ABSTRACT

Background: Renal transplantation is a form of renal replacement therapy (RRT) for end-stage renal disease. This modality of RRT is becoming more common in Hong Kong. The number of renal transplant (RT) patients is exceeding that of dialysis patients. RT is the preferred form of RRT due to better medical outcome. However, little is known about the psychiatric morbidity among RT recipients.

Aim: To determine the prevalence of psychiatric morbidity, identify correlates of psychiatric morbidity and evaluate the effectiveness of the 12-item General Health Questionnaire (GHQ-12) as a screening tool for psychiatric morbidity in Chinese RT recipients.

Method: This is a cross-sectional study which randomly selected 175 RT recipients from the Renal Transplant Clinic of a major hospital in Hong Kong. The study took place from September 2010 to June 2011. Socio-demographic data, clinical features and psychiatric background of the participants were recorded. GHQ-12 was administered. Psychiatric diagnoses were established by the Chinese-bilingual Structured Clinical Interview for DSM-IV Axis I Disorders (SCID). Scores of GHQ-12 were compared against the psychiatric diagnoses.

Results: One hundred and fifty-seven participants were interviewed. The point prevalence of overall psychiatric disorders, depressive disorders and anxiety disorders were 56.1%, 35.7% and 29.9% respectively. Major depressive disorder was the most common depressive disorder while generalized anxiety disorder was the most common anxiety disorder. Fear of rejection was found to be predictive of current psychiatric disorders, current depressive disorders and current anxiety disorders. Fewer hours of contact with confidant per week was found to be predictive of current psychiatric disorders and current depressive disorders. Not working and a history of graft rejection were found to be predictive of current depressive disorders. A family history of mental illness was found to be predictive of current anxiety disorders. The GHQ-12 was effective as a screening tool for current psychiatric disorders and current depressive disorders with good sensitivity and specificity using the cut-off point at 0/1 in the [0-0-1-1] scoring system and 12/13 in the [0-1-2-3] scoring system, respectively. The performance of GHQ-12 for current anxiety disorders was unsatisfactory.

Conclusion: Psychiatric disorders are common in Chinese RT recipients. Factors associated with psychiatric morbidity were identified and GHQ-12 was evaluated as a screening tool for psychiatric disorders to help physicians identify patients who are at risk of psychiatric morbidity.