

A SELECTION OF TEN READINGS ON TOPICS RELATED TO MENTAL HEALTH 2022

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Selection of readings made by A/Prof Goh Lee Gan

READING I – NON-PHARMACOLOGICAL INTERVENTIONS IN BPSD

Md Hussin NS,¹ Karuppannan M,¹ Gopalan Y,¹ Gnanasan S,¹ Tan KM.² Exploration of non-pharmacological interventions in the management of behavioural and psychological symptoms of dementia. Singapore Med J. 2021 Oct 3. doi: 10.11622/smedj.2021125. Online ahead of print. PMID: 34600449.

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ABSTRACT

INTRODUCTION: Behavioural and Psychological Symptoms of Dementia (BPSD) are considered as integral parts of dementia. Whilst pharmacotherapy is reserved for severe symptoms of BPSD, the associated adverse effects can be detrimental. Therefore, non-pharmacological intervention is recommended to be the frontline in the management of BPSD. This study aimed to explore the non-pharmacological approaches for the management of BPSD including the strategies and barriers of implementing them in secondary care facilities in Malaysia.

METHODS: A qualitative study design was employed. Data were collected through observations and semi-structured interviews of 12 caregivers and 11 people with dementia (PWD) at seven secondary care facilities. Observations were written in the field notes and interviews were audio-recorded and transcribed. All data were subjected to thematic analysis.

RESULTS: Some personalised non-pharmacological interventions such as physical exercise, music therapy, reminiscence therapy, and pet therapy were conducted in several nursing care centres. Collaborative care between care providers and family members was found to be an important facilitating factor. Hence, lack of family support led to additional workload, which was beyond the job scope of the care providers. Other barriers identified for non-pharmacological interventions were cultural and language differences between care providers and PWD, inadequate staff numbers and training, and time constraints.

CONCLUSION: Although non-pharmacological approaches have been conducted to some extent in Malaysia, continuous education and training for the healthcare providers as well as the family members of PWD are needed to overcome the challenges with regards to their successful implementation.

READING 2 – FEAR OF CANCER RECURRENCE AMONG CANCER SURVIVORS IN SINGAPORE

Mahendran R,¹ Kua EH,¹ Liu J,^{1,2} Kuparasundram S,³ Simard S,⁴ Chan YH,⁵ Griva K.⁶ Fear of cancer recurrence among cancer survivors in Singapore. Singapore Med J. 2021 Jun;62(6):305-310. PMID: 3198918.

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ABSTRACT

INTRODUCTION: Fear of cancer recurrence (FCR) among cancer survivors is a persistent and distressing psychosocial concern that affects recovery and quality of life. The prevalence of FCR in Singapore is unknown. This cross-sectional study was designed to examine FCR and identify factors associated with FCR in mixed-cancer survivors locally.

METHODS: Cancer survivors in remission (n=404) were assessed for: FCR using the Fear of Cancer Recurrence Inventory (FCRI); emotional distress using the Hospital Anxiety and Depression Scale; and quality of life using the World Health Organisation Quality of Life-BREF. Clinical and severe/pathological FCR was determined based on the severity scale of FCRI, known as FCRI-Short Form. Multivariate logistic regression was performed to examine factors associated with FCR.

RESULTS: The mean score on the FCRI was 59.5 ± 30.4 . 43.6 percent of cancer survivors had clinical FCR and 32.1 percent had severe/pathological FCR. Younger age (odds ratio [OR] 0.952, 95 percent confidence interval [CI] 0.911-0.995, $p < 0.05$), higher educational status (OR 2.55, 95 percent CI 1.15-5.65, $p < 0.05$) and higher levels of emotional distress (OR 1.17, 95 percent CI 1.10-1.24, $p < 0.001$) were significantly associated with severe/pathological levels of FCR.

CONCLUSION: The present study is the first to determine levels of FCR among cancer survivors in Singapore. While the total FCR scores were similar to those of international studies, severe/pathological levels of FCR were found to be four times higher. These findings highlight a problem that is not widely recognised or acknowledged, but which deserves greater attention.

READING 3 – CLINICAL DEPRESSION AMONG PATIENTS AFTER ACUTE CORONARY SYNDROME

Leong LK,¹ Zuhdi ASM,¹ Hafidz MIA.¹ Clinical depression among patients after acute coronary syndrome: a prospective single-tertiary centre analysis. Singapore Med J. 2021 Dec;62(12):653-658. PMID: 32460450.

