



Caregiver Burden and Disability in Somatization Disorder and Schizophrenia: A Comparative Study

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Type of Publication: Original Research Paper

Conflicts of Interest: Nil

Abstract

Introduction- This study has explored disability among patients with somatization disorder and the burden experienced by their caregivers. We aimed to assess the levels of disability among patients with somatization disorder and the levels of burden among their caregivers and compare these parameters against patients with schizophrenia.

Material and Methods- Participants included adults with a diagnosis of somatization disorder (n = 25) or schizophrenia (n = 25) diagnosed as per the International Classification of Diseases, Tenth Revision (ICD-10), clinical descriptions, and diagnostic guidelines, as well as their caregivers. The WHO Disability Assessment Schedule 2.0 and Family Burden Interview Schedule were used to assess patient disability and caregiver burden, respectively. Independent chi-square test was used to compare relevant sociodemographic and clinical parameters.

Results- Out of 50 patients, the mean (\pm SD) age of the patients with somatization disorder group was 33.04 ± 10.12 , and that of the schizophrenia group was 33.68 ± 11.37 years. The mean burden score of caregivers of patients with somatization disorders was nominally higher (18.96 ± 9.9) than that of caregivers of patients with schizophrenia (15.7 ± 9.7). Neither of these differences approached statistical significance ($P > 0.05$).

Conclusion- Patients with somatization disorder experience considerable levels of disability, and their caregivers go through various levels of burden in their daily life that is comparable to schizophrenia.

Keywords: Caregiver burden, disability, schizophrenia, somatization disorder.

INTRODUCTION

Caregiving has been identified as a basic component of human nature and a primary element of close relationship. In India, the family support system plays a major role in caring for a family member with mental illnesses. The caregiver burden has common characteristics in physical and mental diseases

Somatization disorder is identified by multiple unexplained complaints and the proneness to project pathological distress in the form of physical symptoms. The chronic nature of the illness makes them unable to function normally. It may also limit

their daily activities to the extent that leads to disability. Somatization is a common phenomenon in both medical as well as psychiatric practice¹. Patients with somatic symptoms suffer significant psychosocial dysfunction, physical impairments, absenteeism from work, and dysfunctional patterns of healthcare utilization, leading to significant disability²⁻⁶. Somatization disorder, the most severe form of somatization phenomenon, is known to cause substantial disability⁷⁻⁹. The considerable disability

experienced by sufferers are likely to impose significant burden on their caregivers.

Schizophrenia is a significantly disabling and chronic psychiatric disorder that affects all major domains of a patient's life. The majority of mental disorders often imposes a heavy burden on caregivers; however, among these disorders, schizophrenia attracts more attention not only due to the deterioration of the patient's individual and social performance and the symptoms that affect the caregivers' quality of life but also because of the nature and the early breakout of the disorder

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As there is paucity of such studies from the Indian setting, this study was undertaken to investigate the level of disability of patients with somatization disorder and the level of the burden in their caregivers, and the results were compared with patients with schizophrenia and their caregivers.

MATERIALS AND METHODS:

This is a hospital based cross-sectional and comparative study was conducted on patients diagnosed as somatization disorder and schizophrenia as per the International Classification of diseases, Tenth revision (ICD-10), clinical descriptions, and diagnostic guidelines, as well as their caregivers. Participants attending at Psychiatry department of Tertiary care hospital, Jaipur (Rajasthan) India using a purposive sampling method.

A caregiver, in this study, refers a family member or a close relative who had been regularly staying with the patient for more than six months and played a major role in their daily activities, health care, and social life.

Study proposal was approved with Institutional ethical committee. For the study purpose patients who already diagnosed as somatization disorder and schizophrenia of age 18 years or above and of either gender were included in study. Patients not willing to give consent to participate in this study. Caregivers of age 18 years of above and of either gender were included in study.

Caregivers who have any preexisting psychiatric illness and other medical illnesses were excluded from the study. Informed consent was taken from eligible patients and caregivers prior to enrol in the study.

50 cases were enrolled for the study. All eligible patients and caregivers were first interrogated by semi structured performa which is designed for capturing socio-demographic and clinical data of patients. Family Burden Interview Scale (FBIS) by Pai and Kapur was used to assess the level of burden faced by caregiver. The adult self-administered version of WHODAS (2.0) was used to assess disability. Clinical Global Impression Scale was used to assess the severity of illness. Data thus collected were compiled in Microsoft Excel worksheet 10. These data were classified to do analysis. Quantitative data were expressed in mean & standard deviation and qualitative data were expressed in percentage & proportion.

