

Occupational Therapy Intervention for Patients with Depression

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Abstract

Aim: The aim of the study was to find out the effectiveness of Occupational Therapy Program for patients with depression. *Objectives:* To find out the level of Depression for patients with depressive episode. To reduce the level of the Depression. To educate and train the ADL skills (Activities of Daily Living) for patients with Depressive episode. *Methods:* Ten patients with depressive episode for both male and female patients were selected for this study. All patients were screened by Beck Depression Inventory (BDI), was used for the objective measurement of patient's Depression level. The pre and post therapy values were statistically analyzed on the effect of Occupational Therapy intervention for patients with depression. *Result:* The statistical analysis of Beck Depression Inventory (BDI) pre-treatment Mean value is 33.9 SD 1.3203 and post-treatment Mean value is 17.6, S.D 0.52068, t-test value of BDIs is 11.48444 and p value is < .00001. This statistical analysis shows that, there is significant difference between pre and post-therapy values of Beck Depression Scale score. Hence, it is suggested that, the level of Depression were reduced and the ADL skills were trained for patients with depression. *Conclusion:* Occupational Therapy can be used effectively as one of the most important; interventions to reduce the level of depression and to train as well make them independent in their activities of daily living. Hence, it is recommended that, the Occupational Therapist plays pivotal role in treating patients with depression. Psychiatrist, clinical psychologist and other health care professional may consider these interventions when dealing patients with depression.

Keywords: Depression; Occupational Therapy; Beck Depression Inventory (BDI); Activities of Daily Living; World Health Organization (WHO); National Institute of Mental Health (NIMH); Centers for Disease Control and Prevention (CDC).

Introduction

Depression is the most common category of mood disorders, which is often divided in to two main types: unipolar and bipolar depression, otherwise known as manic-depression [1].

According to WHO World Health Organization Depression is the most common category of mood disorders, characterized by persistent sadness and a loss of interest in activities that we normally enjoy,

accompanied by an lack of ability to carry out daily living activities, for at least two weeks, In addition, people with depression normally have several of the following: Depressed mood, Lack of interest or pleasure in all activities, significant weight loss or weight gain, Insomnia, Psychomotor agitation, failure of energy, thoughts of worthlessness, Diminished capability to think or concentrate, recurrent thoughts of death [2].

Depression does not have a single cause. It can be triggered by a life crisis physical illness or may be caused by a combination of genetic, biological, environmental and psychological factors, according to the NIMH [3].

In 2015, an estimated 16.1 million U.S. Adults (aged 18 or elder), or 6.7% of the adult population, had at least one major depressive episode, or experienced depressive symptoms, in the past year, making this state one of the most common mental disorders in the United States, according to the National Institute of Mental Health (NIMH) [4].

Depression can influence group of all ages, races and socioeconomic classes, and can strike at any

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time. The condition is found even more women as men, according to the NIMH.

In a recently published report from the Centers for Disease Control and Prevention (CDC), researchers found that women between 40 and 59 have the highest rate of depression (12.3%) of any group founded on age and gender in the United States [5].

According to the World Health Organization, depression is the most common illness worldwide and the leading cause of disability. They educated guess 350 million people are affected by depression, globally.

Beck Depression Inventory (BDI) as a Standardized screening tool to assess the level of depression, patients score of less than 11-16 are indicative of a Mild mood disturbance and more then 31-40 indicative of Severe depression, who may have lack of interest, limited activities of daily living (ADL) skills and increased risk of suicidal idea [6].

Literatures suggest that the rate of depression are increased among women then the men, the occupational therapist helps to reduce the rate of depression, only a few studies have mentioned about the occupational therapy programme for patients with depression [7].

Occupational Therapist and Clinical Psychologist, have a natural affinity for one another. Both disciplines promote improved physical, psychological and functional outcomes and used together create a dynamic state of improved wellness [8].

Therefore, in this study, evaluation done on the effectiveness of occupational therapy program for patients with Depression.

Methodology

Participants: Participants of this study were a convenience sample of patients diagnosed with depression. All patients were between ages 54-65 [Mean] age 58.6) and attended 8 weeks Occupational Therapy program.

A total of 10 patients included, 6 male and 4 female patients diagnosed with depression were participated in this study. All patients attended intervention phase of the study, for occupational therapy program.

Measures: Assessment Tool

Beck Depression Inventory (BDI):

Beck Depression Inventory (BDI), created by Aaron Temkin. Beck, is a Standardized assessment tool which carry 21-question multiple-choice self-report inventory, one of the most widely used psychometric tests for measuring the severity of depression [9].

Procedure: The participants were randomly assigned for occupational therapy intervention, pre and post test were done in front of care givers. Standardized assessment tool which include Beck Depression Inventory (BDI) to assess the level of Depression for patients with depressive episode and intervention were provided for the duration of 8 weeks training program with appropriate treatment of occupational therapy program for patients with Depression.