URL: doi: 10.11622/smedj.2020079. Epub 2020 May 27. PMID: 32460450 (Free full text).

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ABSTRACT

INTRODUCTION: Clinical depression is a known consequence of acute coronary syndrome (ACS) and is associated with an adverse outcome among these patients, although this is often under-recognised. Through this study, we investigated the incidence of depression in post-ACS patients and its associated factors.

METHODS: We conducted a prospective cohort study in 95 patients with ACS admitted to University Malaya Medical Centre, Malaysia. Clinical depression was assessed during the index admission and at 30 days after discharge, using the Patient Health Questionnaire-9 (PHQ-9). Data was analysed using IBM SPSS Statistics, and binary logistic regression was used to determine the independent factors associated with depression, after adjusting for significant demographic variables

and clinical characteristics. The strength of this association was presented as odds ratio and 95 percent confidence interval, and the significance level was set at 0.05.

RESULTS: The mean age of the study population was about 60 years, and 72.6 percent of the patients were male. Symptoms of depression were present in 88.4 percent of the patients at baseline. Depression at 30 days was more likely in female patients, patients with diabetes mellitus, and patients on dialysis ($p=0.024$, $p < 0.001$, $p=0.008$, respectively). Patients with baseline moderate to severe depression were more likely to have moderate to severe depression at 30 days ($p < 0.001$). Baseline depression was the strongest predictor of depression at 30 days. An increment of one unit in PHQ-9 baseline score increased the risk of developing severe depression at 30 days by 31 percent.

CONCLUSION: Depression was prevalent in our post-ACS patients. The associated factors were the female sex, diabetes mellitus, and dialysis treatment.

READING 4 – CHANGES IN THE PREVALENCE IN THE COMORBIDITY OF MENTAL AND PHYSICAL DISORDERS IN SINGAPORE BETWEEN 2010 AND 2016

Abdin E,¹ Chong SA,¹ Vaingankar JA,¹ Shafie S,¹ Subramaniam M,¹ Seah D,² Chan CT,³ Ma S,⁴ James L,⁴ Heng D.⁴ Changes in the prevalence of comorbidity of mental and physical disorders in Singapore between 2010 and 2016. *Singapore Med J.* 2020 Aug 17. PMID: 32798362.

URL: doi: 10.11622/smedj.2020124. PMID: 32798362 (Free full text).

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ABSTRACT

INTRODUCTION: Literature examining changes in the prevalence of comorbidity of mental and physical disorders in recent years is scarce. The present study sought to examine whether there were changes in the prevalence of comorbidity of mental and physical disorders in Singapore between 2010 and 2016.

METHODS: We extracted data from two repeated nationally representative cross-sectional surveys conducted among resident adults aged ≥ 18 years in Singapore. Significant changes were tested using pooled multinomial logistic regression analyses.

RESULTS: The prevalence of comorbid mental and physical disorders increased significantly from 5.8 percent in 2010 to 6.7 percent in 2016. Among those with physical disorders, there were significant increases over time in the prevalence of comorbid generalised anxiety disorder (GAD) (0.1 percent vs 0.4 percent) and obsessive compulsive disorder (OCD) (1.4 percent vs 3.9 percent) in diabetes mellitus, and alcohol dependence in cardiovascular disorders (0.1 percent vs 1.3 percent). Among those with mental disorders, there were significant increases over time in the prevalence of comorbid diabetes mellitus in OCD (4.1 percent vs 10.9 percent), cancer in major depressive disorder (0.4 percent vs 2.4 percent), and cardiovascular disorders in GAD (0.4 percent vs 6.7 percent) and alcohol dependence (0.9 percent vs 11.8 percent). Significant changes in the overall prevalence of comorbid mental and physical disorders were also observed across age groups, and education and employment status.

CONCLUSION: The prevalence of comorbid mental and physical disorders increased significantly over time. This finding supports the need for more appropriate clinical management with better integration between mental health and general medical care professionals across all aspects of the healthcare system to treat comorbidity in Singapore.

