

# Impact of Psoriasis on Psychological Well-being–Screening by GHQ-12

**Padmavathi Nagarajan**

*Assistant Professor, College of Nursing, JIPMER (Jawaharlal Institute of Post Graduate Medical Education and Research), Pudhucherry*

## ABSTRACT

**Background:** Psoriasis is a chronic, inflammatory, relapsing dermatological condition with a complex etiopathogenesis. It can cause significant physical and psychological morbidity in those whom it affects.

**Aim:** The aim of the study is to investigate the impact of psoriasis on psychological health among patients with psoriasis and to identify the association of psychological well being with the selected demographic variables.

**Method and Materials:** A cross-sectional descriptive study was conducted that included 200 patients diagnosed with various types of psoriasis who attended Dermatologic Out-Patient Department of a tertiary care hospital. 12-items General Health Questionnaire (GHQ-12) was used to assess the psychological well being.

**Results:** Psychological distress was reported by 64 (32%) subjects and 48 (24%) subjects reported severe psychological distress and more psychological problems.

**Conclusion:** The study results indicate that psychological problems are common among patients with psoriasis and a simple screening instrument like GHQ-12 may be used to detect the problems for subsequent evaluation and management.

**Keywords:** *Psoriasis, Psychological well being, General Health Questionnaire (GHQ-12)*

## INTRODUCTION

Psoriasis is a chronic skin disease that includes unpredictable periods of remission and relapse requiring long-term therapy. Many patients with psoriasis are frightened and embarrassed by psoriasis, experiences discrimination from others because of visibility of skin lesions. The social and psychological impact of psoriasis has been explored in many studies and stresses the importance of measuring and planning clinical interventions to reduce the distress associated with the disease. Some of the studies have proved that the better understanding and positive attitude towards the disease reduces the severity of the symptoms.<sup>1</sup>

Psoriasis can profoundly influence a patient's self-image, self-esteem, and sense of well-being. Studies have indicated that persons with a cutaneous disease experience a heightened level of distress, as measured by the General Health Questionnaire-12 (GHQ-12).<sup>2</sup>

Life stresses had been found as both a cause of psoriasis and as an aggravating factor in the disease. In different large epidemiological studies, up to 79% patients of psoriasis had a negative impact on their lives, and psoriasis was reported to be associated with a stressful life event in 10-90%, depression in 24-51%, felt shame and embarrassment over their appearance in 89%, lack of confidence in 42%, family friction in 26%, wish to be dead to active suicidal ideation in 9.7-5.5%, addiction and alcoholism in 18% and also significant impact upon sexual function.<sup>3</sup>

A recent study conducted by Golpour et al revealed that patients with psoriasis reported significantly higher degrees of depression and anxiety.<sup>4</sup> Further, Schmitt and Ford investigated the role of depression in psoriasis. Among two hundred and sixty five adults with psoriasis, thirty-two percent of all participants screened positive for depression. Both dissatisfaction with anti-psoriatic treatment and illness-related stress were highly associated

with depression.<sup>5</sup> Hence, the study was aimed to assess the psychological well being of patients with psoriasis by using 12-items General Health Questionnaire (GHQ-12).

score ranges from 0-36 and a score greater than 15 is being taken as evidence of psychological distress.

**MATERIALS & METHOD**

A cross-sectional descriptive study was carried out among 200 patients diagnosed with psoriasis among those who attended Dermatologic Out-Patient Department of a tertiary care hospital. Participants were selected by convenience sampling according to the inclusion criteria. Subjects of both sex and who belonged to the age group of 18 to 65 years were included in the study. In addition to the socio-demographic data sheet, General Health Questionnaire-12 (GHQ-12 by Goldberg)<sup>6</sup> was used to assess the psychological well being. The GHQ-12 has high validity and it is not influenced by gender, age or level of education. The statements given in the scale are used to find out whether the respondent has experienced a particular symptom or behaviour recently. Each item is rated on a four-point scale (less than usual, no more than usual, rather more than usual, or much more than usual) with the respective scoring of 0-1-2 and 3. The

**RESULTS**

The responses of the subjects to each of the items of GHQ-12 are shown in **Table 1**. Out of 200 subjects, 125 (62.5%) subjects said that they thought themselves as worthless person; 96 (48%) subjects complained that their sleep was disturbed since they were worried; 115 (57.5%) subjects expressed that they were constantly under strain. 121 (60.5%) said that they were unhappy and depressed than usual whereas 116 (58%) subjects reported that they were unhappy, all things considered.

Further, the overall responses obtained from GHQ-12 which indicates the level of psychological distress reported by the subjects are presented in **table 2**. It showed that 46 (23%) subjects had not experienced any distress. Psychological distress concerned with their general well being was reported by 64 (32%) subjects and 48 (24%) of the subjects reported severe psychological distress and more psychological problems. There was no significant association between psychological well being with the socio demographic variables.

