

A Comparative Study of Caregivers Burden in Relatives of Persons with Schizophrenia and Obsessive Compulsive Disorder

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ABSTRACT

Background: Schizophrenia and Obsessive compulsive disorder are associated with significant distress and dysfunction. Even the care givers are significantly affected by these illnesses. Treatment of these disorder cannot be complete till the family is also involved and dysfunction and distress be taken care of. While many studies have been done to assess the care giver burden in schizophrenia and OCD but only few have compared the burden among two illnesses. Also, none of such studies have been done from our area.

Aims and objectives: To assess the care giver burden severity among caregivers of persons with Schizophrenia and Obsessive compulsive disorder.

Material and Methods: Persons accompanying sufferers of Schizophrenia and OCD were recruited from the outpatient unit of our department. We used Care giver burden scale (CBS) to assess for the severity of burden.

Results: Total of 80 participants (40 each in Schizophrenia and OCD group) were recruited in the study. Burden on caregivers of OCD was high and comparable to that of caregivers of Schizophrenia patients. No significant difference was noted for the severity of burden among the two groups ($p=0.777$). Also being single and not being spouse or parent of the patient was also associated with higher burden.

Conclusions: Caregivers of OCD sufferers are having significant burden. Management plan must include the caregivers also, to provide the best care to the patients.

Keywords: OCD, Schizophrenia, Caregiver burden

INTRODUCTION

Schizophrenia, being a psychotic illness is associated with poor insight and loss of judgment in many of the sufferers and is considered as one of the most disabling condition among psychiatric illnesses. Family functioning is impacted in schizophrenia. [1] Obsessive compulsive disorder being a neurotic disorder is less often associated with impaired judgment and poor insight. It is generally considered less disabling than schizophrenia. [2] However, the family may be forced to be part of compulsions in OCD and family functioning can be disturbed. The

caregiver's responsibility is quite distressful and poses significant burden. [3] Several stressors exist in the family of persons with OCD. Marital discord, Sexual problems, difficulty maintain relationships, financial problems and disturbance in the routine are there to name a few. [4] Studies have been done to assess the caregiver burden in people with schizophrenia but only few studies have assessed the same in OCD. Also the tools used for such assessments have been varied and non-standardized. Schizophrenia is associated with significant caregiver burden. OCD being a neurotic disorder has traditionally been thought to

have less severe dysfunction and disruption in routine life than Psychotic illness like Schizophrenia. However, few studies have shown comparable burden of these two illnesses. So to assess and compare the caregiver burden among persons with Schizophrenia and OCD this study was done.

MATERIAL AND METHODS

The study was conducted in outpatient unit of Psychiatry Department, at a Medical College in Northern India, attached is a large tertiary care multispecialty hospital. The study design was cross sectional and data was collected from August 2019 to January 2020. Participants were relatives accompanying the patients diagnosed based on ICD-10 diagnostic criteria of Schizophrenia and Obsessive compulsive disorder in two groups. Informed consent was obtained from patient and the participating relative. Demographic variables were collected on a datasheet. Care giver burden scale was used to assess the burden of illness on participating relatives. [5] It is structured instrument with 22 items. Each item is rated on a 4-point scale (not at all, to always). This schedule measures both subjective Burden adequately, and, it has been proven to have good inter-rater reliability and face, content and criterion validity.

Data analysis was done with a standard statistical package, SPSS version 20.0. Descriptive statistics, Chi square test, student t test and Analysis of variance was used for statistical analysis

RESULTS

Mean age of the participants in Schizophrenia group was 38.95 (SD 13.496) and in OCD group 37.25 (SD 12.957). Most of the participants were spouses, 35% in the Schizophrenia group and 45% belonged to others category in OCD group. 70% of the participants were married in the Schizophrenia group and 65% were married in the OCD group. Around 30% were home makers and 30% were students in the Schizophrenia group. 55% were Homemakers and 45% were students in the OCD group. Around 55% of the participants in Schizophrenia group and 50% of the participants in OCD group belonged Middle socioeconomic status. A group comparison between the two groups revealed that groups were not significantly different for the socio demographic variables. Mean score of CBS in the Schizophrenia group was 42.100 (SD 14.326) and 44.350 (SD13.491) in the OCD group. Differences were not significant among the two groups for mean score of CBS (p=0.777). [table1]