RESULT:

Out of 50 patients, 23 (46%) subjects were females. The majority of the subjects ($n = 29$, 58%) were married. The mean \pm -standard deviation age of the patients in the somatization disorder group was 33.04 ± 10.12 , and that of the schizophrenia group was 33.68 ± 11.37 . Most of the subjects ($n = 28$, 58%), were unemployed; 45 (90%) of the subjects were from the rural area. Illness characteristics such as age at onset, duration of illness, duration of treatment, comorbidity, duration of untreated illness, and the presence of lifetime suicide attempts were also assessed. This indicated that 44 (88%) subjects did not have any comorbidity; 5 (10%) had hypertension, and 1 (2%) had diabetes mellitus. A total of 43 (86%) subjects were taking treatment continuously. The majority of the subjects (somatization disorders: $n = 23$, 92% and in schizophrenia: $n = 17$, 68%) did not have any suicide attempt in the past. The severity of illness as assessed by the Clinical Global Impression Scale indicated that 5 (10%) patients had a mild illness, 30 (60%) had a moderate illness, and 15 (30%) were markedly ill.

Table-1 Comparison of The Clinical Profile Of Patients With Somatization Disorder And Schizophrenia (N=50)

CLINICAL PROFILE	CATEGORIES	SOMATIZATION DISORDER	SCHIZOPHRENIA	CHI SQUARE VALUE	P - VALUE
COMORBIDITY	HTN	2 (8%)	3 (12%)	5.99	0.5
	DM	1 (4%)	0 (0%)		
	Nil/ Not known	22 (88%)	22 (88%)		
DURATION OF ILLNESS	< 1 YEAR	3 (12%)	2 (8%)	5.99	0.89
	1-3 Years	1 (4%)	1 (4%)		
	NIL	21 (84%)	22 (88%)		
LIFETIME SUICIDE ATTEMPT	YES	2 (8%)	8 (32%)	3.84	0.03*
	NO	23 (92%)	17 (68%)		
NO. OF SUICIDE ATTEMPT	Nil	23 (92%)	17 (68%)	7.81	0.10
	1	0 (0%)	4 (16%)		
	2	2 (8%)	3 (12%)		
	>2	0 (0%)	1 (4%)		
SEVERITY OF ILLNESS	MILDLY ILL	1 (4%)	4 (16%)	5.99	0.36
	MODERATELY ILL	16 (64%)	14 (56%)		
	SEVERELY ILL	8 (32%)	7 (28%)		

The analysis of demographic variables of caregivers showed that the mean age, in years, of the caregivers of patients in the somatization disorder group was 47.92 ± 13.79 and that of schizophrenia group was 45.64 ± 15.76 ; 28 (56%) were females and 22 (44%) were males; 38 (76%) were married;

43 (86%) had finished schooling up to 10 years; most 29 (58%) were employed; 15 (30%) are poor. The majority of the caregivers were parents (n = 20, 40%) and spouses (n = 16, 32%). Children and siblings as caregivers were less in number (n = 7, 14%) and 5 (10%), respectively.

The comparison of demographic variables of patients with somatization disorder and schizophrenia by using chi-square analysis revealed that females outnumbered males among patients with somatization disorders; whereas, male patients outnumbered females in schizophrenia. In the somatization disorder group, 19 (76%) were married, and in the schizophrenia group, 10 (40%) were married. A total of 11 (44%) patients with the somatization disorder had no income, whereas the number was 10 (40%) among patients with schizophrenia. The comparison of the clinical profile of patients with somatization disorder and

schizophrenia is summarized in Table 1. The chi-square analysis revealed that there was no significant association in clinical profile between both the

disorders. The comparison of demographic variables of caregivers of patients with somatization disorder and schizophrenia is depicted in Table 2.

