

ABSTRACT

Psychiatric Morbidity In A Primary Care Setting

The St George West Study

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The lack of epidemiological studies of psychiatric morbidity in the primary care sector in the English speaking Caribbean is observed. The major changes in the organisation of health care delivery in Trinidad and Tobago with increased emphasis on primary health care is noted. This study sought to measure psychiatric morbidity among users of primary health facilities in St. George West, a defined region of Trinidad and Tobago. Three hundred and ninety two patients attending the eight health centres in St George West were assessed in a two stage procedure involving use of the General Health Questionnaire, 12 item version, and the Hospital Anxiety and Depression Scale. Thirty four percent of the patients sampled showed evidence of psychiatric morbidity. Eighty eight percent of patients whose scores on GHQ testing were indicative of psychiatric morbidity showed clinically significant levels of anxiety and or depression on screening with the HADS. Unemployment, work impairment due to illness and presence of a disability were significantly related to psychiatric morbidity as were cocaine and alcohol abuse. Social support and the ability to share feelings were also shown to be relevant

factors. Thirty percent of the sample thought they suffered from a nervous illness. Only ten percent however had mentioned this to their physician. The health office represented the sole source of health care for seventy five percent of the sample. Most of the patients had attended the clinics for ill defined conditions.

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