

Socio-Demographic and Clinical Determinants of Psychiatric Co-Morbidity in Persons with Essential Hypertension Attending the University of Port Harcourt Teaching Hospital.

Type of Article: **Abstract**

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BACKGROUND

Essential hypertension, a non-communicable disease, is assuming an epidemic dimension, of the nature of a communicable condition. A number of socio-demographic and clinical variables may however serve as key determinants of the extent to which it is associated with psychiatric comorbidity.

AIM

The aim of this study, therefore, was to determine the socio-demographic and clinical factors that may influence the level of psychiatric co-morbidity associated with essential hypertension patients attending the general out-patient clinic of UPTH.

METHODOLOGY

Following ethical approval from the appropriate committee of the hospital and informed consent from the participants, 360 subjects making up the study group were recruited based on the study's inclusion and exclusion criteria. A pilot study was carried out. Subjects were further administered with the study's instruments including the socio-demographic/clinical questionnaire, GHQ-12, and WHO Composite International Diagnostic Interview (WHO CIDI). The socio-demographic/clinical questionnaire and GHQ-12 were self-administered while the WHO CIDI was based on interview by the researcher. The data were analyzed using the SPSS version 16 statistical package. Confidence interval was set at 95% while P- value of less than 0.05 was considered statistically significant.

RESULTS

The study found a prevalence of psychiatric comorbidity of (52.2%) among the hypertensive subjects. Depressive illness had the highest

prevalence of 47(29.4%). Among the study group, there was no significant relationship between the presence of psychiatric comorbidity and age group ($p=0.350$), gender ($p=0.22$), level of education ($p=0.43$), income class ($p=0.81$) and occupation (0.45). Persons who were married ($p=0.004$), divorced ($p=0.002$), separated ($p=0.001$) and widowed ($p=0.004$) were significantly more likely to have a psychiatric co-morbidity than the single ($p=0.51$) persons. Also, those who reacted with either 'very sad' or a 'wish to die' when they received the diagnosis of the medical conditions were more likely to have psychiatric comorbidity ($p=0.001$). There was also no significant relationships between age of onset of illness ($p=0.60$), duration of illness ($p=0.73$), duration of treatment ($p=0.82$), and self-stigma ($p=0.15$).

CONCLUSION

The findings of this study support the impression that essential hypertension is a chronic debilitating illness, associated with psychiatric co-morbidity, that are largely significantly influenced by a number of socio-demographic and clinical factors. The results support the call that the management of patients with essential hypertension should include attention to, not only their mental health status, but also the psychosocial and other clinical factors they may present with in order to enhance the quality of care.

Keywords: Socio-Demographic and Clinical Determinants; Essential Hypertension; Psychiatric Co-Morbidity.

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