

## Patterns of Referral in Psychiatry Outpatients Department

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### Summary :

The study was done to see the pattern of referral and the characteristics of the patients referred for psychiatric consultation in a general hospital psychiatric outpatient department over a period of three months. About 32.5% patients were referred by relatives and followed by 17% and 11.55% referred from out patient department (OPD) of Mitford Hospital and general practitioners respectively. About 93% of referred patients were found to have purely functional

disorders and rest had concurrent physical and psychiatric disorders. Schizophrenia was the most common diagnosis (45.5%) followed by depressive disorders (20%), bipolar affective disorders (13.5%) and dissociative or conversion disorders (8%). Most of the patients belonged to age group of 20-40 years. Most of the patients were literate (66%) and 62.5% patients came from the urban background.

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### Introduction :

Psychiatric consultation services became popular with the establishment of psychiatric units in general hospitals after world war II and enabled psychiatrists to become directly involved in the care of physically ill patients. Epidemiological studies have shown a positive correlation between physical disease and psychiatric disorders. In one of the studies it was found that 30-60% of inpatients and 50-80% of out-patients of general hospitals suffer from psychiatric distress or psychiatric illness of sufficient severity to create a problem for the health professionals<sup>1</sup>.

The objective of the study was to see the pattern of referral for psychiatric consultation in a general hospital, frequency of functional disorder among the referred patients, cause of referral, psychiatric diagnosis, organic diagnosis and allied matter regarding the subjects.

### Materials and method :

This study was conducted to determine the characteristics of the patients referred for psychiatric consultation from different referral sources. In this study all those cases were included which were referred for psychiatric consultation at psychiatry OPD of Mitford Hospital, Dhaka from different referral sources from July to September, 1992.

A multipoint questionnaire which included socio-demographic parameters of the patients, source of referral, reasons for referral etc. was used and information were collected by interviewing the patients and their relatives by the authors. All the referred cases were seen by qualified psychiatrists and the final diagnosis, where it was made, was noted in the questionnaire. The diagnosis was made on the basis of ICD-10.

### Results :

Table-I shows the socio-demographic characteristic of the referred patients. Of the patients 55% were males and 45% females. The mean age of the patients was 29.6 years (sd-11.09). Most of the patients were literate (66%) and regarding occupation, 28.5% were housewives and 16.5%, 16.5%, 10.5%, 8.5% and 7.5% were students, unemployed, businessmen, service holders and cultivators respectively. Among the referred cases 62.5% patients were

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**Table—I***Socio-demographic characteristics of referred patients*

Characteristics	Number	Percent
<b>Sex :</b>		
Male	110	55.0
Female	90	45.0
M/F ratio = 1 : 0.82		
<b>Education:</b>		
Illiterate	68	34.0
Primary	41	20.5
Secondary	42	21.0
S.S.C.	19	9.5
H.S.C.	20	10.0
Graduate	9	4.5
Postgraduate	1	0.5
<b>Occupation:</b>		
Student	33	16.5
Housewife	57	28.5
Service	17	8.5
Business	21	10.5
Cultivation	15	7.5
Labour	12	6.0
Self employed	7	3.5
Household	5	2.5
Unemployed	33	16.5
<b>Social background:</b>		
Rural	75	37.5
Urban	125	62.5
<b>Marital status:</b>		
Unmarried	87	43.5
Married	100	50.0
Widow	7	3.5
Divorced	4	2.0
Separated	2	1.0
<b>Economic background:</b>		
Higher	12	6.0
Middle	91	45.5
Lower	97	48.5
<b>Age:</b>		
Upto 20	39	19.5
21-30	83	41.5
31-40	47	23.5
41-50	22	11.0
51-60	6	3.0
Above 60	3	1.5
Mean age = 29.6 (SD=11.09)		

with an urban background, and 56% were married. Regarding economic condition 48.5%, 45.5% and 6% patients were of lower, middle and higher economic background respectively.

Table-II shows that 32.5% patients were referred by relatives and followed by those from the OPD of Mitford Hospital (17%), by general practitioners (11.5%), by patients treated previously in psychiatry OPD (11.5%), by other medical personnel (9.5%) and from mental hospital (5%) respectively.

**Table—II***Source of referral*

Source	Number	Percent
	N = 200	
OPD of Mitford Hospital	34	(17.0)
Medicine	20	10.0
ENTD	3	1.5
Paediatrics	3	1.5
Surgery	1	0.5
Orthopaedics	1	0.5
Emergency department of Mitford Hospital	6	3.0
Mental Hospital	10	5.0
Other Hospitals	3	1.5
Specialists	10	5.0
G.P.	23	11.5
Medical students	5	2.5
Other medical personnel	19	9.5
Treated psychiatric pts.	23	11.5
Self	6	3.0
Relatives	65	32.5
Traditional healers	2	1.0

**Table—III***Reasons mentioned for requesting consultation*

Reason	Number	Percent
	(N=200)	
Diagnosis and treatment	182	91.0
Management	18	9.0

Table-III shows that 91% patients were referred for probable psychiatric diagnosis and management and other 9% were referred for management of already diagnosed cases.

Table-IV shows that 45.5% of the referred patients were suffering from schizophrenia followed by those from depressive disorder (20%), bipolar affective disorder (13.5%), dissociative

(or conversion) disorder (8%), substance abuse (4.5%), anxiety disorder (4.5%), phobic disorders (1%), mental retardation (1.5%), dementia (1%) and epilepsy (0.5%).

Table-V shows that 93% of the referred patients were suffering from purely functional disorder and 7% were from functional disorders along with the organic diseases.

