PREVALENCE OF BODY DYSMORPHIC DISORDER & PSYCHIATRIC COMORBIDITY IN PATIENTS ATTENDING COSMETOLOGY OUTPATIENT DEPARTMENT IN A GOVT TERTIARY CARE INSTITUTION IN TAMILNADU

INTRODUCTION:

Body Dysmorphic Disorder (BDD) is a disorder characterized by distressing or impairing preoccupation with slight or imagined defects in one’s physical. All around the world in the past 100 years, BDD has been found to be not so uncommon in clinical presentations.

An Italian physician in 1891 Enrico Morselli called this disorder as “dysmorphophobia”. BDD is underrecognized even today. This is because there are patients with BDD who suffer with substantial impairment in functioning and other comorbidities and they do not seek medical help.

Patients with BDD report to doctors that they are ugly, unattractive, malformed, abnormal but in the contrary most of them look normal in reality and sometimes strikingly beautiful too. The patients perceive certain abnormalities concerning to various parts of the body namely skin (e.g. scar because of acne), hair (e.g., excessive facial hair or balding), nose (e.g., shape and size). These abnormalities exist as preoccupations in the patients which keep on torment them all day long. The preoccupations are accompanied by repetitive behaviours or mental acts. They are mirror checking, skin picking, excessive grooming, comparing with others etc. Because of this patients feel anxious when
going out for recreation. This study aims to understand the prevalence of BDD in patients attending dermatology outpatient department and associated depression, anxiety, psychosocial functioning.

METHODS:

A cross-sectional descriptive study was carried out in male and female patients attending cosmetology Outpatient Department of Government Stanley Medical College. Taking prevalence as 6.7% and a error of 6% sample size was calculated and found to be 70. 85 patients were taken up for the study. Consecutive sampling was the method of sampling. Data was collected using the following tools; A structured Performa to collect the socio demographic details and clinical profile; Body Dismorphic Disorder Questionnaire, Dysmorphic Concern Questionnaire, BDD YBOCS, Brown Assessment of Beliefs Scale, SF 36, Hospital Anxiety and Depression Scale. Descriptive statistics and frequency for calculation of mean and median was done. Chi square test was used for comparing between sociodemographic variable and prescence of bdd, sociodemographic factors and disease factors with presence or absence of anxiety and depression. Correlation analysis was done to find out the relation between anxiety and depression and disease factors using SPSS 20.
RESULTS AND DISCUSSION:

Among the 85 people taken for the study, 41.1% (n=35) had BDD diagnosed with administration of DCQ, BDDQ, YBOCS-BDD.

The age range of patients with BDD ranges from 17 to 45 with a mean age of 23.7. 20% (n=7) patients were less than 18 years of age, 20(57.1%) patients belong to the age group of 18-25, 2 (5.7%) people belong to the age group of 26-35, 6(17.1%) are in the age group of 36-45 years. Of the 35 patients with BDD, 26 male(74.3%), 9 female (25.7%). Among the 35 patients with BDD, 6 patients (17.1%) are married, 28(80%) are unmarried, 1 patient (2.9%) was a divorcee. Out of the 35 patients with BDD, 1 patient each (2.9%) had primary education and postgraduate qualification. 4(11.4%) had secondary education, 13(37.1%) had higher-secondary education, 16 (45.7%) were graduates. Among the 35 patients with BDD, 62.9% (n=22), were students, followed by 17.1%(n=6) did semiskilled work, 14.3%(n=5) did highly skilled work and 5.7%(n=2) did skilled labour. Those 35 patients who had BDD, were administered HADS-A questionnaire and of them, 17 patients (48.6%) had anxiety. Of which 5 people (14.3%) had borderline abnormality and 34.3%(n=12) have severe abnormality in HADS-A score. Out of the 35 patients who had BDD, 17 (48.6%) had anxiety and among the 50 patients who did not have BDD, none were suffering from anxiety. There is more anxiety in those who are suffering from BDD and the difference is statistically significant with p value <0.001. Those 35 patients who had BDD, were administered HADS-D.
questionnaire and of them, 54.3% (n=19) had no depression, 16 patients (45.7%) had depression. Of which 10 people (28.6%) had borderline abnormality and 17.1%(n=6) have severe abnormality in HADS -D score. Out of the 35 patients who had BDD, 16(45.7%) had depression and among the 50 patients who did not have BDD, none were suffering from depression. There is more depression in those who are suffering from BDD and the difference is statistically significant with p value <0.001.

CONCLUSION:

In the present study, it was found that BDD was more common in patients attending hospital and comorbidity of anxiety and depression was found to be considerably higher in patients with BDD than those without BDD.

Patients with BDD also had notably poor psychosocial functioning in SF36.

KEYWORDS:

BODY DYSMORPHIC DISORDER, DYSMORPHOPHOBIA, ANXIETY, DEPRESSION, PSYCHOSOCIAL FUNCTIONING