

ATTITUDES OF POSTGRADUATE RESIDENT DOCTORS TOWARD PSYCHIATRY

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Introduction

A significant proportion of patients presenting to the general practitioner and other non-psychiatric specialists have been shown to have a high prevalence of underlying or co-morbid psychiatric conditions, which may be presented as somatic complaints. A study by Hays et al., on the prevalence of depression among patients attending outpatient general medical clinics reported that depression was the second most common chronic disorder among these patients¹. The Epidemiological Catchment Area (ECA) study also revealed that 58% of patients with mental disorders visited a primary care physician during the preceding month. Although many of the visits were for medical problems, 15-20% was on account of psychiatric problems. Furthermore, the primary care physicians were more inclined to focus on the physical symptoms and to minimize the mental disorder².

The available number of mental health professionals to cater for the mental health needs of Nigerians is grossly inadequate, with a ratio of one psychiatrist to one million Nigerians³. There are many suggestions on how best to address these personnel shortfall, including suggestions to improve recruitment and to attract those psychiatrists based outside the shores of the country to return back home⁴. However, very little attention has been paid towards improving consultation-liaison services between psychiatrists and general practitioners, and other specialist colleagues, as a way of enhancing the identification, adequate referral and expert care of those patients with mental illnesses, who may have sought care in general hospitals or other specialties.

The successful utilization of consultation-liaison psychiatric services as a means of improving mental health services however, relies almost exclusively, on the close collaboration of colleagues working in

ABSTRACT

Background: A significant proportion of patients presenting to general practitioners and non-psychiatric specialists have been shown to suffer from underlying or co-morbid psychiatric conditions. The detection rate and appropriate treatment or referral of such psychiatric conditions varies widely depending on the attitude, expertise and level of familiarity of the physician with psychiatry. A negative attitude towards psychiatry often precludes efforts to understand and manage such disorders thus worsening the hidden burden of mental illness.

Objectives: To evaluate the attitudes of postgraduate resident doctors toward psychiatry.

Method: A cross-sectional survey on a convenience sample of 100 postgraduate resident doctors from the University of Maiduguri Teaching Hospital was conducted using a modified version of the self-rated Kumar 12-item questionnaire and a brief socio-demographic questionnaire.

Results: The subjects comprised of 74.3% males and 25.7% females, with age ranges of 25-45 years and mean of 32.6 ± 4.1 . The majority (95.7%) opined that psychiatry was a valid and important specialty, while 80% of the respondents had encountered psychiatric cases in their respective specialties. Furthermore, 91.8% of the respondents appreciated that psychosocial factors may influence the presentation, course and outcome of physical illnesses.

Conclusion: Postgraduate resident doctors in Maiduguri displayed a high level of awareness about psychiatry and its relevance. This positive approach needs to be built upon via the strengthening of reciprocal consultation-liaison services, in order to enhance holistic care for patients.

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Keywords:

Postgraduate resident doctors,
 attitude, psychiatry

the various specialties. A study from the United Kingdom evaluated the recognition and management of mental disorders by physicians and surgeons, and reported that the attitude of the clinicians towards psychiatry was significantly associated with outcome. Clinicians with a good working knowledge of mental disorders also reported favorable attitudes toward psychiatry and were willing to refer patients for psychiatric evaluation, when necessary^{5,6}. The Authors concluded that it is the mental health literacy (knowledge, beliefs and attitude about psychiatric morbidity) of clinicians that is most important in deciding whether a patient requires a psychiatric consultation.

There is a dearth of studies from Africa on this subject and the few available reports were conducted to evaluate the attitudes of medical students towards psychiatry^{7,8}.

This study aims at evaluating the attitudes of postgraduate resident doctors towards psychiatry in Maiduguri, northern Nigeria.

Method

A cross-sectional survey on a convenience sample of 100 postgraduate resident doctors from the University of Maiduguri Teaching Hospital (UMTH), Maiduguri was conducted using a modified version of the self-rated Kumar et al. 12-item questionnaire and a brief socio-demographic questionnaire. The questionnaire comprised of questions covering attitudes to psychiatry, assessment of psychological problems, referral to psychiatrists and treatment of psychological disorders.