**Table—IV***Distribution of psychiatric diagnosis*

Psychiatric diagnosis	Male (N=110)	%	Female (N=90)	%	Total N. %
Schizophrenia	62	56.36	29	32.22	91 (45.5)
Bipolar affective disorder	15	13.63	12	13.33	27 (13.5)
Depressive disorder	10	9.06	30	33.33	40 (20)
Anxiety disorder	8	7.27	1	1.11	9 (4.5)
Phobic disorder	1	0.90	1	1.11	2 (1)
Dissociative disorder (or conversion)	2	1.98	14	15.55	16 (8)
Substance abuse	9	8.18	-	-	9 (4.5)
Mental retardation	3	2.72	-	-	3 (1.5)
Epilepsy	-	-	1	1.11	1 (0.5)
Dementia	-	-	2	2.22	2 (1)

**Table—V***Frequency of functional and mixed disorders*

	Functional		Total	Mixed		Total
	Male	Female		Male	Female	
Schizophrenia	61	28	89	1	1	2
Bipolar affective disorder	15	12	27	-	-	-
Depressive disorder	6	28	34	4	2	6
Anxiety disorder	8	1	9	-	-	-
Phobic disorder	1	1	9	-	-	-
Dissociative disorder (or conversion)	2	14	16	-	-	-
Substance abuse	9	-	9	-	-	-
Mental retardation	-	-	3	-	3	-
Epilepsy	-	-	-	-	1	1
Dementia	-	-	-	-	2	2
	186 (93%)			14 (7%)		

## Discussion :

The study was done on the basis of information obtained from patients referred from different sources for psychiatric consultation. It was generally found that frequency of functional disorders varied between 14 and 69%<sup>2-7</sup>. In Bangladesh, two surveys of such nature have been done so far and the rate of functional disorder among the patients attending hospital medical outpatients department and general practice were found to be 31% and 29% respectively<sup>2,3</sup>.

In our study 32.5%, 17%, 11.5%, 11.5%, 9.5%, 5% and 5% patients were referred by relatives, OPD of Mitford Hospital, general practitioners, previously treated psychiatric patients, other medical personnel, mental hospital and specialists respectively. In one of the studies it was found that 65% of the total referred cases came from medical units for psychiatric consultation<sup>8</sup>. Kligerman and McKegray also reported the same pattern<sup>9</sup>. In our study, majority of the cases referred by relatives and this may be due to increased awareness among the people about treatment of psychiatric disorders and also reflects decrease in social stigmas about mental disorders.

In present study 91% of patients were referred with the request of diagnosis and treatment and 9% referred for management of already diagnosed cases. In one of the studies it was found that 75% and 80% of the reasons for referral were for assistance in diagnosis and advice on patient management or both<sup>10</sup>. Another study reported that 27.7% patients were referred for diagnostic problem only<sup>8</sup>.

Of the diagnosed cases, 45.5% were found suffering from schizophrenia. From other studies it was found that 3.1% to 16.49% of the patients were suffering from schizophrenia<sup>8-13</sup>. In our study number of schizophrenic patients were more which might be due to increased attendance of schizophrenic patients in the

OPD during the study period. Moreover, minor emotional problems might have been overlooked or could not be recognized at all and patients were only referred when there were overt psychological symptoms or disturbances of social functioning. It was also found that male schizophrenic patients outnumbered female. This variation may be due to the fact that females are less frequently brought for treatment than their male counterpart because of the conservative attitude of our society and because our women play subordinate role in the family as well as in the society, and they are economically dependent.

Of the referred cases, 20% of patients were found to be suffering from depressive disorders and most of them were females. In other studies it was found that about 11 to 57% patients were suffering from depressive disorder<sup>4,8-11,14-16</sup>. It is not surprising, therefore, that depressive disorders account for close to half of psychiatric diagnoses recorded by liaison psychiatrists<sup>10</sup> and women are more prone to depression than men<sup>6</sup>. About 13.5% and 8% of our patients were found to suffer from bipolar affective disorders and dissociative (or conversion) disorders respectively. A number of studies found that 22.35% patients were of affective disorders<sup>4,8-11</sup> and their findings were more or less consistent with our report.

In our series, 4.5% patients were found to be suffering from anxiety disorders. Similar finding was reported in other studies<sup>4,8,10,11,15</sup>. About 4.5% were referred for substance abuse disorder which is consistent with similar other studies<sup>8,9,15</sup>. This reflects that a burning problem in our society needs to be controlled.

Of the referred cases, 93% were found to be suffering from purely functional disorders having no identifiable physical disease and rest of the patients were having concurrent physical and functional disorders. Similar other studies showed that frequency of functional disorders were between 14 and 69%<sup>2-7</sup> and 20 and 69%

had concurrent physical and psychiatric disorders<sup>6,8-12,17</sup>, and majority of their patients were referred from different units of the hospitals. This shows that largest number of cases attending the psychiatric OPD of a general hospital are suffering from purely functional psychiatric disorders and considerable amount of cases have a positive association between physical disease and psychiatric disorder.

Of the referred cases 62.5% came from urban background and this might be due to the location of the hospital where urban people are in more privileged position to avail the treatment. However, a significant proportion, 37.5%, came from rural areas to this city centre. It was found that 66% patients were literate. This figure is much higher than the literacy rate of general population. The urban influence of the sample and educated peoples better health consciousness may explain the higher representation of this group.

In our study, majority of the cases are referred by relatives and this reflects increase awareness among the people about treatment of psychiatric disorders and also gives an idea about gradual decline in social stigmas about mental disorders. Profile of referral from other departments of the hospital was not satisfactory. In one of the studies it was found that 30-60% of inpatients and 50-80% of outpatients of general hospitals suffer from psychiatric distress or psychiatric disorders of sufficient severity. Psychiatric referral system from other departments should therefore be improved so that patients suffering can be minimized and appropriate treatment could be provided at proper time.

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