

Stress Levels in the Stabilization Phase of Schizophrenia Patients

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Abstract

Stress is one of the central concepts of psychiatry, although this term has a source on the physiology and expertise. This study's aim is to determine the level of stress in schizophrenic patients in the stabilization phase of treatment and the proportion of demographic characteristics by sex, age group, education level, occupation, and place of residence to the stress level. This study is descriptive and sampling techniques with the use of systemic randomization techniques that meet the inclusion and exclusion criteria to achieve a total sample of 100 people, conducted on schizophrenic patients stabilization phase of treatment that came went to Polyclinic General Psychiatry BLUD Provincial Government Mental Hospital North Sumatra, during the period March 1, 2010 to August 31, 2010 Completion of the questionnaire conducted by direct interview using a scale of measurement auto anamnesis Daily hassles scale. Of the 100 schizophrenic patients found that the intermediate stress levels are at 31 people (31%), high stress levels by 33 people (33%) and the highest stress levels by 36 people (36%). Based on the demographics of the highest stress levels encountered in the male sex by 27 people (75%), in the age group 35-44 years by 17 people (47.2%), the group that does not work for 24 people (66.7 %), high school education by 22 people (61%), and place of residence outside the city of 27 orang field (75%). It was found highest stress levels in schizophrenic patients stabilisation phase of treatment that is equal to 36 people (36%), male gender, age 33-44 years, not working, the level of high school education, and lived outside the city of Medan.

Keywords: schizophrenic patients, the level of stress, the Daily Hassles Stress

1. Introduction

Everyone is susceptible to experiencing life's difficulties. Stress is often cited as a major cause of psychopathology, a precipitator or a trigger of the psychiatric disease. Involvement of stress on the development of psychiatric disorders such as depression, Post Traumatic Stress Disorders, and schizophrenia has been accepted.¹

In schizophrenia, stress was being describe prominently in terms of life events and emotions that are expressed. In some studies, the effect of stressful life events on psychotic decompensation and relapse frequency has been enforced. Furthermore, the level of expressed emotion in the family have been described to deterioration or decompensation for the better in schizophrenic patients, respectively, when the disease progresses. Even more important observation is in contrast to the severe life events, stress is relatively mild or called Daily hassles, is determined by the amount of stress experienced subjectively in schizophrenic patients, and to some extent, the amount of predictive become vulnerability relaps.²

The assumption that stress is seen in the actual onset schizophrenia is less clear and only reported in a minority of patients. Although, stress reduction through interventions and social skills training and family education has proven valuable in the management of psychosis. However when patients adequately treated with antipsychotics and social support them only partially protected and are still susceptible to stress. It states that schizophrenic patients may experience varying sensitivity stress.²

Sensitivity to this stress in schizophrenic patients has been conceptualized that schizophrenia patients have a sensitivity to stress, which has been conceptualized on the vulnerability-stress models, with attention to the etiology and pathogenesis schizophrenia.² Several studies have reported that the data schizophrenic patients have higher levels of stress compared with other psychiatric diagnosis. Another study also reported that schizophrenic patients have a more stressful life events than the general population.³

There were seven studies, that at least five of seven schizophrenic patients involved, in which life events are retrospective assessed for a period of 3 to 12 months prior to hospitalization. Al Khani and friends reported that they recruited patients from clinical care, but they also seem to be retrospective assessing life stressors before onset, relapse or exacerbation of symptoms. In this report it is not clear whether the increase in the symptoms always get involved or how much time elapsed between the onset, and the data collection time life events. Schwartz and Myers sample consisted of patients diagnosed schizophrenic interviewed 2-3 years after discharge. In the last study assessed life events six months before the onset of periods of increased symptoms. Measurement of life events stressors is a structured interview or by check - lists.³

Recent research is providing 14 comparisons whether schizophrenic patients reported levels of life event stressors higher than normal. Five of the 14 comparisons (36%), patients showed higher levels of stressors. For the normal sample shows a comparison of stressors no higher.³ The American Psychiatric Association Practice



Guideline for the Treatment of Schizophrenia describes the three phases of the integration goals of treatment are: the acute phase, the stabilization phase, and a stable phase. Where is the stabilization phase of acute psychotic symptoms gradually decreased in severity. This phase lasts an average of 6 months after the onset of the acute episode. During this phase the individuals who are most vulnerable to relapse. Symptoms improved, but the patient remains susceptible to relapse if medication dose is reduced or if there is environment stress. Because of the many factors that influence the occurrence of stress in schizophrenic patients, it is this which makes researchers interested in conducting research.