Ethical clearance was obtained from the Ethics and Research Board of the UMTH, and informed consent was obtained from the individual doctors, after explaining the study objectives to them.

The data obtained was cleaned and subjected to descriptive statistical analysis using the SPSS, version 11.0 software.

Results

Seventy out of the 100 doctors recruited for the study, returned the completed questionnaires, indicating a response rate of 70%. Two doctors (2%) refused participation, 12 (12%) did not answer the questions, 3 (3%) lost the questionnaires and 13 (13%) failed to return the questionnaires.

The respondents from seven specialties included 52 (74.3%) males and 18 (25.7%) females. They were aged between 25 and 45 years with a mean age of 32.6 ± 4.1. See Table 1.

The majority of the respondents (80%) had encountered psychiatric cases in their respective specialties. All the respondents with previous

encounters with psychiatric cases indicated that they constituted less than 20% of the average patients they routinely cared for. See Table 2.

Fifty-nine respondents (84.3%) of the respondents were aware of other treatment modalities apart from drugs, in the care of patients with psychological problems, with greater awareness for psychotherapy and counseling. See Table 3.

Fifty-six (91.8%) of the respondents were of the opinion that psychosocial factors influence the presentation, course and outcome of physical illness, while 95.7% believed psychiatry was a valid and important discipline. See Table 4.

TABLE 1: Socio-demographic characteristics of the respondents

Variable	Frequency	(%)
Gender		
Male	52	74.3
Female	18	25.7
Total	70	100.0
Age		
20-29	17	24.3
30-39	50	71.4
40+	3	4.3
Total	70	100.0
Speciality		
Internal medicine	23	32.9
O & G	12	17.1
Ophthalmology	2	2.9
Paediatrics	6	8.6
Radiology	7	10.0
Surgery	15	21.4
General Practitioner (Family Medicine)	5	7.1
Total	70	100.0

Table 2: Encounter with, treatment and referral of psychological problems

Statement	Frequency	(%)
Do you encounter psychiatric cases?		
Yes	56	80.0
No	14	20.0
Total	70	100.0

If 'Yes' what %?		
Less than 5	37	66.1
5-10	15	26.8
10-20	4	7.1
Total	56	100.0
Do you treat them?		
Yes	33	58.9
No	23	41.1
Total	56	100.0
Do you refer them?		
Yes	47	83.9
No	9	16.1
Total	56	100.0

Table 3: Treatment options available apart from drugs

Treatment	Frequency	%
Psychotherapy	26	44.0
Counselling	16	27.1
Behaviour therapy	3	5.1
Electroconvulsive therapy	6	10.2
Occupational therapy	1	1.7
Social Therapy	4	6.8
Religious Therapy	3	5.1
Total	59	100.0

Table 4: Knowledge and attitudes of psychosocial care and treatment of psychological problems

Statement	Frequency	%
Do you prescribe psychotropic medications?		
Yes	32	45.7
No	38	54.3
Total	70	100.0
Are there significant psychological factors affecting presentation, course and outcome of physical illness?		
Yes	56	91.8
No	5	8.2
Total	61	100.0
In your opinion is psychiatry a valid medical discipline?		
Yes	67	95.7
No	3	4.3
Total	70	100.0
If 'No' under which specialty		
Internal Medicine	2	66.7
Neurology	1	33.3
Total	3	100.0
In your opinion should psychiatry be taught in undergraduate MBBS course?		
Yes	67	95.7
No	3	4.3
Total	70	100.0

Discussion

The response rate of 70% obtained in this study, compares favourably with similar studies from Saudi Arabia (76.5%)⁶, Chile (73.5%)⁹ and Ireland (73.3%)¹⁰ respectively. A possible reason for not recording much higher response rates in this and other cited studies may be related to the usually busy schedules of doctors, who may therefore, not be inclined towards filling out questionnaires.

Some positive findings can be deduced from this study. Firstly, the postgraduate resident doctors in this study setting have a positive and favorable impression of psychiatry. This finding corroborates similar reports in the literature^{9,10}, though it also disagrees with some others which reported a preponderance of negative attitudes toward psychiatry^{5,6}. However, all the studies cited had similarly small sample sizes, ranging from 70 to 135 and they were all single hospital studies. Therefore, the conflicting results may be attributable to several factors including the respectability and integration of the psychiatrists in the individual hospitals with their other colleagues from other specialties. A large scale, multi-centre study may be required to conclusively address this issue and identify relevant correlates.

