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## Evaluation of Depression, Anxiety and Stress among Spouces of Patients with Alcohol Dependence Syndrome

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Article Information	ABSTRACT
Received: April 25, 2023 Accepted: May 26, 2023 Published: June 27, 2023 Keywords: Anxiety, Alcohol.	<b>Background:</b> Alcoholism is a significant problem in India that have a deleterious impact on the functioning of spouse. Alcoholism is chronic progressive and often fatal disease. It is a primary disorder and not a symptom of other disease or emotional problems. Alcohol dependence effect every type of cell in the body, including central nervous system. The wives of alcoholics undergo intense trauma and stress in their domestic environment which brings about major psychological problems like high levels of anxiety, depression, neuroticism, and poor self-esteem. Domestic violence, emotional violence, and financial violence are some of the frequently occurring and well-recognized problem faced by wives of alcoholics.
	<b>Aim:</b> To assess association of Depression, anxiety and stress In wives Of Patient With Alcohol Dependence Syndrome
	<b>Objective:</b> To evaluate association of Depression, anxiety and stress In wives Of Patient With Alcohol Dependence Syndrome
	<b>Settings and Design:</b> The study was conducted on psychiatric inpatients admitted in Geetanjali Medical College and Hospital, Udaipur between December 2020, and December 2021.
	<b>Materials and method:</b> Cross-sectional, observational, descriptive, analytical (comparative), clinical study. Applying a consecutive sampling, the study consisted of 50 wives of alcohol Sevirity of alcohol dependence was done based on SADQ (Sevirity of Alcohol dependence Questionnaire)
	<b>Results:</b> Quality of life of wives of patients diagnosed with alcohol dependent syndrome is directly proportional to their severity scoring.
	<b>Conclusion:</b> depression, anxiety and stress level of wives co relates with severity level of consumption of alcohol by the patients. depression relates more severely than anxiety and stress.

#### Introduction:

Depression, anxiety, stress among addicts can provide the situation for disturbing the mental balance of their wives. It should also be noted that alcohol abuse affects users' mood and leads to the increase of anxiety, depression, and paranoia. These side effects engage the consumers and also affect their wives. Drug abuse may intensify aggressive behaviour, child abuse, impulse control disorder, and judgment disorder. Results of a related studies showed that addicts' spouses were more prone to mental disorders. It leads to impairment in the relationship, financial stress, and a general disruption of normal life, leading to strain for spouses akin to a state of burnout.

213

A cross sectional study in Iran demonstrated that spousal drug dependence was a common predictor for anxiety and depression among addicts' spouses. The dependence on alcohol among heads of households brings different reactions of family members. Few studies evaluated the psychodynamic structure of the wives of alcohol addicts and their defence mechanisms. Several studies show that most alcohol dependent patients have concomitant psychiatric disorders.

Roya Noori et al. (2013) showed that women who identified with a history of suicidal ideation and attempt were younger, had a shorter marital duration, had a more extensive history of drug use, were more likely to be abused by their spouse, and had higher anxiety and depression scores than their counterparts. Suicidal ideation predictors included a personal history of drug use. The findings of this study showed that a personal history of drug use, an elevated anxiety score, and depression and exposure to physical abuse by their spouse may act as predictors of suicidal ideation or attempt in women with a drug user spouse.

Roya Noori, Firoozeh Jafari , Babak Moazen, Hamid Reza KhoddamiVishteh, AliFarhoudian, (2015) conducted a study on Evaluation of Anxiety and Depression Among Female Spouses of Iranian Male Drug Dependents to evaluate the associated parameters of anxiety and depression among female spouses of male drug dependents. Findings of the present study demonstrate that spousal drug dependence and lower monthly income were common predictors of anxiety and depression among spouses of drug dependents in Iran, while older age, shorter marital duration and lower educational level were predictors of depression.

Mohammadkhani, Forouzan SA, Delavar B.(2010) reported that disorders such as depression, interpersonal sensitivity, anxiety, hostility paranoid ideation, social phobia and psychotics were much commonly seen in women with addicted husbands. In general, family plays a crucial role in the prevention and treatment of substance abuse and, given the high prevalence of mental health and social problems (anxiety, depression, aggression and interpersonal sensitivity) in wives of addicted husbands, checking the psychological and social status of these women is very important.