Table-2 Comparison of Demographic Variables of Caregivers Of Patients With Somatization Disorder And Schizophrenia (N = 50)

CLINICAL VARIABLES	CATEGORIES	SOMATIZATION N=25	SCHIZOPHRENIA N=25	CHI-SQUARE VALUE	P-VALUE
GENDER	MALE	14 (56%)	8 (32%)	3.06	0.08
	FEMALE	11 (44%)	17 (68%)		
MARITAL STATUS	UNMARRIED	3 (12%)	2 (8%)	2.93	0.23
	MARRIED	20 (80%)	18 (72%)		
	DIVORCED	2 (8%)	5 (20%)		
EDUCATIONAL STATUS	< 10 YEARS	21 (84%)	22 (88%)	0.17	0.68
	>10 YEARS	4 (16%)	3 (12%)		
OCCUPATION	EMPLOYED	17 (68%)	12 (48%)	2.07	0.15
	UNEMPLOYED	8 (32%)	13 (52%)		
INCOME PER CAPITA MONTHLY INCOME	UPPER HIGH	5 (20%)	3 (12%)	1.18	0.88
	HIGH	4 (16%)	4 (16%)		
	UPPER MIDDLE	6 (24%)	5 (20%)		
	LOWER MIDDLE	3 (12%)	5 (20%)		
	POOR	7 (28%)	8 (32%)		
RELATIONSHIP WITH PATIENTS	PARENT	9 (36%)	11 (44%)	2.58	0.63
	SPOUSE	8 (32%)	8 (32%)		
	CHILD	4 (16%)	3 (12%)		
	SIBLING	2 (8%)	3 (12%)		
	OTHERS	2 (8%)	0 (0%)		

In somatization disorder, male caregivers outnumbered females, whereas in schizophrenia, female caregivers outnumbered males; in terms of occupational status, 17 (68%) were employed among caregivers of patients with the somatization disorder,

while it was comparatively less (n = 12, 48%) in schizophrenia. Assessment of different levels of disability among patients with somatization disorder and schizophrenia, using WHODAS, revealed that 17 (68%) patients with somatization disorder and 16

(64%) patients with schizophrenia had a moderate disability ($n = 6$, 24%) patients with somatization disorder and 7 (28%) patients with schizophrenia had a mild disability, and 2 (8%) patients with either disorder had a severe level of disability.

The mean value of age at onset of illness was 34.48 ± 11.21 in the somatization disorder group, and for the schizophrenia group, it was 33.2 ± 10.8 . The mean value of the duration of illness was more 43.08 ± 24.69 (months) in somatization disorder than schizophrenia (49.91 ± 27.68). In contrast, a significant association was found between the level of disability among patients with a somatization disorder with their clinical variables such as age at onset, duration of treatment, and severity of illness (Table 3). Similarly, the level of disability had a significant association with variables such as comorbidity and suicide attempts among patients with schizophrenia (Table 4).

Assessment of different levels of disability among patients with somatization disorder and schizophrenia, using WHODAS, revealed that 20 (80%) patients with somatization disorder and 19 (76%) patients with schizophrenia had a moderate disability ($n = 6$, 24%) patients with somatization disorder and 7 (28%) patients with schizophrenia had a mild disability, and 2 (8%) patients with either disorder had a severe level of disability.

Assessment of various levels of family burden among patients with somatoform disorder and schizophrenia, using FBIS, demonstrated that the mean value of the level of burden among caregivers of patients with the somatization disorder was more (18.96 ± 9.93) when compared to the burden among caregivers of patients with schizophrenia (15.71 ± 9.67).

Table-3 Association Between the Level of Disability of Patients with Somatization Disorder And Their Clinical Variables (N = 25)

CLINICAL VARIABLES	CATEGORIES	LEVEL OF DISABILITY (N=25)			CHI-SQUARE VALUE	P-VALUE
		MILD	MODERATE	SEVERE		
AGE OF ONSET	<18 YEARS	0 (0%)	0 (0%)	1 (4%)	12.59	0.05*
	18-29 YEARS	2 (8%)	6 (24%)	0 (0%)		
	30-44 YEARS	3 (12%)	9 (36%)	1 (4%)		
	45-59 YEARS	1 (4%)	2 (8%)	0 (0%)		
DURATION OF ILLNESS	<5 YEARS	3 (12%)	13 (52%)	0 (0%)	4.24	0.12
	>5 YEARS	2 (8%)	5 (20%)	2 (8%)		
DURATION OF TREATMENT	<5 YEARS	3 (12%)	14 (56%)	0 (0%)	4.81	0.09
	>5 YEARS	1 (4%)	5 (20%)	2 (8%)		
CO-MORBIDITY	NIL	5 (20%)	14 (56%)	3 (12%)	6.26	0.18
	HTN	2 (8%)	0 (0%)	0 (0%)		
	DM	0 (0%)	1 (4%)	0 (0%)		
DURATION	<1 YEAR	1 (4%)	2 (8%)	0 (0%)	0.99	0.91

