------|-----|----|----|----|---|---|-------|------|----|
| 3. | Education status       | SSC                 | 66  | 12 | 9  | 1  | 0 | 6 | 12.59 | 1.98 | NS |
|    |                        | HSC                 | 122 | 51 | 60 | 10 | 1 |   |       |      |    |
|    |                        | Graduation and more | 56  | 24 | 28 | 4  | 0 |   |       |      |    |
| 4. | Marital status         | Married             | 108 | 40 | 59 | 9  | 0 | 3 | 7.81  | 5.46 | NS |
|    |                        | Unmarried           | 92  | 47 | 38 | 6  | 1 |   |       |      |    |
| 5. | Type of depression     | Mild                | 98  | 41 | 49 | 7  | 1 | 6 | 12.59 | 3.71 | NS |
|    |                        | Moderate            | 77  | 37 | 33 | 7  | 0 |   |       |      |    |
|    |                        | Severe              | 25  | 9  | 15 | 1  | 0 |   |       |      |    |
| 6. | Any other co-morbidity | HTN                 | 20  | 10 | 10 | 0  | 0 | 9 | 16.91 | 5.73 | NS |
|    |                        | DM                  | 18  | 8  | 8  | 2  | 0 |   |       |      |    |
|    |                        | other               | 16  | 7  | 6  | 3  | 0 |   |       |      |    |
|    |                        | None                | 146 | 62 | 73 | 10 | 1 |   |       |      |    |

Chi-square value in Table 4 shows that there is a significance association between the level of depression and demographic variables such as age and gender, there is a no significance association between the level of depression and other demographic variables.

**Table 5 Association between selected demographic variables and the level of depression.**

| Sr. No | Variable               | Category          | Freq | Level of depression |         |      | df | Table value | X <sup>2</sup> Value | Significance |
|--------|------------------------|-------------------|------|---------------------|---------|------|----|-------------|----------------------|--------------|
|        |                        |                   |      | Poor                | Average | Good |    |             |                      |              |
| 1.     | Age in year            | < 20 year         | 16   | 5                   | 10      | 1    | 6  | 12.59       | 4.70                 | NS           |
|        |                        | 21-40 year        | 110  | 24                  | 76      | 10   |    |             |                      |              |
|        |                        | 41-60 year        | 61   | 17                  | 36      | 8    |    |             |                      |              |
|        |                        | > 60 year         | 13   | 1                   | 11      | 1    |    |             |                      |              |
| 2.     | Gender                 | Male              | 122  | 27                  | 87      | 0    | 2  | 5.99        | 6.04                 | S            |
|        |                        | Female            | 78   | 20                  | 46      | 0    |    |             |                      |              |
|        |                        | Other             | 0    | 0                   | 0       | 0    |    |             |                      |              |
| 3.     | Education status       | SSC               | 66   | 7                   | 13      | 2    | 4  | 9.48        | 10.93                | S            |
|        |                        | HSC               | 122  | 26                  | 85      | 11   |    |             |                      |              |
|        |                        | Graduation & more | 56   | 14                  | 35      | 7    |    |             |                      |              |
| 4.     | Marital status         | Married           | 108  | 24                  | 75      | 9    | 2  | 5.99        | 6.12                 | NS           |
|        |                        | Unmarried         | 92   | 23                  | 58      | 11   |    |             |                      |              |
| 5.     | Type of depression     | Mild              | 98   | 23                  | 64      | 11   | 4  | 9.48        | 7.95                 | NS           |
|        |                        | Moderate          | 77   | 22                  | 51      | 4    |    |             |                      |              |
|        |                        | Severe            | 25   | 2                   | 18      | 5    |    |             |                      |              |
| 6.     | Any other co-morbidity | HTN               | 20   | 2                   | 16      | 2    | 6  | 12.59       | 5.45                 | NS           |
|        |                        | DM                | 18   | 5                   | 10      | 3    |    |             |                      |              |
|        |                        | other             | 16   | 3                   | 10      | 3    |    |             |                      |              |
|        |                        | None              | 146  | 37                  | 97      | 12   |    |             |                      |              |

The Chi-square value in Table 5 shows that there is a significance association between the QOL and demographic variables such as education status and gender, there is a no significance association between the QOL and other demographic variables.