2. Subject and Methods

This study was approved by the Research Ethics Committee of Medical Faculty University of Sumatera Utara. These study was performed in Mental Hospital of Province of North Sumatera, on the regulation of Medical Faculty of University of North Sumatera, from March 1, 2010 until August 31, 2010. Subject from the outpatient care, with the stabilization phase of treatment of schizophrenic patients. The criteria inclusion was schizophrenic patients, in stabilization phase and cooperative. We exclude patient with history of common medical disorders and history of substance use, corticosteroids.

2.1 Assessment and Rating

These study used the Daily hassles and stress is a screening tool used to measure levels of stress.

2.2 Statistical Analysis

Univariat analysis was performed to describe each variable and was described by frequency table. The statistical analysis were assessed using SPSS 15.5. A significant level was considered as 5%.

3. Result

Demographic characteristics of participants are illustrated in Table 1.

Table 1. Demographic characteristics Characteristics of schizophrenic patients	n	%
Sex		70
Male	65	65
Female	35	35
Age Group		
15-24	13	13
25-34	35	35
35-44	31	31
> 44	21	21
Employment		
Work	41	41
Not working	59	59
Education level		
Elementary	23	23
Junior high	24	24
Senior high	46	46
Higher education	7	7
Place of residence		
Field	36	36
Outside the field	64	64

From table 1 above, it can be seen that the distribution of the study sample by gender who has the most samples are men at 65 samples (65%), by age group who have sampled most is the age group 25-34 years by 35 samples (35%), based on the work group who have sampled most was not working for groups of 59 samples (59%), based on the level of education that have sampled most is the level of high school education by 46 samples (46%), based on residence which has a sample most are patients who live outside the field of 64 samples (64%).



Table 2. Distribution of stress levels of schizophrenic patients with Daily Hassles Sca	ale	
Stress levels of schizophrenic patients	n	%
Stabilization Phase Treatment		
Most Low	0	0
Low	0	0
Medium	31	31
High	33	33
Highest	36	36
Total	100	100

From Table 2 above it can be seen that the distribution of stress levels of schizophrenic patients with Daily Hassles Scale most stress level is the highest level for 36 samples (36%).

Table 3 Distribution of stress levels of schizophrenic patients by Gender

Stress levels schizophrenic patient in phase Stabilization Treatment

Characteristics	Most Low	Low	Medium	High	Highest
Number samples	n %	n %	n %	n %	n %
Sex					
Male	0 0	0 0	14 45.2	24 72.7	27 75
Female	0 0	0 0	17 54.8	9 27.3	9 25
Total	0 0	0 0	31 100	33 100	36 100

From Table 3 above, it can be seen that the stress levels in schizophrenic patients by sex, for intermediate levels are found to be the most dominant female gender by 17 people (54.8%), at high stress levels were found to be the dominant sex is male by 24 people (72.7%) whereas the highest stress levels were found to be the most dominant gender is male by 27 people (75%).

Table 4 Distribution of stress levels of schizophrenic patients by Age Group

Stress levels schizophrenic patient in phase Stabilization Treatment

Characteristics	Most	Low	Low	Medium	High	Highest
	n	%	n %	n %	n %	n %
Age Group						
15-24	0	0	0 0	3 9.7	8 24.2	2 5.6
25-34	0	0	0 0	12 38.7	14 42.4	9 25
35-44	0	0	0 0	6 19.4	8 24.2	17 47.2
45-55	0	0	0 0	10 32.3	3 9.1	8 22.2
Total	0	0	0 0	31 100	33 100	36 100

From Table 4 above, it can be seen that the stress levels in schizophrenic patients by age group, for intermediate levels are found to be the most dominant age group of 25-34 years by 12 people (38.7%), at high stress levels were found to be the most dominant group aged 25-34 years by 14 people (42.4%), and the highest stress levels were found to be the most dominant age group of 35-44 by 17 people (47.2%).

Table 5 Distribution of stress levels of schizophrenic patients by Occupation

Stress levels schizophrenic patient in phase Stabilization Treatment

Characteristics	Most Low	Low	Medium	High	Highest
	n %	n %	n %	n %	n %
Working	0 0	0 0	14 45.2	15 45.5	12 33.3
Not Working	0 0	0 0	17 54.8	18 54.5	24 66.7
Total	0 0	0 0	31 100	33 100	36 100

From Table 5 above, it can be seen that the stress levels in schizophrenic patients based group work can be seen that the stress levels in schizophrenic patients to intermediate level was found to be the most dominant of patients who do not work for 17 people (54.8%), at high stress levels the most dominant patients who had not found work by 18 people (54.5%), and the highest stress levels were found to be the most dominant patients who do not work for 24 people (66.7%).