OF UNTREATED ILLNESS	1-3 YEARS	0 (0%)	1 (4%)	0 (0%)		
	>3 YEARS	4 (16%)	15 (60%)	2 (8%)		
LIFE TIME SUICIDE ATTEMPT	YES	0 (0%)	2 (8%)	0 (0%)	0.86	0.65
	NO	5 (20%)	16 (64%)	2 (8%)		
NUMBER OF ATTEMPTS	NIL	5 (20%)	15 (60%)	2 (8%)	6.02	0.42
	1	1 (4%)	0 (0%)	0 (0%)		
	2	0 (0%)	1 (4%)	0 (0%)		
	>2	1 (4%)	0 (0%)	0 (0%)		
SEVERITY OF ILLNESS	MILD	1 (4%)	0 (0%)	0 (0%)	6.43	0.04*
	MODERATE	4 (16%)	12 (48%)	0 (0%)		
	SEVERE	0 (0%)	6 (24%)	2 (8%)		

Table-4 Association Between the Level of Disability Among Patients with Schizophrenia And Their Clinical Variables (N = 25)

CLINICAL VARIABLES	CATEGORIES	LEVEL OF DISABILITY			CHI- SQUARE VALUE	P- VALUE
		MILD	MODERATE	SEVERE		
AGE OF ONSET	<18 YEARS	0 (0%)	1 (4%)	0 (0%)	8.67	0.73
	18-29 YEARS	4 (16%)	5 (20%)	0 (0%)		
	30-44 YEARS	3 (12%)	7 (28%)	2 (8%)		
	45-59 YEARS	0 (0%)	2 (8%)	0 (0%)		
	>60 YEARS	0 (0%)	1 (4%)	0 (0%)		
DURATION OF ILLNESS	<5 YEARS	3 (12%)	14 (56%)	0 (0%)	5.99	0.05*
	>5 YEARS	4 (16%)	3 (12%)	1 (4%)		
DURATION OF	<5 YEARS	3 (12%)	14 (56%)	0 (0%)	5.99	0.05*

TREATMENT	>5 YEARS	4 (16%)	3 (12%)	1 (4%)		
CO-MORBIDITY	NIL	4 (16%)	16 (64%)	1 (4%)	10.7	0.03*
	HTN	3 (12%)	0 (0%)	0 (0%)		
	DM	1 (4%)	0 (0%)	0 (0%)		
DURATION OF UNTREATED ILLNESS	<1 YEAR	1 (4%)	1 (4%)	0 (0%)	4.52	0.34
	>1 YEAR	1 (4%)	0 (0%)	0 (0%)		
	NIL	4 (16%)	15 (60%)	3 (12%)		
LIFETIME SUICIDE ATTEMPT	NO	5 (20%)	12 (48%)	0 (0%)	5.05	0.08
	YES	1 (4%)	5 (20%)	2 (8%)		
NO. OF ATTEMPTS	NIL	3 (12%)	14 (56%)	0 (0%)	12.59	0.05*
	1	0 (0%)	2 (8%)	2 (8%)		
	2	1 (4%)	2 (8%)	0 (0%)		
	>2	0 (0%)	1 (4%)	0 (0%)		
SEVERITY OF ILLNESS	MILD	2 (8%)	2 (8%)	0 (0%)	4.60	0.33
	MODERATELY ILL	3 (12%)	8 (32%)	3 (12%)		
	SEVERE	1 (4%)	6 (24%)	0 (0%)		

The association between the levels of burden with demographic variables among caregivers of patients with schizophrenia is illustrated in Table 5 and that of SD group is shown in Table 6. It demonstrated that in both the disorders, married caregivers had reported more burdens, and it was statistically significant (schizophrenia: $P = 0.01$ and SD: $P = 0.01$).