Table1: Participant Characteristics

Variable	Schizophrenia (n=40)	OCD (n=40)	Chi-Square, Test statistics, df, p value
Relationship			0.583, d.f.=2, p=0.747
Spouse	10	14	
Parents	12	12	
Others	18	14	
Age (Mean, SD)	38.95 (SD 13.496)	37.25 (SD 12.957)	1.616, d.f.=2;p=0.04
Sex			
Male	22	14	
Female	18	26	
Marital Status			0.114, d.f.=1; p=0.736
Single	12	14	
Married	28	26	
Occupation			
Home maker	12	22	3.871, d.f.=4; p=0.424
Student	12	6	
Farmer	6	4	
Office workers	6	2	
Others	4	6	
Socio-Economic Status			
Upper	8	10	0.159; d.f.=2; p=0.924
Middle	22	20	
Lower	10	10	
Total CBS Score	42.100 (SD 14.326)	44.350 (SD13.491)	0.081, 0.777

CBS: Care giver burden Scale, OCD: Obsessive compulsive disorder

Analysis of difference in total CBS score for demographic profiles in OCD group revealed that burden was high among others category than other relatives (p=0.033). Also, burden was significantly higher than participants who were single than those who were married (p=0.001). [Table 2]

Table 2: Differences in the relatives of OCD group

Variable	Mean CBS score (SD)	Test Statics, df, p-Value
Relationship		0.164;p=0.033
Spouse	42.86 (12.642)	
Parents	36.67 (9.00)	
Others	52.43 (14.536)	
Age (Mean, SD)		0.289; p=0.215
Sex		
Male	44.860 (12.375)	
Female	44.076 (14.539)	
Marital Status		0.986;p=0.001
Single	50.428 (14.920)	
Married	41.076 (11.989)	
Occupation		1.345; p=0.389
Home maker	46.64 (15.325)	
Student	42.00	
Farmer	34.00 (14.140)	
Office workers	42.56 (15.676)	
Others	44.76 (16.788)	
Socio-Economic Status		0.876; p=0.289
Upper	41.78 (13.48)	
Middle	40.80 (16.96)	
Lower	44.82 (12.39)	

CBS: Care giver burden Scale, OCD: Obsessive compulsive disorder

DISCUSSION

The study was an attempt to systemically examine the burden of Disease on the caregivers of the sufferers of OCD and Schizophrenia. Many studies have been done on the topic in past but none to our knowledge from this area of the world, so we planned for this study.

The study showed that caregivers of the patients, with OCD experience high degree of burden. Many of the relatives reported a decreased time for self-due to engagement in care, feeling embarrassed, problems with social life, financial burden, poor support from health care facilities, deterioration in sexual life, lack of privacy, irritability, and see no escape from the situation. The domains affected in Schizophrenia group were similar with participants reporting a full time engagement in care of the suffering relatives.

In our study, socio-demographics were comparable between the two groups with regard to variables like Age, education, occupation, socio-economic status. OCD

groups had significantly higher number of female participants than Schizophrenia.

