
Mental Disorders in A Sample of Children From Baghdad

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Abstract

Background

Many researches in the past 15 years have shown that recent life events are associated with an increased psychiatric morbidity among children. Assessment of mental health of Iraqi children became increasingly important, particularly after the devastation yielded by the three successive wars and the economic sanction.

Objective: To describe the impact and pattern of psychiatric morbidity in Iraqi children.

Methods: This is an out patient-based prevalence study carried out in Al- Yarmouk teaching hospital/Baghdad/Iraq during a two years period (July 2001-July 2003). Out of the 11452 patients attending the hospital; 108 were children (4-12 years) that represent the studied sample. All children were exposed to a semi-structural interview and were assessed by social workers and psychiatrists.

Results: Emotional disorders were the most common mental problems (30%) followed by epilepsy (18%) and depression (13%).

Conclusion: The findings suggest that mental condition of Iraqi children is a problem that needs to be carefully assessed and dealt with.

Keywords: Mental disorders, children, Iraq

Introduction:

Children have their own disorders and should not be seen as small adults. Child psychiatric disturbances are defined as an abnormality in at least one of the three areas: emotions, behavior or relationship^[1]. Researches in the last 15 years had shown that life events are associated with an increased psychiatric morbidity among children^[2]. Children experiencing conflict at close range are invariably forced to endure conditions of severe hardship and stress leading to long-term psychological manifestation. Psychological symptoms due to exposure to war related violence had been recorded as early as World War II in Europe^[3]. Exposure to violence in children is a major concern for the parents, school personnel, as well as the general population.^[4, 5, 6] It is estimated that around 10% of all children have mental disturbances with serious impairment at some time during their childhood^[7]. The study was undertaken to describe the impact and pattern of psychiatric morbidity in a sample of children from Baghdad city.

Methods:

This hospital-based cross sectional study was carried out in Al-Yarmouk Teaching Hospital which is one of the main teaching hospitals in Baghdad (the capital). The sample was a consecutive one by pooling all the patients attended

the hospital during the study period. All children were exposed to a semi-structural interview using a questionnaire checklist that inquires about the presence of mental problems and relevant details including family history of mental disorders. The questionnaire also includes some socio-demographic elements such as number of children in the family, father job, and psychosocial stress as reported by the caregivers in addition to the source of referral. All children were assessed by social workers (social assessment) and by psychiatrists (psychiatric assessment), Diagnostic and Statistical Manual of mental disorders- fourth edition-Text revision (DSM-IV-TR) criteria were used in the assessment.

Results:

Among the 11452 psychiatric patients attended the psychiatric outpatient department, 108 (1%) were children (4-12 years of age); 62 (57%) boys and 46 (43%)

girls. The socio-demographic characteristics of the total sample are shown in Table 1. Emotional disorders were the most common problem (30%) followed by Epilepsy (18%) and depression (13%). It was found that emotional disorders and depression in girls were significantly higher than boys, while in boys, enuresis was significantly higher (Table 2).

Table 1: General characteristics of the sample

Family and demographic characteristics		NO.	%
NO. of children in the household	<4	44	40.7
	4-6	51	47.2
	>6	13	12.1
Family history of mental disorders	Yes	18	16.7
	No	90	83.3
Psychosocial stress	Yes	19	17.6
	No	89	82.4
Fathers occupation	Professional/skilled	36	33.3
	Semiskilled	42	38.9
	Unskilled	18	16.7
	Unemployed	12	11.1
Source of referral	School	41	38
	Pediatrician	30	27.8
	Family	18	16.7
	General practitioner	16	14.8
	Court	2	1.8
	Other	1	0.9

Table 2: Mental disorders in relation to sex

Diagnosis	Boys	Girls	Total	%
Emotional disorders*	10	23	33	30.56%
Epilepsy	15	5	20	18.52%
Depression	2	12	14	12.92%
Stuttering	6	2	8	7.4%
ADHD**	6	2	8	7.4%
Enuresis	6	0	6	5.5%
Conduct disorders	4	1	5	4.63%
Psychosis	4	1	5	4.63%
Learning disorders	3	0	3	2.78%
Tic disorders	3	0	3	2.78%
Autistic disorders	2	0	2	1.86%
Munchausen's syndrome by proxy	1	0	1	0.93%
Total	62 (57.4%)	46 (42.6%)	108	100%

*Emotional disorders include (General anxiety state (10), Post traumatic stress disorders (PTSD) (8), Separation anxiety (8), Somatisation disorders (4), Specific phobia (2), Obsessive-compulsive disorders (1).

**ADHD: Attention Deficit Hyperactive Disorders.

Discussion:

Nearly one in five children and adolescents will have an emotional and behavioral disorder at some time during their youth regardless of where they live^[8].