Table-5 Association Between the Level of Burden Among Caregivers Of Patients With Schizophrenia And Their Demographic Variables (N = 25)

DEMOGRAPHIC VARIABLES	CATEGORIES	LEVEL OF CAREGIVER BURDEN			CHI-SQUARE VALUE	P-VALUE
		MILD	MODERATE	SEVERE		
		n/%	n/%	n/%		

AGE IN YEARS	18-29 YEARS	1 (4%)	2 (8%)	1 (4%)	9.44	0.15
	30-44 YEARS	4 (16%)	0 (0%)	0 (0%)		
	45-59 YEARS	6 (24%)	6 (24%)	0 (0%)		
	>60 YEARS	1 (4%)	3 (12%)	1 (4%)		
GENDER	MALE	5 (20%)	0 (0%)	1 (4%)	5.62	0.06
	FEMALE	8 (32%)	10 (40%)	1 (4%)		
MARITAL STATUS	UNMARRIED	2 (8%)	0 (0%)	2 (8%)	13.27	0.01*
	MARRIED	11 (44%)	6 (24%)	1 (4%)		
	WIDOWED	0 (0%)	3 (12%)	0 (0%)		
EDUCATIONAL STATUS	10 YEARS OF SCHOOLING	11 (44%)	8 (32%)	1 (4%)	0.80	0.67
	>10 YEARS OF SCHOOLING	2 (8%)	3 (12%)	0 (0%)		
OCCUPATIONAL STATUS	EMPLOYED	9 (36%)	2 (8%)	2 (8%)	5.05	0.08
	UNEMPLOYED	4 (16%)	7 (28%)	1 (4%)		
INCOME PER CAPITA	UPPER MIDDLE CLASS	3 (12%)	2 (8%)	3 (12%)	2.58	0.63
	UPPER CLASS	2 (8%)	2 (8%)	2 (8%)		
	LOW INCOME (< Rs. 1000)	5 (20%)	5 (20%)	1 (4%)		
NO. OF DAYS ABSENT FROM WORK	<1-30 DAYS	5 (20%)	1 (4%)	0 (0%)	4.43	0.35
	>30 DAYS	0 (0%)	1 (4%)	0 (0%)		
	NIL	8 (32%)	8 (32%)	2 (8%)		
RELATIONSHIP WITH PATIENT	PARENT	3 (12%)	7 (28%)	0 (0%)	13.96	0.03*
	SPOUSE	8 (32%)	1 (4%)	2 (8%)		
	CHILD	0 (0%)	3 (12%)	0 (0%)		
	SIBLING	1 (4%)	0 (0%)	0 (0%)		

Table-6 Association Between the Level of Burden Among Caregivers of Patients with Somatization Disorder and Their Demographic Variables (N = 25)

DEMOGRAPHIC VARIABLES	CATEGORIES	LEVEL OF CAREGIVER BURDEN			CHI-SQUARE VALUE	P-VALUE
		MILD	MODERATE	SEVERE		
		n/%	n/%	n/%		
AGE IN YEARS	18-29 YEARS	2 (8%)	3 (12%)	0 (0%)	2.39	0.88
	30-44 YEARS	2 (8%)	4 (16%)	0 (0%)		
	45-59 YEARS	3 (12%)	5 (20%)	1 (4%)		
	>60 YEARS	2 (8%)	2 (4%)	1 (4%)		
GENDER	MALE	4 (16%)	7 (28%)	2 (8%)	0.49	0.78
	FEMALE	5 (20%)	6 (24%)	1 (4%)		
MARITAL STATUS	UNMARRIED	2 (8%)	1 (4%)	0 (0%)	13.27	0.01*
	MARRIED	7 (28%)	13 (52%)	1 (4%)		
	WIDOWED	0 (0%)	0 (0%)	1 (4%)		
EDUCATIONAL STATUS	10 YEARS OF SCHOOLING	5 (20%)	13 (52%)	3 (12%)	4.24	0.12
	>10 YEARS OF SCHOOLING	3 (12%)	1 (4%)	0 (0%)		
OCCUPATIONAL STATUS	EMPLOYED	7 (28%)	10 (40%)	2 (8%)	0.83	0.66
	UNEMPLOYED	2 (8%)	4 (16%)	0 (0%)		
INCOME (PER CAPITA MONTHLY)	MIDDLE CLASS	2 (8%)	6 (24%)	1 (4%)	1.81	0.77
	UPPER MIDDLE CLASS	3 (12%)	3 (12%)	0 (0%)		
	LOW INCOME	4 (16%)	5 (20%)	1 (4%)		
NO. OF DAYS ABSENT FROM	<1-30 YEARS	6 (24%)	8 (32%)	0 (0%)	5.98	0.20