Table 6 Distribution of stress levels of schizophrenic patients by Level of Education

Stress levels schizophrenic patient in phase Stabilization Treatment

Characteristics	Mo	st Low	Low		Me	edium	High		Highest	
	n	%	n	%	n	%	n	%	n	%
level of education										
elementary	0	0	0	0	8	25.8	7	21.2	8	22.2
junior high	0	0	0	0	8	25.8	12	36.4	4	11.1
high school	0	0	0	0	11	35.5	13	39.4	22	61.1
higher education	0	0	0	0	4	12.9	1	3.0	2	5,6
Total	0	0	0	0	31	100	33	100	36	100

From Table 6 above, it can be seen that the stress levels in schizophrenic patients by level of education can be seen that the stress level to mid-level schizophrenic patients found to be the most dominant is the patient who is a high school level of education by 11 people (35.5%), the level of stress the most dominant high patient found that the level of high school education by 13 people (39.4%), and the highest stress levels of patients were found to be the most dominant high school education.

Table 7 Distribution of stress levels of schizophrenic patients based on housingStress levels schizophrenic patient in phase Stabilization Treatment

Characteristics	Most Low	Low		Medium		High		Highest	
	n %	n	%	n	%	n	%	n	%
Housing									
Field	0 0	0	0	11	35.5	16	48.5	9	25
Outside the field	0 0	0	0	20	64.5	17	51.5	27	75
Total	0 0	0	0	31	100	33	100	36	100

From Table 7 above, it can be seen that the stress levels in schizophrenic patients based on residence can be seen that the stress levels of the most schizophrenic patients to intermediate level was found to be the most dominant patients who live outside the field by 20 people (64.5%), at high stress levels were found to be the most dominant patients who live outside the field by 17 people (51.5%), and the highest stress levels were found to be the most dominant patients who live outside the field by 27 people (75%).

4. Discussion

The purpose of this study was to determine the level of stress in the stabilization phase of treatment of schizophrenic patients and differences in demographic characteristics by age group, gender, level of education, employment and housing. Of 100 schizophrenic patients who come to the clinic for treatment General Psychiatry Mental Hospital in North Sumatra province in the period of March 1, 2010 until August 31, 2010 found that the highest stress levels by 36%, high stress levels by 33%, and secondary stress level by 31%, based on direct interviews using a scale of measurement auto anamnasis Daily hassles scale.

Research conducted by Green found that 48% of schizophrenic patients experience stress mainly influenced by factors such events of daily life as measured by the scale Hassles.⁵

Of the study indicated that male gender in schizophrenic patients most experienced the highest stress level is at 27 people (75%), high levels of stress is male gender by 24 people (72.7%) and stress levels medium on the female gender by 17 people (54.8%). These results are consistent with the study by Leung and Chue in 2000 which stated that 93% of male experience the highest stress levels compared to female. Research by Goldstein and Lewine in 2000 suggests that schizophrenia in women is familial or type of diathesis-stress, and the men are sporadic type. High social status may be a significant source of stress in males that tend to suffer schizophrenia. By age group, it can be seen that most had the highest stress levels were in the age group 33-44 years by 17 people (47.2%), high stress levels is the age group 25-34 years by 14 people (42.4%), and intermediate stress levels are in the age group 25-34 years by 12 people (38.7%). This consistent with research conducted by Shibre and colleagues found that as much as 75% aged 35 years who are at risk of becoming schizophrenic as compared to under the age of 35 years.

Factors obtained from research work in schizophrenic patients experiencing the most stress levels are highest in the group does not work for 24 people (66.7%), higher by 18 people (54.5%) and medium does not work well in



groups of 17 people (54.8%), approximately 75% of patients with schizophrenia do not work and do not have the job rate. Based on the level of education can be seen that the stress levels in schizophrenic patients most experienced the highest stress level is the level of high school education by 22 people (61.1%), high stress is high by 13 people (39.4%) and intermediate is rate SMA by 12 people (35.5%). This is in contrast to research conducted by Shibre and colleagues found that about 85% of schizophrenic patients do not get formal education and about 30% were enrolled in formal education are at risk for experiencing stress in patients skizofrenik. Under the shelter can be seen that the stress levels are highest schizophrenic patients encountered in the field outside the shelter for 27 people (75%). This is in contrast to research conducted Shibre and colleagues found

that high levels of stress in schizophrenic patients in the population who live in urban as much as 54%.

5. Conclusion

From the results of a study of 100 schizophrenic patients who come to the clinic for treatment can be concluded that the stress levels in schizophrenic patients in the stabilization phase of treatment is the most high stress is quite high, male, age 33-44 years, not working, the level of high school education, and lived outside the city of Medan. As an advice, we should always let clinicians monitor the presence of stress levels in schizophrenic patients. We could improve the level of stress in schizophrenic patients by educating enough. And this study maybe not complete enough and that is why analytic studies are needed to look at the factors associated with stress in schizophrenic patients.

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