**Table 1: Distribution of responses to each of the items of GHQ-12**

(N = 200)

Sl. No.	Question	0		1		2		3	
		No.	%	No.	%	No.	%	No.	%
1.	Been able to concentrate on what you're doing	9	4.5	115	57.5	60	30	16	8
2.	Lost much sleep over worry	71	35.5	19	9.5	96	48	14	7
3.	Felt you were playing a useful part in things	3	1.5	144	72	35	17.5	18	9
4.	Felt capable of making decisions about things	7	3.5	116	58	59	29.5	18	9
5.	Felt constantly under strain	36	18	17	8.5	115	57.5	32	16
6.	Felt you couldn't overcome your difficulties	57	28.5	30	15	94	47	19	9.5
7.	Been able to enjoy your normal day-to-day activities	1	0.5	102	51	85	42.5	12	6
8.	Been able to face up to your problems	3	1.5	134	67	56	28	7	3.5
9.	Been feeling unhappy and depressed	44	22	25	12.5	121	60.5	10	5
10.	Been losing confidence in yourself	87	43.5	64	32	39	19.5	10	5
11.	Been thinking of yourself as a worthless person.	125	62.5	12	6	41	20.5	22	11
12.	Been feeling reasonably happy, all things considered	12	6	61	30.5	116	58	11	5.5

**Table 2: Psychological distress based on GHQ-12**

(N = 200)

GHQ-12 score (Score range: 0-36)	Number of subjects	Percentage (%)
0-10 (No stress)	46	23
11-12 (Typical)	20	10
13-14 (Mild stress)	22	11
15-20 (Evidence of distress)	64	32
21-36 (Severe psychological stress)	48	24

## DISCUSSION

Psoriasis is one of the most “stress sensitive” skin diseases. Basavaraj et al stated that stress is a well-known trigger factor in the appearance or exacerbation of psoriasis.<sup>7</sup> Psychosocial factors have been implicated in the onset and exacerbation of psoriasis in 40% to 80% of patients.<sup>8</sup> The effect of psoriasis on quality of life (QoL) and the resulting psychosocial disability is usually greater than physical disability.<sup>9</sup> Further, psoriasis is associated with a variety of psychological constructs including stigmatization, poor self esteem, suicidal ideation, stress and sexual dysfunction.

The responses obtained from General Health Questionnaire indicated that the psychological distress concerned with general well being was experienced by 53 (26.5%) of study subjects while severe psychological problems were reported by 47 (23.5%) subjects. This result is similar to the result reported by Colombo et al who found psychological distress in 46% of their patients.<sup>10</sup> Similarly, Fried et al found that half of their patients were found to have moderate to extreme levels of anxiety, depression, and anger.<sup>11</sup>

In a recent study conducted by Panebianco et al among dermatological patients including psoriasis demonstrated that out of 508 (78%) subjects who completed the GHQ-12, 35.2% subjects were suggested for psychological consultation and 15.7% subjects were recommended for psychological consultation. The authors concluded that a simple instrument like GHQ-12 may be useful to detect patients at risk of psychological problems and to refer them subsequently for psychological consultation.<sup>12</sup>

Madrid Alvarez et al assessed the psychological state of patients with psoriasis receiving systemic treatment in a psoriasis unit, especially those with mild or no disease involvement. Findings indicated that it is necessary to assess the psychological state of patients with psoriasis, because psychological effects persisted even in cases where the disease was almost totally controlled.<sup>13</sup>

In addition, a study conducted by Nagarajan and Thappa revealed that psychological interventions improve the quality of life of people with psoriasis.<sup>14</sup> Many other studies have also stressed the importance of evaluation and management of psychological factors associated with the treatment aspects of psoriasis.<sup>15</sup>

## CONCLUSION

Psoriasis is a complex, multifaceted skin condition which affects the physical, psychological, emotional, social and spiritual health of an individual who suffers from this chronic disease. Multidimensional approach is needed for the successful treatment outcome for this group of patients. GHQ-12 is a simple and useful screening instrument to evaluate psychological distress among these patients.

**Ethical Clearance:** Ethical approval was obtained from Institute Ethics Committee (Humans), JIPMER, Pudhucherry.

## ACKNOWLEDGMENT

I sincerely thank Dr. Karalene Karunagari, Principal, Rani Meyyammai College of Nursing, Annamalai University and Dr. D.M. Thappa, Director, NEIGRIMS, Shillong, Meghalaya for their valuable guidance and support in conducting the study.

**Sources of Funding:** Nil

**Conflict of Interest:** Nil.

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