WORK	>30 YEARS	2 (8%)	1 (4%)	1 (4%)		
	NIL	3 (12%)	4 (16%)	0 (0%)		
RELATIONSHIP WITH PATIENT	PARENT	2 (8%)	5 (20%)	0 (0%)	9.44	0.15
	SPOUSE	4 (16%)	6 (24%)	0 (0%)		
	CHILD	3 (12%)	0 (0%)	1 (4%)		
	SIBLING	2 (8%)	2 (8%)	0 (0%)		

DISCUSSION:

We aimed to assess the caregiver burden and disability of patients with somatization disorder or schizophrenia. We found that levels of disability and caregiver burden were comparable between somatization disorders and schizophrenia. Worldwide, mental disorders are one of the prime causes of morbidity and disability. As per the global health report 2001, mental illness accounted for 25% of the total disability and 16% of the total burden. A family member who has been living with the patient constitutes a major support system in meeting the patient's daily needs and continuing care in the community. The emotional impact of caring can trigger a range of emotional reactions such as fear, sadness, anger, guilt, stigma, and rejection among caregivers.¹¹

Even though more number of patients with somatization disorder ($n = 20$, 80%) or schizophrenia ($n = 19$, 76%) had moderate disability, results highlighted that the percentage of patients was slightly high in somatization disorders. The domain-wise analysis demonstrated that patients with somatization disorder scored higher disability in the participation in the society domain.

Krishnan et al. had found that patients with somatoform disorder scored higher on total disability and on the domains "getting around" and "participation in society" as compared to schizophrenia. The differences could be due to the nature of illness. In schizophrenia, patients often have cognitive deficits and lack of communication skills. In

contrast, patients with SD have somatic complaints like not being able to stand for long periods and not being able to walk a long distance.¹²

The comparison of levels of burden among caregivers indicated that caregivers of patients with somatization disorder had a moderate burden, and caregivers of patients with schizophrenia had a mild burden. Caregivers of patients with somatoform disorder had a higher level of burden in the FBIS domains financial burden, disruption of family interaction, and effects on the physical health of others. This might be due to the maintenance of the remission period by patients with schizophrenia, leading to better functioning and less disability, causing lesser burden.

Another study reported that caregivers of patients with schizophrenia had a higher level of burden in the mentioned FBIS domains and the overall family burden. A couple of studies found that in schizophrenia, the financial burden was the most common burden among the six domains.^{13,14} Disruption of family activities has also been reported to be more in schizophrenia.¹⁵

Authors of another study have shown that the level of psychosocial disabilities in patients suffering from somatization disorders were similar to those seen in other mental disorders such as depression, anxiety disorders, and affective disorders.¹⁶

A couple of studies have reported the age of onset as "the age at which first clear psychotic symptoms were observed"^{17,18}. The age at first hospitalization for psychiatric illness has been

considered as the age at onset in many other studies.³⁶⁻³⁸ The age at first contact with psychiatric service has also been reported as age at the onset by other researchers.^{19,20}

Further, Clinical Global Impression Severity scale ratings for the somatization disorder were comparable to schizophrenia. This finding is counterintuitive and may be explained by a few reasons: firstly, the study setting was a tertiary healthcare center, and therefore, the patients selected might have been more severely ill at baseline. That the mean duration of illness was higher for somatization disorders than schizophrenia in our sample may support this assertion. Second, the presence of comorbid depression, seen in many patients, may have contributed to the increased ratings of severity of illness by the clinicians.

Based on the results of this study, it can be inferred those patients with somatoform disorders experience considerable disability and their caregivers, too, experience levels of burden comparable with severe mental illness such as schizophrenia. Hence, the difficulties faced by these individuals need to be addressed effectively to improve the treatment outcome, along with other strategies.

CONCLUSION:

In this study patients with somatization disorder experience considerable levels of disability, and their caregivers go through various levels of burden in their daily life as compared to schizophrenia.

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