

## A STUDY OF NEUROSIS IN RELATION TO DEMOGRAPHICAL AND THERAPEUTICAL MEASURES

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### ABSTRACT

*The present study essentially aims at a demographic study of neurotic disorders. Secondly, it involves a therapeutic study to evaluate and compare the effectiveness of drug therapy with yoga therapy, either alone or together in the treatment of neurosis. The sample of this study consisted of 60 neurotic patients who attended the O.P.D. of Kaya Chikitsa Deptt and Yoga Clinic of S.S. Hospital, B.H.U., Varanasi. A battery of tests were administered to neurotic patients before undertaking therapy to establish the baseline and all the tests were repeated after undergoing therapies for a period of three months. Patient showed improvement indicating each treatment yielded significant improvement. In instances, where differences in treatment effectiveness were observed, combined therapy yielded more positive outcomes than did yoga and drug therapy, whereas yoga therapy yielded some what positive outcomes than did drug therapy.*

**Key Words :** Neurotic Disorder; Domicile Status; Family structure; Drug therapy; Yoga therapy; Combined therapy; Anxiety; Depression

### INTRODUCTION

Globalization, modernization, unlimited urge to achievement, rapidly changing work environment lead to a systematic pressure on life style leading to stress. There is evidence that stressful living and working conditions play a part in causing neurotic disorders. Neurosis is often regarded as a prolonged and irritating condition. Modigliani (1983) discusses neurosis as a means of adapting to reality with or without some degree of suffering. Neurosis occupies a middle ground between psychiatric illness and somatic diseases. Coleman (1981) has viewed that the neurotics experience severe anxiety in the face of the stress situations in comparison to normal one's and resort to the use of unhealthy neurotic defense patterns. The following objectives were set for the present study :

- (i) To study the effect of different age groups, sex, marital status, domicile status and family structure on neurotic disorder.
- (ii) To evaluate the effect of Yoga, drug and combined (yoga+drug) therapy on neurotic disorder.
- (iii) To determine whether the combined treatment of yoga and drug therapy is superior to alternative therapeutic approaches in the treatment of neurotic disorder.

### METHODOLOGY

The present study is a hospital based field study through random sampling procedure conducted at S.S. hospital and its post-test is a field experiment done in a normal clinical setting. The sample for the present study consisted of 60 patients diagnosed as neurosis on the basis of DSM-II criteria by a consultant psychiatrist of the Kaya Chikitsa Deptt and Yoga Clinic of S.S. Hospital, B.H.U., Varanasi. They belonged to either of sex, male and female, ranging from 10 to 59 years of

age and belonged to different settings i.e. rural and urban. All the subjects were administered the following psychological tests : (i) Sinha's Comprehensive Anxiety test (SCAT) by Sinha & Sinha (2003). (ii) Beck Depression Inventory (B.D.I.) By Prasanta & Arora, (1988). (iii) An Adjustment Scale By Tripathi, (1989). The patients were evaluated on the basis of a structured proforma. Drug therapy, yoga therapy & combination of both were evaluated. The association of neurotic disorder with demographical factors was worked out by computing incidence percentage. The pattern of improvement produced by drug, yoga practices and combined therapy was computed in terms of comparative pattern of changes. t-test was used to observe the differences between pre and post-test. In order to compare the treatment t-test with differences between pre and post-test was calculated.

### RESULT AND DISCUSSION

**Age Incidence:** The age group 20 to 29 years accounts for 36.67% of all patients, followed by age group 30 to 39 years (33.33%). Thereafter, neurosis sharply decreases as we approach 59 years of age. The present finding that neurotic disturbance reaches a peak in the 20 to 39 age group is in agreement with the findings of Verghese & Beig (1974) & Veera Raghavan, (1978).

**Sex :** In the group of 60 cases of neurosis, 45 (75%) were males and 15 (25%) were females. This study is not in agreement with the findings as Verghese and Beig (1974) who found neurosis is more common in females than in males.

**Marital Status:** 63.33% were married, 30% were unmarried and 6.67% were widow/er. Similar relationship is reported by Verghese and Beig (1974), Veera Raghavan (1978) and Kutaiba (1985).

Table 1. Pattern of Demographical Characteristics in Neurotic Disorder

Group (year)	Frequency	%
<i>Age</i>		
10-19	9	15
20-29	22	36.67
30-39	20	33.33
40-49	6	10
50-59	3	5
Total	60	100
<i>Sex</i>		
Male	45	75
Female	15	25
Total	60	100
<i>Marital Status</i>		
Married	38	63.33
Unmarried	18	30
Widow/er	4	6.67
Total	60	100
<i>Domicile Status</i>		
Urban	44	73.33
Rural	16	26.67
Total	60	100
<i>Family Structure</i>		
Nuclear	42	70
Joint	18	30
Total	60	100

Table 2. Means, Sds and t values of differences between pre and post treatment scores on psychological parameters

Variable	Mean Differences between pre and post-test			t value		
	DT	YT	CT	DTvs YT	DTvs CT	YT vs CT
<i>SCAT</i>						
Mean	8.60	13.00	20.30	2.11*	5.71**	.95**
SD	3.29	5.31	5.20			
<i>B D I</i>						
Mean	4.80	6.60	10.70	2.42*	4.11**	2.75**
SD	1.47	1.91	4.05			
<i>Adjustment</i>						
Mean	7.00	8.00	12.60	0.80	3.53**	.07**
SD	2.86	2.41	3.80			

DT= Drug Therapy, YT= Yoga Therapy and CT = Combined Therapy \* .05, \*\* .01

*Domicile Status:* majority of the patients belonged to urban area (73.33%), where as 26.67% of patients belonged to rural area. This figure is in concurrence with the previous work done in India by V.Raghavan (1978) & Manchanda & Manchanda (1978).

*Family Structure:* Out of 60 patients 42(70%) were from nuclear family as compared to 18 (30%) patients from joint family. The figure of this study tally with Verghese and Beig (1974) and Veera Raghavan (1978).

*Comparison of Treatment:* The means, Sds and t-values of the differences between pre and post treatment scores on the psychological parameters of neurotic patients in all the three treatment groups have been presented.

Table 2 shows that the combined therapy had larger improvement scores and differed significantly from each other. The latter two groups (Drug therapy and yoga therapy) also differed significantly from each other on SCAT and B D I scores. But non-significant for adjustment scale.

From such an observation, it is obvious that CT is more effective for the treatment of neurosis than either YT of DT alone. The combined treatment was found to be better than YT and DT alone because some patients got more relief with one treatment and some with other. Consequently, better improvement was observed with both the treatment. The results of this study are similar to reported studies using combined therapy Jai Prakash (1992). Where as YT was found to be more effective than DT. Similar results are found by Sahasi et al. (1989).

## CONCLUSION

It is observed that demographical aspects have a definite relationship with neurotic disorders. It is essential to take into consideration the total perspective of an individual in terms of age, sex, marital status, domicile status and family structure rather than viewing the individual separately from these variables. From such an observation, it could be detected that yoga therapy could have generated positive effect. In instances, where differences in treatment effectiveness were observed, combined therapy yielded more positive outcome than did yoga therapy or drug therapy. It is concluded that yoga therapy and combined therapy may emerge as safe and effective remedies for the treatment of neurotic disorders. The conclusion is that a holistic approach is needed in the treatment of patients with neurosis. By combining drug therapy with yoga therapy, the outcome can be essentially improved not only in short term but also in the long term. It would be economical in time and money.

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