Thus, alcohol consumption affects mental health as of Depression, Anxiety, and Stress in spouse of patients with alcohol addict husband based on Severity of Alcohol dependence.

#### Aims and Objectives

Aim: To assess association of Depression, anxiety and stress In wives Of Patient WithAlcohol Dependence Syndrome.

#### **Objectives of the Study:**

To evaluate association of Depression, anxiety and stress In wives Of Patient WithAlcohol Dependence Syndrome.

#### MATERIAL AND METHODS

**Source of data:** The study was conducted on psychiatric inpatients admitted in Geetanjali Medical College and Hospital, Udaipur between December 2020, and December 2021.

**Methods of collection of data:** After obtaining approval from the Institutional Research Review Committee and Ethics Committee, patients who satisfy the following criteria constituted the study population.

#### **Inclusion criteria**

- ✓ Male patients aged 18 years and above.
- ✓ Patients consuming alcohol.
- ✓ Each subject must have a level of understanding sufficient to agree to all required

assessments, examination and informed consent document.

#### **Exclusion criteria**

- Major/serious, unstable illness including hepatic, renal, gastroenterologic, respiratory, cardiovascular (including ischemic heart disease), endocrinologic, oncologic, neurologic, immunologic, or haematologic disease.
- Subjects with terminal illness and/or admitted in intensive care unit.
- Subjects with one or more seizures without a clear and resolved etiology.
- Subjects on corticosteroids and anti-cancer therapy in the preceding 4 weeks.

#### Type of study

Cross-sectional, observational, descriptive, analytical(comparative), clinical study.

#### Tools for assessment

- 1) Mini International Neuropsychiatric Interview (MINI Plus)
- 2) Depression Anxiety Stress scales (DASS).

#### **Description of tools used:**

1). MINI: MINI International Neuropsychiatric Interview (Sheehan et al., 1998) The Mini International Neuropsychiatric Interview (MINI) is a short-structured diagnostic interview for screening and diagnosing mental disorders as per the ICD - 10 and DSM IV. MINI Comprises of closed ended questions (optional rater inquiries), to be used in clinic and research settings. The versions of MINI include: MINI Screen, MINI Plus and MINI KID 2). Depression Anxiety Stress Scale (DASS): The DASS is a set of three self-report scales designed to measure the negative emotional states of depression, anxiety and stress. Each of the three DASS scales contains 14 items, divided into subscales of 2-5 items with similar content. The Depression scale assesses dysphoria, hopelessness, devaluation of life, selfdeprecation, lack of interest/involvement, anhedonia, and inertia. The Anxiety scale assesses autonomic arousal, skeletal muscle effects, situational anxiety, and subjective experience of anxious affect. The Stress scale assesses difficulty relaxing nervous arousal, and being easily upset/agitated, irritable/over-reactive and impatient. Subjects are asked to use 4-point severity/frequency scales to rate the extent to which they have experienced each state over the past week. Scores for Depression, Anxiety and Stress are calculated by summing the scores for the relevant items. In addition to the basic 42-item questionnaire, a short version, the DASS-21, is available with 7 items per scale.

#### **Statistical Analysis**

Information and data collected were subjected to suitable statistical analysis with software SPSS version 23.0. Chi square test and Pearson's correlation have been calculated and tabulated. Conclusions were drawn by analysing the data.

#### Associations of SADQ score with depression, anxiety and stress.

Score of answers of DASS-42 questionnaire given by the wives of sampled population decides the depression level of wives they cause. SADQ score from the amount of alcohol patients use to consume. From the study group, it can be seen that out of 50 samples, majority of patients consumes normal to mild alcohol, from which 13(26%) normal, 19(28%) mild.

Very few addicts consume it at extremely severe level. 7(14%) used to drink alcohol at severe level and 9(18%) have habit of consuming it at moderate level. Here below charts shows the relationship of severity of consuming alcohol and therefore depression, anxiety, stress causes to

the wives of patients.

