TITLE OF THE ABSTRACT: QUALITY OF LIFE AND EXPLANATORY MODELS IN PATIENTS WITH SCHIZOPHRENIA

DEPARTMENT: Psychiatry

NAME OF CANDIDATE: Jibi Achamma Jacob

DEGREE AND SUBJECT: MD, Psychiatry

NAME OF GUIDE: Anju Kuruvilla

OBJECTIVES: This study aims to assess the quality of life and explanatory models in patients with schizophrenia, and measure the associations between these factors and their association with clinical and socio- demographic characteristics.

METHODS: Consecutive patients with schizophrenia attending the outpatient clinic were recruited. The Positive and Negative Symptom Scale was used to rate symptom severity. The Tamil versions of the World Health Organization Quality of Life-Brief (WHO QOL-BREF) and the modified Short Explanatory Model Interview (SEMI) were administered to assess quality of life and explanatory models respectively. Socio-demographic and clinical details of patients were recorded. Descriptive statistics were employed to describe continuous variables, frequency distributions were obtained for categorical variables; student t -test was used to compare continuous variables between groups and Pearson's correlation coefficient was employed to assess associations between two continuous variables.

RESULTS: Quality of life was affected in every domain. Among sociodemographic factors, a higher quality of life score was found in those with a better socioeconomic background and in single persons as compared to currently married individuals. Of the clinical features, those who did not abuse substances had a higher score. The negative, general psychopathology and total PANSS scores were negatively correlated with the WHoQOL- BREF scores. A variety of explanatory models were held by the patients. Most of them were afraid of the symptoms of the illness in addition to concerns about their health, future and family. While the majority of patients reported that they would get help from medical personnel, a large group also believed that religious and spiritual factors would also help. Quality of life scores for those who did not perceive themselves to have a problem was significantly higher than for other respondents.