The mean score of CBS was higher for Schizophrenia group than OCD group however the differences were not statistically significant. This finding is similar to some of the earlier studies done on the subject. [6-8]

In OCD severity has been associated with greater family burden. Family has to accommodate and often be part of the compulsive ritualistic behaviour of the patient. More the family has to adapt to these ritualistic behaviours more severe the burden may get. This burden may affect their all spheres of life. [9-12]

In OCD group, for the socio demographic correlates it was found that being single was significantly more associated with increased burden than being married. It could be hypothesised that, single caregiver, has more responsibilities living with the patient alone or other caregivers who might not be engaged in any other full time responsibility than those accompanying the patient to the hospital. Also, the single participants who

accompanied the patient to the hospital could possibly be less interested in taking this responsibility. One more significant finding in this regard was significantly more burden on others category of the participants which included other relatives of the patient accompanying them to the hospital as compared to spouse and parents of the patient. It could be possible that, these were given the responsibility of accompanying the patient to the hospital by some other caregivers. So burden was higher at the time of accompanied. Also spouses and parents living with patient could be well-adjusted to the stress of living with patients than other distant relatives.

Some of the limitations of the study were a cross sectional study design may had impact on the study that participants responses were based on their current mental status and it may not reflect truly their responses. We couldn't assess the family dynamics and family functioning which could have impact on overall burden. Also, we didn't use any standardized tool for assessment of severity of schizophrenia and OCD, it could be possible that we recruited more severe patients in study groups which could make the comparison invalid, on in less severely affected patient family members. A study having larger sample size and to cover for above limitations could probably yield better results applicable to the community.

CONCLUSIONS

The study was carried out to compare the burden of care among caregivers of patients with Schizophrenia and OCD. It was a cross-sectional study. Although, burden of illness is greater among caregivers of the Schizophrenic patients, but OCD also poses similar and comparable burden on the caregivers. Finding the caregiver burden is important from management perspectives to involve the family through non pharmacological interventions to decrease their burden.

Conflict of Interests: None

REFERENCES

1. Sawant NS, Jethwani KS. Understanding family functioning and social support in unremitting schizophrenia: A study in India. *Indian J Psychiatry*. 2010;52(2):145-149.
2. Swain SP, Behura SS. A comparative study of quality of life and disability among schizophrenia and obsessive-compulsive disorder patients in remission. *Ind Psychiatry J*. 2016;25(2):210-215.
3. Albert U, Baffa A, Maina G. Family accommodation in adult obsessive-compulsive disorder: clinical perspectives. *Psychol Res BehavManag*. 2017;10:293-304.
4. Lebowitz ER, Panza KE, Bloch MH. Family accommodation in obsessive-compulsive and anxiety disorders: a five-year update. *Expert Rev Neurother*. 2016;16(1):45-53. doi:10.1586/14737175.2016.1126181
5. Zarit SH, Reever KE, Bach-Peterson I. Relatives of the impaired elderly: correlates of feelings of burden. *Gerontologist* 1980;20:649-55.
6. Thomas JK, Sureshkumar PN, Verma AN, Sinha VK, Andrade C. Psychosocial dysfunction and family burden in schizophrenia and obsessive compulsive disorder. *Indian J Psychiatry*. 2004; 46(3): 238-243.
7. Veltro F, Maglian L, Lobracc S. Burden on the relatives of patients with schizophrenia versus neurotic disorders: A pilot study. *Soc Psychiat Epidemiol*. 1994; 29(2): 66-70
8. Jayakumar C, Jagadeesan K, Verma AN. Caregiver's burden: a comparison between obsessive compulsive disorder and schizophrenia. *Indian J Psychiatry*. 2002; 44(4): 337- 342.
9. Verma M, Sinha UK. Burden of care and stress in family members of patients suffering from obsessive compulsive disorder. *Delhi Psychiatry J*. 2013; 16(2): 375-379
10. Black DW, Gaffney G, Schlosser S, Gabel J. The impact of obsessive compulsive disorder on the family: preliminary

- findings. *J NervMent Dis.* 1998; 186(7): 440–442.
11. Calvocoressi L, Lewis B, Harris M, Trufan SJ, Goodman WK, Mc Dougle CJ, et al. Family accommodation in obsessive compulsive disorder. *Am J Psychiatry.* 1995; 152(3): 441–443
12. Amir N, Freshman M, Foa EB. Family distress and involvement in relatives of obsessive compulsive disorder patients. *J Anxiety Disord.* 2000; 14(3): 209–217.
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