#### Table 1 chi square test of SADQ Score with depression to check the association of two.

			DEPRESSION					
			0	1	2	3	4	Total
SADQ	Normal	Count	12	1	0	0	0	13
		% within						
		SADQ	92.3%	7.7%	0.0%	0.0%	0.0%	100.0%
	Mild	Count	2	14	2	0	0	18
		% within						
		SADQ	11.1%	77.8%	11.1%	0.0%	0.0%	100.0%
	Moderat	Count	0	2	6	1	0	9
	e	% within						
		SADQ	0.0%	22.2%	66.7%	11.1%	0.0%	100.0%
	Severe	Count	0	0	0	7	0	7
		% within				100.0		
		SADQ	0.0%	0.0%	0.0%	%	0.0%	100.0%
	Extreme	Count	0	0	0	0	3	3
ly S	Severe	% within	0.0%	0.0%	0.0%	0.0%	100.0%	100.0
		SADQ						%
Т	otal	Count	14	17	8	8	3	50
		% within						
		SADQ	28.0%	34.0%	16.0%	16.0%	6.0%	100.0
								%

#### SADQ \* DEPRESSION Crosstabulation

Pearson Chi-Square = 144.747 p value = 0.000

Above table shows as patients consumes alcohol normal to mild level, depression also causes normal to mild to the majority wives of the sample group. Here, table shows very few wives have extremely severe depression. P value <0.05 indicates that there is relationship between score of consuming alcohol by patients with wives' depression level.

Table 2 chi square test of SADQ Score with anxiety to check the association of two.

			ANXIETY				
			0	1	2	3	Total
SAD	Normal	Count	8	5	0	0	13
Q		% within					
		SADQ	61.5%	38.5%	0.0%	0.0%	100.0%
	Mild	Count	1	17	0	0	18
		% within					
		SADQ	5.6%	94.4%	0.0%	0.0%	100.0%
	Moderate	Count	1	6	2	0	9
		% within					
		SADQ	11.1%	66.7%	22.2%	0.0%	100.0%
	Severe	Count	0	0	6	1	7
		% within					
		SADQ	0.0%	0.0%	85.7%	14.3%	100.0%
	Extremely	Count	0	0	0	3	3
	Severe	% within					

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	SADQ	0.0%	0.0%	0.0%	100.0%	100.0%
Total	Count	10	28	8	4	50
% within		20.0%	56.0%	16.0%	8.0%	100.0%
SADQ						

Pearson Chi-Square = 88.903 p value = 0.000

Above table shows majority of patients consumes alcohol at mild, level, their anxiety also at mild level. Many of wives have normal anxiety, as their spouse are normally addict. Here, table shows however patients drink extremely severe alcohol, no wives have their anxiety level higher than severe. P value <0.05 indicates that there is relationship between score of consuming alcohol by patients with their wives' anxiety level.

#### Table 3 chi square test of SADQ Score with stress to check the association of two.

			0	1	2	Total
SADQ	Normal	Count	13	0	0	13
		% within				
		SADQ	100.0%	0.0%	0.0%	100.0%
	Mild	Count	10	8	0	18
		% within				
		SADQ	55.6%	44.4%	0.0%	100.0%
	Moderate	Count	2	6	1	9
		% within				
		SADQ	22.2%	66.7%	11.1%	100.0%
	Severe	Count	2	4	1	7
		% within				
		SADQ	28.6%	57.1%	14.3%	100.0%
	Extremely	Count	0	1	2	3
	Severe	% within				
		SADQ	0.0%	33.3%	66.7%	100.0%
Total		Count	27	19	4	50
		% within				
		SADQ	54.0%	38.0%	8.0%	100.0%

SADQ \* STRESS Crosstabulation

Pearson Chi-Square = 32.860 p value = 0.000

Above table shows consumption of alcohol causes less stress on the wives of alcoholic patients. majority of here majority of wives have normal stress level 27(54%). patients consumes alcohol at mild, level, their stress level also mild. Here, table shows no wives have their stress level higher than moderate. P value <0.05 indicates that there is relationship between score of consuming alcohol by patients with their wives' stress level.

	Depression	Anxiety	Stress	SADQ
Depression	1	.822**	689	945
Anxiety	.822**	1	681	845
Stress	689		1	655
SADQ	945	845	655	1

#### **Pearson Correlations**

\*\*. Correlation is significant at the 0.01 level (2-tailed).

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#### b. Listwise N=50

Above table shows the relationship of SADQ score with depression, anxiety and stress level of wives of patients of alcohol dependence. Here it shows that SADQ score has strong positive relation with depression it is 0.945 correlation co efficient of SADQ score with anxiety is 0.845 which shows also strong relationship while SADQ score has lesser relationship with stress than depression and anxiety. So it can be concluded that more alcohol drunk by patients, wives of them are having more depression then anxiety and then stress.