READING 5 – VALIDATION OF WHO DISABILITY ASSESSMENT SCHEDULE 2.0 AMONG OLDER ADULTS IN SINGAPORE

Subramaniam M,¹ Abdin E,¹ Vaingankar JA,¹ Sagayadevan V,¹ Shahwan S,¹ Picco L,¹ Chong SA.¹ Validation of the World Health Organization Disability Assessment Schedule 2.0 among older adults in an Asian country. Singapore Med J. 2020 May;61(5):246-253. PMID: 31197373.

URL: doi: 10.11622/smedj.2019049. PMID: 31197373 (Free full text).

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ABSTRACT

INTRODUCTION: As populations age globally and the burden of chronic illnesses increases, valid measures of disability are needed for assessment in the older adult population. The aim of the current analysis was to explore the psychometric properties and validity of the 12-item World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0) in an epidemiological survey of older adults in Singapore.

METHODS: The study comprised secondary data analysis of the Well-being of the Singapore Elderly study. Inclusion criteria for the study were Singapore residents (Singapore citizens and permanent residents) aged 60 years and above. The 12-item interviewer-administered version of the WHODAS 2.0 was used to assess disability in the study. Data on cognition, health status, and sociodemographic information were collected. Depression was assessed using the Automated Geriatric Examination for Computer Assisted Taxonomy.

RESULTS: The study found a one-factor model solution for WHODAS 2.0 with a high internal consistency of all items. The internal consistency for the overall scale was 0.92. The WHODAS 2.0 score positively correlated with multimorbidity, perceived overall health status, depression, and subsyndromal depression. There was a significant inverse association between the WHODAS 2.0 score and the cognitive status. After adjustment for all sociodemographic variables in the multiple linear regression analysis, these measures remained significantly associated with the WHODAS 2.0 score.

CONCLUSION: WHODAS 2.0 was found to be a valid measure of disability among older adults. However, further research is required to determine its usefulness as a responsive instrument that can detect change following interventions.

READING 6 – NEGATIVE AFFECT MODERATES THE LINK BETWEEN BODY IMAGE DISSATISFACTION AND DISORDERED EATING AMONG PSYCHIATRIC OUTPATIENTS IN A MULTI-ETHNIC SINGAPORE

Teh WL,¹ Mahesh MV,¹ Abdin E,¹ Tan J,¹ Rahman RFBA,¹ Satghare P,¹ Chong SA,¹ Subramaniam M,¹ Sim K,² Basu S,³ Kandasami G,⁴ Gupta B.⁵ Negative affect moderates the link between body image dissatisfaction and disordered eating among psychiatric outpatients in a multi-ethnic Asian setting. Singapore Med J. 2021 Oct;62(10):535-541.

URL: doi: 10.11622/smedj.2020058. PMID: 32299187 (Free full text).

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ABSTRACT

INTRODUCTION: Few studies have investigated the factors that affect the relationship between body image dissatisfaction and disordered eating locally. Our study aimed to investigate the moderating effects of depression and anxiety levels on the body dissatisfaction-disordered eating link in Singapore.

METHODS: A total of 329 participants completed a set of questionnaires that included various scales pertaining to eating behaviours, body image, psychological distress and quality of life.

RESULTS: Participants were diagnosed with schizophrenia (47.4 percent), depression (46.8 percent), and substance use disorders (5.8 percent). Moderation analyses revealed that depression ($F [9, 251] = 18.50, p < 0.001, R^2 \text{ change} = 0.021$) and anxiety levels ($F [9, 268] = 19.54, p < 0.001, R^2 \text{ change} = 0.014$) were significant moderators of the relationship between body dissatisfaction and disordered eating scores. Subsequent multivariate linear logistic regression analyses showed that high disordered eating scores were significantly associated with lower physical ($F [8, 273] = 9.59, R^2 = 0.22, p < 0.001, \beta = -0.27, p < 0.001$), psychological ($F [8, 273] = 10.51, R^2 = 0.49, p < 0.001, \beta = -0.27, p < 0.001$), social ($F [8, 256] = 6.78, R^2 = 0.18, p < 0.001, \beta = -0.18, p = 0.004$) and environment ($F [8, 273] = 5.29, R^2 = 0.13, p < 0.001, \beta = -0.19, p = 0.001$) quality of life scores after controlling for sociodemographic covariates.

CONCLUSION: Greater effort should be dedicated to the screening of disordered eating behaviours in psychiatric outpatients presenting with greater psychological distress.