In the absence of a clear referral system, and reliable data, one can not be sure of how representative a sample is. However, the current study can be used as an indicator for the extent of the problem and its impact on children development. Most studies have shown prevalence rates between 10-20% depending on the criteria for deviance. WHO; division of mental health reported that 3-12% of pupils have mental disorders^[9]. Other studies of preschool children have found that about 20% of children have significant behavior problem^[10]. This percentage of mental health problems in children (1% of the total mental outpatient unit attendants) could be an underestimation of the real problem related to the poor identification by ignorant parents and unaware schoolteachers due to lack of knowledge and being under stress, or sometimes the parents feel that there is something wrong but they do not seek help may be because mental health problems still considered as a social stigma in our culture particularly for females.

Emotional disorders were the most common (30%), this is in agreement with Western studies^{11,12} while in England and Wales it comes in the second order after the conduct disorder^[13], however, in all studies they are common in girls. This reveals a high tolerance to the unacceptable behaviors compared to other cultures.

Epilepsy was the second common disorder, this reflects the fear of the parents from this problem and their urge to treat it. Its superior order to depression may be explained by that parents, schoolteachers and others can easily identify it. However, its prevalence in school-age children in UK is 4-5 per 1000^[14].

Depression constituted 12.9% of the sample in this study. This percentage was higher than that seen in the five school-based studies using the Beck Depression Inventory report mean scores ranging from 6 to 10.3 (average 8.6)^[15,16]. Again in all studies it was more common in girls. DSM-IV-TR reported that the prevalence of Stuttering in pre-pubertal children is 1%^[17]. This warrants further studies to dig for the effect of wars, trauma and genetic factors.

Also there was a relatively high percentage (7.4%) of attention deficit hyperactive disorders (ADHD) more than that reported in the DSM-IV-TR (3-7 %)^[17]. This may well be due to an over-diagnosis because we did not do a real prevalence estimation but -rather- a percentage from a mental patients sample for the denominator was the outpatient attendants and not the general population.

The Isle of Wight study in the United Kingdom found the prevalence rate of enuresis to be 10% among 5-7 year old children and 5% among 9-10 year old¹⁸ while an earlier study carried out in the United Arab Emirate (UAE) -which is close to our culture- reported a prevalence rate of 5.5% among 6-12 years age using a questionnaire survey^[19].

The most recent study carried out also in the UAE reported 8% to have bedwetting at least once per week. The higher prevalence of the enuresis in UK than our finding (5.5%) may be due to the fact that the parents are under-reporting the problem may be to avoid having a social stigma. The enuresis in boys was significantly higher than in girls.

This is consistent with a similar study in the UAE^[20]. The prevalence of the conduct disorder appears to be increasing over the last decades. In this study it is consistent with some (USA) studies that reported rates ranging from less than 1% to more than 10 %^[21]. Yet, the results may be under-reported because many Iraqis consider the conduct problems as more tolerable.

Schizophrenia and affective psychosis are rare in childhood^[22, 23]. The diagnosis was according to DSM-IV depending mainly on the presence of disorganized behavior and social isolation, it was declining rapidly in scholastic performance without obvious general medical conditions.

Estimates of the prevalence of learning disorders range from 2% to 10% depending on the nature of ascertainment and the definition applied^[17]. This is consistent with the study results.

Unfortunately, this finding was under-reported by parents because Iraqi parents today use to push their children to work to improve their economic status.

In this study, learning disorders were reported in boys only, may be due to the small sample and / or the special care given exclusively to boys in our society.

The prevalence of Tourettes Disorder is obviously related to age. More children (5-30 per 10,000) are affected than adults (1-2 per 10,000)²⁰. Tic disorders (2.7%), Autistic disorders (1.86%) and Munchausen's syndrome by proxy (0.9%) were reported only in boys. Again this may be explained by the small sample size in this study.

Referrals from the schools were the highest (38%) followed by pediatrician (27.8%), family (16.7%), and general practitioner (14.8%). This is an interesting finding that deserves further exploration. This order of referral may be explained according to who was catching first the presence of the mental disorder in the child. Schoolteachers and pediatricians are usually the first and often the only contacts, they are the keystone in detecting mental problems in children so it is important for them to have some basic information about what

problems they have to expect and should -actively- look for.

It can be concluded that the effects of the war played an important role in the occurrence (and exacerbation) of mental problems in children, the study findings suggest that the mental condition of Iraqi children is a problem needs to be carefully assessed among the general psychiatric patients, the severe mental disorders may cause them serious problems for years to come or may endure for their entire lifetime, they are affected in their emotional life by grief, sadness and desperate fear. Child Psychiatric Centers are seriously recommended.

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