Abstract

Introduction: Heightened anxiety levels and mood symptoms have been reported in women with low grade cervical dysplasia.   However, little about the prevalence of psychiatric morbidity and the associated biopsychosocial factors is known among Chinese patients in Hong Kong.   There is no well-established screening tool for psychiatric disorders in this clinical population.

Aim: To determine the prevalence of psychiatric morbidity, identify the correlates of psychiatric morbidity and evaluate the effectiveness of the Chinese versions of the Hospital Anxiety Depression Scale (HADS), the Beck Anxiety Inventory (BAI) and the Beck Depression Inventory (BDI) as a screening instrument for psychiatric morbidity in Chinese women with low grade cervical dysplasia.

Method: This is a cross-sectional study that recruited consecutive clients from a local Colposcopy Clinic from April 2012 to June 2012.   Participants' characteristics including socio-demographic data, past medical history, past psychiatric history, past sexual history and disease status were recorded.   The HADS, BAI and BDI were administered. Psychiatric diagnoses were made by using the Chinese-bilingual Structured Clinical Interview for DSM-IV Axis I Disorders, patient version (CB-SCID-I/P).   Scores of the instruments were compared against the psychiatric diagnoses.

Results: 137 subjects were recruited.   The point prevalence of any current psychiatric disorders, current anxiety disorders and current depressive disorders was 32.1%, 22.6% and 12.4% respectively.   Generalized anxiety disorder was the single most common disorder (12.4%).

The two independent factors identified to be associated with any current psychiatric disorders, current anxiety disorders and current depressive disorders were a family history of mental illness and increased number of lifetime sex partners.   Being on welfare was associated with any current psychiatric disorders and current depressive disorders.   An increased number of terminations of pregnancy (TOP) was associated with any current psychiatric disorders and anxiety disorders.   Medical insurance coverage and perceived adequate support from family and friends were associated with anxiety disorders and active follow-up for physical illness was associated with depressive disorders.

The mean scores of the HADs, BAI and BDI were calculated and the difference between the scores of clients with and without psychiatric disorders was statistically significant.   ROC analyses were performed and the effectiveness of the three instruments as screening tools was examined.

Discussion: The prevalence of psychiatric disorders and associated factors from this study were comparable to overseas studies.   The clinical implications, strengths and limitations and direction for future research were discussed.

Conclusion: Psychiatric disorders are common in Chinese patients with low grade cervical dysplasia.   Identifying associated factors are useful in case recognition and referral for timely intervention.   There is a need to develop an effective screening tool for psychiatric morbidity in this clinical population.

Key words: Cervical dysplasia, psychiatric morbidity, predictors, HADS, BAI, BDI