READING 7 – SAFETY ATTITUDES, BURNOUT AND WELLBEING AMONG HEALTHCARE WORKERS IN SINGAPORE, MALAYSIA, INDIA, AND INDONESIA DURING THE COVID-19 PANDEMIC

Kanneganti A,¹ Tan BY,² Leow AS,² Sharma VK,² Sia CH,^{2,7} Nik Ab Rahman NH,^{3,4} Denning M,⁵ Goh ET,⁵ Kinross J,⁵ Lim LJ,⁶ Chua YX,⁸ Tan M,⁹ Tan LF,¹⁰ Wan YM,¹¹ Sharma AK,¹² Danuaji R,¹³ Komal Kumar RN,¹⁴ Sheng CK,¹⁵ Kheng CP,¹⁶ Abdul Karim SS,¹⁷ Abdul Ghani MN,¹⁸ Mahmud S,¹⁹ Chan YH,²⁰ Sim K,^{21,22} Ooi SB.^{23,24}
Safety attitudes, burnout and wellbeing among healthcare workers during the COVID-19 pandemic: an Indo-Pacific regional cross-sectional study. Singapore Med J. 2022 Feb 10. PMID: 35139631.

doi: 10.11622/smedj.2022014. PMID: 35139631 (Free full text).

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ABSTRACT

INTRODUCTION: The COVID-19 pandemic has had an unprecedented impact in Asia and has placed significant burden on already stretched healthcare systems. We examined the impact of COVID-19 on safety attitudes among healthcare workers (HCWs) as well as their associated demographic and occupational factors, and measures of burnout, depression, and anxiety.

METHODS: A cross-sectional survey study utilising snowball sampling was performed involving doctors, nurses, and allied health professions from 23 hospitals in Singapore, Malaysia, India, and Indonesia between 29 May 2020 and 13 July 2020. This survey collated demographic data and workplace conditions and included three validated questionnaires: Safety Attitudes Questionnaire (SAQ); Oldenburg Burnout Inventory; and Hospital and Anxiety Depression Scale. We performed multivariate mixed model regression to assess for independent associations with the SAQ Total Percentage Agree Rates (PAR).

RESULTS: We obtained 3,163 responses. A SAQ Total PAR of 35.7 percent, 15.0 percent, 51.0 percent, and 3.3 percent was calculated among respondents from Singapore, Malaysia, India, and Indonesia, respectively. Burnout scores were highest among respondents from Indonesia and lowest in respondents from India at 70.9-85.4 percent versus 56.3-63.6 percent, respectively. Multivariate analyses revealed that meeting burnout and depression thresholds, and shifts lasting ≥ 12 hours were significantly associated with lower SAQ Total PAR.

CONCLUSION: Addressing factors contributing to high burnout and depression, and placing strict limits on work hours per shift may contribute significantly towards improving safety culture among HCWs and should remain priorities as this pandemic continues.

READING 8 – LIFETIME PREVALENCE AND CORRELATES OF SCHIZOPHRENIA AND OTHER PSYCHOTIC DISORDERS IN SINGAPORE

Subramaniam M,^{1,2} Abdin E,¹ Vaingankar JA,¹ Sambasivam R,¹ Zhang YJ,¹ Shafie S,¹ Chong SA,¹ Tan CS,² Basu S,³ Chan CT,³ Tang C,³ Verma SK,⁴ Chua HC,⁵ Heng D.⁶ Lifetime Prevalence and Correlates of Schizophrenia and Other Psychotic Disorders in Singapore. *Front Psychiatry*. 2021 Mar 11;12:650674.

URL: doi: 10.3389/fpsyt.2021.650674. PMID: 33776823 (Full free text).

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ABSTRACT

INTRODUCTION: The current study aimed to establish the lifetime prevalence of schizophrenia and other psychotic disorders, its sociodemographic correlates and association with physical disorders using data from the Singapore Mental Health Study (SMHS 2016).

METHODS: A two-phase design comprising population-level screening of psychotic symptoms using the World Health Organisation Composite International Diagnostic Interview version 3.0 psychosis screen followed by clinical reappraisal based on the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) criteria were used to establish the prevalence.