#### IV. Discussion

Our study found that around half of the participants 55% were in to age group of 21-40 years, 61% were Male, 61% participants had HSC education level, 54% were unmarried and 73% participants had no comorbidity. 49% participants had mild level of depression. **Siyoum M et al (2021)**<sup>17</sup> also revealed that mean age of the participants was 39.71 years, and above half (51%) of the participants were male and (46.8%) were married and the prevalence of depression symptoms was 53.9% in their study.

Our study findings revealed that among hospitalized patients, 48.50% of the participants had mild depression score, 7.5% had moderate depression and 0.5% had severe depression symptoms. Overall 56.5% participants had depression symptoms score. **Belsiyal C. X. et al (2022)**<sup>18</sup> found that among hospitalized older adults, depressive symptoms (80%) were highly prevalent and closely linked to an extended hospital stay and multiple chronicity. **Monica Gupta et al (2010)**<sup>19</sup> also found prevalence of depression as 28%, with a higher prevalence among females (33.33%) as compared to males (22.7%). **Satapathy S et al (2020)**<sup>20</sup> revealed 19.28% prevalence of depression among Covid-19 admitted patients in a tertiary care level hospital in Delhi-NCR. **Kumar S. et al (2020)**<sup>21</sup> found frequency of depressive symptoms (HADS  $\geq$  8) was 42.63% in orthopaedic trauma patients. **Sagar R. et al (2021)**<sup>22</sup> found that 14.19% of the adolescents had depression in India.

Our findings revealed that 23.5% participants had poor QoL and 66.5% had average QoL. **Heidi Sivertsen et al (2015)**<sup>23</sup> also found that depressed older persons had poorer global and generic health-related QOL than nondepressed individuals. An enhance in depression severity was linked with a poorer global and general health-related QOL. **Sawant Neena S et al (2015)**<sup>24</sup> revealed that quality of life was impaired in more than 90% patients with depression. Maximum impairment was brought on by symptoms and feelings of illness, disruption of regular activities, or employment and time spent receiving treatment. **Sahoonja C et al (2020)**<sup>25</sup> found that among those with low QOL, 45.5% had moderate depression; and among those with very low QOL, 83.3% had severe depression. **Solanki HK et al (2021)**<sup>26</sup> revealed a statistically meaningful inverse correlation between the physical domain score and The BREF Quality of Life questionnaire's psychological domain score, social connection domain score, and the research participants' presence of depression.

Our study findings revealed that there was significant association between score of depression and age and gender of the participants. Our findings supported by study conducted by **Pawar Ramesh D. et al (2018)**<sup>27</sup> in which female gender was significantly associated with depression among elderly participants from rural India. **Ranjan R et al (2020)**<sup>28</sup> found that female gender and the presence of an additional medical illness were significantly associated with higher depression scores. **Singh S. et al (2022)**<sup>29</sup> also found that demographic variables and chronic illnesses like HTN & DM were significantly associated with the depression score of the participants. A contradictory findings revealed by **Coast E et al (2012)**<sup>30</sup> in which demographic variables were significantly not or very less associated with common mental disorders. **Ammati Ramesh et al (2019)**<sup>31</sup> also found that the associations between QOL scores and certain demographic factors were not statistically significant. **Vyas K & Chaturvedi D. (2022)**<sup>32</sup> also found that socio demographic variables were not associated with participant's knowledge level.

Our study findings also revealed that there was significant association between score of QoL with demographic variables of the participants such as education status and gender.

**Kumar S. et al (2014)**<sup>33</sup> found that no schooling and older age were associated with low QOL score among elderly population. **Praisly Johnson et al (2019)**<sup>34</sup> also found that QOL was significantly lower among subjects with advancing age, with no formal education and female gender. **Goyal, A. K., & Mohanty, S. K. (2022)**<sup>35</sup> also found that QoL was lower among elderly age 75 and above, females, rural residents and illiterates.

## V. Conclusion:-

Findings of our study revealed that quality of life was poor among hospitalized patient in mental hospital. Gender, educational status and age were significantly associated with depression score and quality of life of the participants.

**Limitations:** Non probability sampling technique.

**Source of Funding:** Researcher has self-financed the current study.

**Conflict of Interest:** Study was conducted without any conflicts of interest.

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