

TITLE OF THE ABSTRACT: QUALITY OF LIFE AND EXPLANATORY MODELS IN PATIENTS WITH BIPOLAR AFFECTIVE DISORDER

DEPARTMENT:PSYCHIATRY

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OBJECTIVES:

- To assess Quality of life (QOL) & Explanatory Models (EM) of illness in Bipolar Affective Disorder patients (BPAD)
- To assess relationship between QOL, EM and selected patient variables: age, gender, marital status, education, religion
- To assess relationship between QOL, EM and selected disease variables: nature of first episode, presence of psychotic symptoms, duration of illness, number of episodes, rapid cycling, presence of comorbidities, family history of mental illness, medication cost and side effects, suicide attempts.

METHODS

Consecutive out-patients with a diagnosis of affective disorder who meet eligibility criteria will be rated on the Hamilton Rating Scale for Depression and Positive and Negative Symptom Scale. Beliefs about illness will be recorded using Short Explanatory Model Interview (SEMI) and quality of life will be recorded using the WHO Quality of Life-BREF (WHOQOL-BREF). Socio-demographic details will be recorded. Using SPSS for Windows (version 16.0.1), mean and standard deviation will be calculated for continuous variables and frequency distributions for categorical data. The chi square test and the Student's t-test will be used to assess the significance of associations for categorical and continuous variables respectively.

RESULTS

Quality of life was found to be poor in Bipolar Affective Disorder. Most patients held multiple and diverse explanatory models of illness causation. Quality of life was found to be associated with educational qualification, socioeconomic status and explanatory models held, as well as health seeking behavior.