#### Discussion

This study analyses depression, anxiety and stress causes to wives of patients of ADS with the amount of severity they consume. A careful inspection of the results of this study revealed some important trends. The charts shows population characteristics of the group included in this study.

Alok Tyagi, Shubham Mehta (2013) Study found significant positive correlation between alcohol consumption in husbands and depressive symptoms and suicidal ideation in their wives. Roya Noori et al. (2013) showed that women had a more extensive history of drug use, were more likely to be abused by their spouse, and had higher anxiety and depressionscores than their counterparts Sahar Obeid, (2020) a study showed that common mental disorders such as depression, anxiety, stress, alexithymia and having insecure attachment styles are risk factors for alcohol use disorder (AUD). Savita, Sulekha et al. (2014) found in study that *Drinking habit of Husband where eighteen participants stress level was increased whosehusband was found to be habitual drinker*. Babak Moazen, Hamid Reza Khoddami Vishteh, Ali Farhoudian, (2015) conducted a study on Evaluation of Anxiety and Depression Among Female Spouses of Iranian Male Drug Dependents and spousal drug dependence was found to be significantly associated with higher levels of anxiety and depression among women.

*In present study, to* Cross tabulation of SADQ score with each depression, anxiety and stress has been done and then chi square has been calculated to check the association between two. Analysis of the study shows that SADQ have association with depression, anxiety and stress. As severity increases of consuming alcohol, depression level also increases in the wives of ADS patients taken for the samples. Same trend follows with SADQ score and anxiety as well as SADQ score and stress. Majority of the patients used to consume alcohol at severe level, as the result majority of wives have their depression level increases but at moderate level. Few have severe depression level as their partners consume extremely severe alcohol. Regarding to anxiety, same trend follows. While checking the association of SADQ score with stress, majority of wives have their stress level mild. Only few of them whose partners consumes alcohol extremely at severe level, their wives are having severe stress level.

Alok Tyagi, Shubham Mehta (2013) There is positive relationship of depression, anxiety and stress on SADQ score. But in both the cases depression has higher value of coefficient co relation. After that anxiety have more value of co efficient correlation than with stress. So it can be said that depression causes most regarding consuming alcohol. Then anxiety affects the wives of sampled patients and lastly stress affects accordingly to severity level of consuming alcohol.

Lakshmana Govindappa, B.Pankajakshi (2014) had researched on violence among wives of alcoholics. Violence experienced by the respondents show that 88%, 92%, 86% and alcohol were assessed using PHQ-9 for depression and MSSI for suicidal ideation. 74% has moderate level of physical, emotional, intellectual and economic violence respectively. Roya Noori et al. (2013) showed that women have more physical abuse by theirspouse (compared to nonphysical abuse), and a higher level of anxiety and depression were associated with a higher likelihood in women with a drug user spouse. Dr. Pratima Murthy(2003) found in a survey that alcohol, cannabis and opiates are the major substances of abuse in India.

#### Limitation

The study is encumbered by limitations such as cross-sectional design, and a single centre. Subjective scales are susceptible for recall bias and self- report bias whereas objective scales have their own short comings. As per our hospital's client profile all patients were male and all information is taken only from one family member(wife of patient). The sample size was small and recruited from a tertiary care centre; hence findings could not be generalized to other treatment centres.

Despite limitations, the novelity of the present study is that it adds to India hospital based data on patients having alcohol dependence syndrome and opium dependence syndrome. Further, this study also identifies and highlights the abuse faced by the wives of alcohol and opium addict- an undiscussed issue in Indian society. Also it surfaces the unidentified issues of depression, anxiety, stress faced by the wives of alcohol addict husbands.

#### Conclusion

Present study also concluded that depression, anxiety and stress level of wives co relates with severity level of consumption of alcohol by the patients. However, depression relates more severely than anxiety and stress. Stress level is less affected. Thus study focuses on area of wives' living, their depression, anxiety, stress and abuse. To improve living of wives of addicted patients, some suggestions can be carried out like other family members should take interest to overcome the situation. , wives should get themselves educated, patients should try themselves to be skilled, and most importantly wives should try to carry the persons in health centers of hospitals for rehabilation and even for patients' better Quality of life.

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