The clinical implication of the positive attitude to psychiatry in this study stems from the relationship between the attitudes reported in the studies and a willingness to refer patients for psychiatric evaluation. Those studies reporting negative attitudes towards psychiatrists also noted a lack of willingness to refer or collaborate with psychiatrists in the management of their patients, even when indicated^{5,6}. Conversely, the studies reporting a positive attitude also indicated an appreciation of the need for psychiatric referrals and collaborations when necessary^{9,10}.

Secondly, the recognition of the importance of psychosocial factors, which may influence the presentation, course and clinical outcome of

In your opinion should there be a separate paper (theory/clinical) of psychiatry during the undergraduate examination?		
Yes	29	41.4
No	41	58.6
Total	70	100.0
In your opinion should psychiatry be practiced in ... separate psychiatric setup?		
Yes	40	58.8
No	28	41.2
Total	68	100.0
In your opinion should psychiatry be practiced in ... general medical setup?		
Yes	33	51.6
No	31	48.4
Total	64	100.0
If 'Yes' under a separate department (specify)		
integrated with internal medicine	8	50.0
Neurology	1	6.3
Psychiatry	7	43.7
Total	16	100.0
In your opinion should a psychiatrist be posted to a primary health care centre?		
Yes	41	58.6
No	29	41.4
Total	70	100.0

physical illnesses, bodes well for the future of consultation-liaison psychiatry in this environment. Psychosocial interventions have been reported to reduce the length of hospital stay in medical and surgical in-patients⁵.

CONCLUSION

The high level of awareness about psychiatry and its relevance in the management of patients in general medical and surgical settings in this environment is noteworthy. However, there is the need to consolidate on this positive approach by strengthening avenues for reciprocal consultation-liaison services, in order to enhance holistic care for patients.

Acknowledgement

We gratefully acknowledge the postgraduate resident doctors at the University of Maiduguri, Teaching Hospital for completing the questionnaire.

REFERENCES

1. Hays RD, Wells KB, Sherbourne CD et al. Functioning and well-being outcomes of patients with depression compared with chronic general medical illnesses. Arch Gen Psychiatry. 1995; 52: 11-9.	5. Morgan JF, Killoughery M. Hospital doctors' management of psychological problems- Mayou & Smith revisited. British Journal of Psychiatry. 2003; 182: 153-157	8. Ndeti DM, Khasakhala L, Ongecha FO, et al. Attitudes towards psychiatry: A survey of medical students at the University of Nairobi, Kenya. Academic Psychiatry. 2008; 32:154-159.
2. Mayou R, Smith EBO. Hospital doctors' management of psychological problems. British Journal of Psychiatry. 1986; 148: 194-197	6. Alhamad AM, Al-Sawaf MH, Osman AA et al. Differential aspects of consultation-liaison psychiatry in a Saudi hospital. II: knowledge and attitudes of physicians and patients. Eastern Mediterranean Health Journal. 2006; Vol. 12, Nos. 3/4: 324-330.	9. Gonzalez M, Calderon J, Olguin P et al. In the general hospital: a doctors' perception survey. Eur J Psychiat. 2006; Vol. 20, No 4: 224-230.
3. Gureje O. Revisiting the national mental health policy for Nigeria. Archives of Ibadan Medicine, International Journal of Medical Science. 2003; 4(1): 2-4	7. Udofia, O., Ekpe, E. E., Adebushi, A.O. Attitudes of medical students to psychiatry: Impact of change in duration of psychiatric clerkship from two to four weeks. Proceedings of the Annual Conference of the Association of Psychiatrists in Nigeria. 2000; 122-125	10. Agboji H. Perception of psychiatry and consultation-liaison psychiatric services by non-psychiatric hospital doctors. 2009. Paper presented at the Annual Conference of the Irish College of Psychiatrists. Available online from: http://www.irishpsychiatry.ie/pdf/Abstract%20No%2020.pdf
4. Gureje O, Hollins S, Botbol M et al. Report of the WPA Task Force on brain drain. World Psychiatry. 2009; 8(2): 115-118.		