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Research Article

FREQUENCY OF DEPRESSION AMONG STUDENTS AT ALLAMA IQBAL MEDICAL COLLEGE LAHORE

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Abstract:

Background: Performance of individual is badly effected by Depression and anxiety especially those students who's are studying medical subjects.

Objective: The concept of this study was to check the depression in medical students while studying MBBS at different levels.

Subjects & Methods: The pattern of this study was random and was arranged at Allama Iqbal Medical College Lahore. By using stratified systematic random sampling technique two hundred students (hundred male and hundred female) were picked out. The age of subjects was between 18 to 24 years. In Agha Khan University, depression in students was checked by using Anxiety and Depression scale and those students whose cross the score of 20 was considered as having depression. Pattern of questions was use to collect the data and this data was entered into SPSS and same software was used to analyze the data.

Results: 53 (26.50%) out of 200 students cross the score of 20 considered as having depression while 147 (73.50%) score less than 20. In the class of 1st year of MBBS to 2nd and 3rd year frequency of depression decreases 29.27%, 25.64% and 15.15% respectively. After 3rd year frequency of depression increases through 4th year to final year of MBBS 25.53% and 35% respectively.

Conclusion: Depression is spreading with high rate in medical students. Emotional distress causes increase in depression when students enter into course which decreases upto third year. After third year it rised due to hard work in clinics and duties in wards. Academic burden in final year, to feel that their goal is on few step and thinking about future responsibilities makes more stress in MBBS course.

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INTRODUCTION:

Depression and Anxiety cannot be explained medically it can be observe physically [1]. Depression is consider as major public health problem. It rank fourth in global burden diseases [2]. We can define the depression as mood and thought which causes illness in body. Sleeping and eating habits are effected by it. It is a way in which one thinks about oneself, and thinks about near things [3]. Anxiety is vague, unpleasant and sometimes debilitating emotion that is experienced in anticipation of some misunderstandings. According to WHO loss of pleasure or interest, fellings of guilty or low self-worth, depressed mood, and destruction from goal, poor concentration and low energy causes depression [5].

In underdevelope countries, the ratio of individuals suffering in Anxiety and depression is 10% to 44% [6]. In Pakistan due to social issues spreading rate of depression is high however exect rate of depression is not known[7]. If we compare the rate of depression by cities Lahore has high rate (53.40%) than karachi (14-35%) and Quetta (43.90%)[28]. Study about tribal area of Pakistan showes women (60%) and man (45%) suffering in depression[9]. Various studies showed that in medical colleges ratio of depression and anxiety increases 19.30% in Lahore and 70% in Allama Iqbal Medical College, Lahore[11]. Other observations tells us depression rate is 60% in Zia-ud-din Medical University Karachi[13]. Another study in Zimbabwe showed 64% depression rate in first year medical students[14]. In Sydney depression rate in hostals is only 20%[15].

The concept of this study was to check the vary of depression rate in students of MBBS at Allama Iqbal Medical College Lahore and to point out which course is more difficult and students become stressful. **Subjects & Methods.**

In the duration of December 2008 to June 2009 this study was conducted at Allama Iqbal Medical College Lahore. This random study was based on pattren of questions. 200 Students out of 1300 picked out from first to final year of MBBS. By using irregular sampling technique the study sample was picked out. Those students were taken out from sample who's not want to answer the pattern of question. To check the depression a special and pre-tested pattren of questions scale made by Agha Khan University was used. Those subjects who's score was less then or equal to 19 was consider as normal and who's cross this score was consider as having depression. The question pattren contains 25 symptoms and the sign of depression and anxiety was judged by interview in last two weeks. When students give back questions to be asked after filling. Their average score and data about their self was entered in SPSS version 16.0. To analyze the data descriptive statics was used and there was no test of significance used. Following information shows that out of 200 students 100 were males and 100 were females. There was equal representation by all clases of MBBS. By analyzing the given questions it was find out that 26.50% students have depression and 73.50% were free from depression. Interesting thing was here that depression in male students was more than females 28% and 25% respectively.

RESULT:**Table I: Characteristics of the participants**

Graph I, shows percentage of depression in all courses of MBBS. Percentage of depression decreases from 1st year students (29.27%) to 2nd year students (25.64%) and 3rd year students (15.15%) of MBBS. Depression increases from 4th year students (25.53%) to 5th year students 35% and in final year depression was at heighest position.

Graph I: Participants with or without depression at different level of MBBS course.

Characteristics	Percentage
Year wise Selection of Study Subject	
1 st year	20.50%
2 nd year	19.50%
3 rd year	16.50%
4 th year	23.50%
Final year	20%
Depression distribution	
Participants with depression	26.50%

Participants without depression	73.50%
Sex wise distribution of depression	
Males with depression	28%
Female with depression	25%

DISCUSSION:

Depression and Anxiety is most famous public health problem and ranked 4th in burden of diseases in all over the world. These helps to check the mental health and learning capacity of students. The emotional status of students during medical school training has been a source of concern, reported as early as 1965 as it may effect the over all performance of students and may lead to a cascade of consequences at professional and personal levels[13]. Burden of work, skills, attitude and professional knowledge makes students stressful in medical training. An interesting thing was that depression level decreases in first three years and this result showed that students may copy other students work by using student's support system. Depression level increases in fourth and fifth year of MBBS because of patients dealing and ward duties. Many studies proved that other graduates are less stressful and in depression as compare to medical students. This may be due to the reason that in addition to copying with normal stressors of everyday life medical students must deal with stressors specific to the medical school [14]. There are many factors which causes distress from admission to graduation process like dissection of cadavers and ethical dilemmas. Different studies showed very low depression rate in medical students. 26.50% students in our study had depression and anxiety, this percentage is comparable with all over depression level in medical students. Our study tells that depression level decreases in first year to third year. Our study tells different information than those studies which tells that depression level increases in third year of MBBS. Our study shows maximum level of depression in final year of MBBS. Some studies proved many factors which causes depression in students these factors are may be going to hospitals, greater number of study hours, close contact with critical ill patients and fatigue and job stress. Foreign countries data showed male students have less depression than female students[15]. The expected factor was tendency of women to over support medical and psychological symptoms. Our female students have less depression level than male students 25% and 28% respectively. This difference may be due to religious beliefs and social protection given to females students in our colleges. Being a lady doctor is still a privilege in our society. Male students have greater depression may be due to the

thought of that male can only support family. After MBBS they cross this role and may be reason for maximum level of depression at the end of MBBS course.

CONCLUSION:

There is high depression spreading rate in medical students. This is may be due to initially entering into course, emotional distress which decreases up to third year. After third year it increases due to clinical work and ward duties. Academic burden in final year and feelings about their goal and carefullness about future responsibilities is more stressful in MBBS course.

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