The entire participant received intervention of 45 min each over an 8 week period, for occupational therapy intervention included, regain their social skills, teach simple coping strategies and work with them to improve their confidence and interaction skills, so they can feel comfortable with other people. Managing daily routines activities, Daily living tasks such as getting out of bed and personal care can be overwhelming

I have demonstrated techniques such as breaking down tasks into manageable steps, goal setting and problem solving, so they can feel able to do tasks such as getting out of bed and taking care of themselves. Finding support and networks emotion isolated and alone can increase depression. As we are an occupational therapist will help them overcome their sense of isolation by connecting them to community based networks and groups.

Criteria for selection: Patients with depression for both male and female were selected for this study.

Statistical Analysis

SPSS Software was used for statistical analyses. Significance was inferred for $p < 0.00001$ in all analyses. The t-test and P value were used to analyze the Beck Depression Inventory (BDI) for patients with depression.

Result

The statistical analysis of Beck Depression Inventory (BDI) pre-treatment Mean value is 33.9 SD 1.3203 and post-treatment Mean value is 17.6, S.D 0.5206, t-test value of BDIs is 11.4844 and p value is < 0.00001 .

Table 1: Shows Mean and SD value of Pre and Post-therapy Management of patients with Depression.

	Mean value	SD
Pre - Therapy Value	33.9	1.3203
Post - Therapy Value	17.6	0.52068

Table 2: Shows T and P value of Pre and Post-therapy Management for patients with Depression.

t-value	p-value
-11.4844	< .00001

This statistical analysis shows that, there is significant difference between pre and post-therapy values of Beck Depression Scale score. Hence, it is suggested that, the level of Depression were reduced and the ADL skills were trained for patients with depression.

It is observed that, the t value is greater than the table values hence, the null hypothesis is rejected. It implies that there is a significant difference in the mean values prior to and after treatment. Hence, it is concluded that, the treatment significantly leads to improvements in patients with depression.

Discussion

The literature suggested that, the management of occupational therapy for patients with depression. The purpose of this study is to find out and reduce the level of Depression and to educate as well as train the ADL skills (Activities of Daily Living) for patients with Depressive episode. Through my studies, I have observed that, there is significant difference between pre and post-therapy values of Beck Depression Scale score. Thus, occupational therapy plays a pivotal role for patients with depression.

Recommendations

- ❖ The period of treatment might increase and
- ❖ Further studies are warranted increasing the sample size.

Conclusion

Through this study, I have concluded that, the Occupational Therapy can be used effectively as one of the interventions to reduce the level of depression, for patients with depressive episode. Therapists and other health care professional may consider these interventions while treating patients with depression.

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Conflict of Interest: I have no conflicts of interest related to this study and this work has done my own interest.

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Appendix

Table 1: Shows, name of the participants 'gender with age group

SI No	Name of the patient	Age	Gender
1	S. Justin	54	M
2	P. Karthi	58	M
3	K. Amutha	60	F
4	V. Mani	58	M
5	V. Anjapuli	55	M
6	B. Sarasvathi	65	F
7	T. Ramesh	61	M
8	K. Rama	58	F
9	S. Brabu	54	M
10	K. Anjalai	63	F
	Mean value	58.6	

Table 2: Shows, Pre and Post-therapy value of Beck Depression Inventory (BDI) Scale for patients with Depression.

SI No	Name of the Participant / Initial	Pre Therapy Value	Post Therapy Value
1	S.J	32	17
2	P.K	31	21
3	K.A	37	18
4	V.M	29	15
5	V.A	30	18
6	B.S	33	16
7	T.R	39	19
8	K.RA	30	17
9	S.B	40	18
10	K.A	38	17
	Mean Value	33.9	17.6

Mnemonic

D - Depressed Mood; E - Energy loss / Fatigue; P - Pleasure Loss; R - Retardation/ Excitation
E - Eating Changed / appetite / weight; S - Sleep Changes; S - Suicidal thought; I - I'm a failure / loss of confidence; O - Only me to blame (Guilt); N - No concentration

References

1. Benjamin J. Sadock and Pedro Ruiz: Kaplan Comprehensive Textbook of Psychiatry 2004: 28-45, 155.

2. WHO Websites address; http://www.who.int/mental_health/management/depression/en/.
 3. Niraj Ahuja. A Short text book of psychiatry. 1996;38:389-396.
 4. Patricia Casey and Brendan Kelly. Fish's Clinical Psychopathology: Signs and Symptoms in Psychiatry 2008:48-55, 90-102.
 5. Sadock. Pocket Handbook of Clinical Psychiatry 2009;32:129-160.
 6. American Psychiatric Association; Diagnostic and Statistical Manual of Mental Disorders (DSM-5 (R)).
 7. Websites: https://en.wikipedia.org/wiki/Beck_Depression_Inventory.
 8. Michael H. Ebert and Peter T. Loosen: Current Diagnosis & Treatment in Psychiatry (A Lange medical book) 23-36, 56-59.
 9. Judith S. Beck, Aaron T. Beck Hardcover, Cognitive Behavior Therapy, Second Edition 34-56.
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