RESULTS: A total of 6,126 respondents completed the first phase of the study, giving a response rate of 69.5 percent. 5.2 percent (n = 326) of respondents endorsed at least one symptom in the psychosis screen. After the phase two clinical reappraisal interviews and adjusting for false-negative rate, the corrected prevalence of schizophrenia and other psychotic disorders was 2.3 percent (95 percent CI: 2.3-2.3 percent). The odds of having DSM-IV schizophrenia and other psychotic disorders were significantly higher among those of Malay ethnicity (OR = 3.9, 95 percent CI 1.4-11.0), and those who were unemployed (OR = 4.3, 95 percent CI 1.2-15.9). 80.4 percent of those with a psychotic disorder had consulted a doctor or a mental health professional for their symptoms.

CONCLUSIONS: Our results indicate that approximately 2.3 percent of Singapore's community-dwelling adult population had a lifetime diagnosis of schizophrenia and other psychotic disorders. While the treatment gap of the disorder was relatively small, the severe nature of the disorder emphasises the need for continued outreach and early diagnosis and treatment.

READING 9 – PSYCHOLOGICAL SEQUELAE WITHIN CHINA, REST OF ASIA, AND EUROPE DURING COVID-19 PANDEMIC

Tng XJJ,¹ Chew QH,¹ Sim K.² Psychological sequelae within different populations during the COVID-19 pandemic: a rapid review of extant evidence. Singapore Med J. 2020 Jul 30. PMID: 32729312.

URL: doi: 10.11622/smedj.2020111. PMID: 32729312 (Full free text).

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ABSTRACT

The rapid spread of COVID-19 has a potentially significant impact on not only physical health but also psychological well-being. To our best knowledge, no review thus far has consolidated the psychological impact of COVID-19 across different subpopulations. A systematic search of the literature until 15 June 2020 found 150 empirical papers pertinent to the mental health consequences of the pandemic. The majority (87.3 percent) were from China (45.3 percent), the rest from Asia (22.0 percent) and Europe (20.0 percent), and mostly examined the general population (37.3 percent), healthcare workers (31.3 percent), and those with pre-existing mental and physical illnesses (14.7 percent). The most common psychological responses across these subpopulations were anxiety (overall range 24.8-49.5 percent), depression (overall range 18.6-42.6 percent), and traumatic stress symptoms (overall range 12.7-31.6 percent). Healthcare workers and those with pre-existing physical and mental illnesses were more severely affected. Future studies are needed on under-examined subgroups such as the elderly and recovered COVID-19 patients.

READING 10 – CORTICOSTEROID PHOBIA IN SINGAPORE

Choi E¹ Chandran NS,¹ Tan C.¹ Corticosteroid phobia: a questionnaire study using TOPICOP score. Singapore Med J. 2020 Mar;61(3):149-153. PMID: 32488277.

URL: doi: 10.11622/smedj.2019110. PMID: 32488277 (Full free text).

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ABSTRACT

INTRODUCTION: Topical corticosteroids (TCS) are commonly used in dermatology for their anti-inflammatory action. The recent development of the TOPICOP® (Topical Corticosteroid Phobia) scale to assess steroid phobia has made the quantification and comparison of steroid phobia easier. The objective of this study was to assess the degree of steroid phobia at our institute and identify sources from which patients obtain information regarding TCS.

METHODS: A cross-sectional survey was performed of dermatology patients regardless of steroid use. The TOPICOP scale was used for the survey. Sources from which patients obtained information were identified and their level of trust in these sources assessed.

RESULTS: 186 surveys were analysed. The median domain TOPICOP subscores were 38.9 percent (interquartile range [IQR] 27.8-50.0 percent, standard deviation [SD] 24.4 percent) for knowledge and beliefs, 44.4 percent (IQR 33.3-66.7 percent, SD 24.4 percent) for fears, and 55.6 percent (IQR 33.3-66.7 percent, SD 27.2 percent) for behaviour. The median global TOPICOP score was 44.4 percent (IQR 33.3-55.6 percent, SD 17.6 percent). The female sex was associated with higher behaviour, fear, and global TOPICOP scores. There was no difference in the scores based on disease condition, steroid use, age, or education. Dermatologists were the most common source of information on topical steroids and trust was highest in dermatologists.

CONCLUSION: The prevalence of steroid phobia in our dermatology outpatient setting was moderately high, with gender differences. Dermatologists were the most common source of information on TCS, and it was heartening to note that trust was also highest in dermatologists. Strategies to target steroid phobia should take these factors into account.