

Prevalence of Panic Disorder among Students of Medical University of Tirana (Albania)

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Abstract: *Aim: Evaluation of anxiety symptoms and panic disorder to Medical University students in first, second and third year. We evaluated anxiety symptoms related to panic disorders where the signs of anxiety which occurred suddenly and the dynamic and spontaneous growth of fear seem to be very aggravated and easily understood. Method: The study was on the period April – May 2014 (outside the exam season), that included students of five Faculties Medical University Tirana. To identify anxiety disorder especially panic disorder, Beck Inventory for Anxiety was used. After completing the questionnaire, which consisted of 21 signs of anxiety, all the screened persons who presented with more than four symptoms were evaluated, by psychiatrist as candidates considered to have panic disorder.DSM – IV criteria where used. The sample chosen in this study consisted of 1282 students, where 851 females and 431 males. Screening with BAI questionnaire, students are asked for symptoms they had last month and the day of completing the questionnaire. The differences were analyzed. Sampling was calculated. Results: We can notice that the majority of subjects in our study had low levels of anxiety (63,6%), while 21,3% have moderate levels of anxiety and 15,1% have severe levels of anxiety with WIN PEPI 4.0(Windows Program for epidemiologists, version 4.0*

Keywords: panic, disorder, anxiety, students, Tirana

1. Background

Panic disorder involves recurrent and unpredictable attacks of anxiety or panic. The attack start suddenly, is extremely distressing, and lasts for a few minutes, sometime longer. In panic disorder, the attacks are not restricted to specific and predictable circumstances but may occur in any situation. These attacks may be follow by persistent concern about having another panic attacks. Some symptoms of a panic attacks include; shortness of breath, trembling or shaking, muscle tension, pounding heart, sweating, nausea, a fear of dying, losing control or going mad, tingling fingers or feet, feelings of unreality, a choking or smothering feeling, hot or cold flushes etc. During a panic attack, individuals will generally try to flee from the particular situation, in the hope that the panic will stop, or else they may seek help in case they collapse, have a heart attack, or go crazy. Therefore panic disorder can classified as being without agoraphobia and according to the world Health Organization's (WHO), International Classification of diseases (ICD) – 10 Edition, a definite diagnosis of panic disorder requires that the individual has experienced several panic attack within a one- month period.

2. Aim

Evaluation of anxiety symptoms and panic disorder to Medical University students in first, second and third year. We evaluated anxiety symptoms related to panic disorders where the signs of anxiety which occurred suddenly and the dynamic and spontaneous growth of fear seem to be very aggravated and easily understood.

3. Method

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Case Processing Summary

	N	%
Valid	1282	100.0
Cases Excluded	0	.0
Total	1282	100.0

Reliability Statistics

Cronbach's Alpha	N of Items
.792	21

High quality test are important to evaluate the reliability of data supplied in our research study. We use Cronbach's Alpha to test reliability of our research. The value of

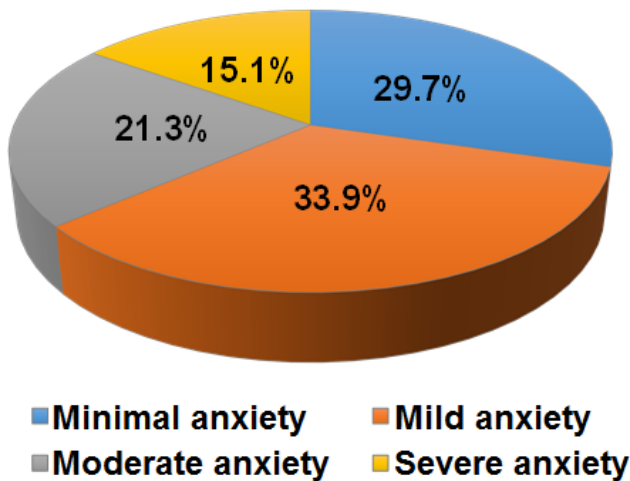
Alpha in our study is 0, 792, a value above 0, 70 (which is the threshold for reliability), and this indicates that we have a high level of accuracy and validity in our interpretations.

4. Results

We can notice that the majority of subjects in our study had low levels of anxiety (63, 6%) , while 21, 3% have moderate levels of anxiety and 15, 1% have severe levels of anxiety.

Table 1: Score categories

Gravity of anxiety symptoms	Frequency	Percent	Valid Percent	Cumulative Percent
Minimal (0 – 7)	381	29.7	29.7	29.7
Low (8 – 21)	434	33.9	33.9	63.6
Moderate (22 – 35)	273	21.3	21.3	84.9
Severe Anxiety (36 +)	194	15.1	15.1	100.0
Total	1282	100.0	100.0	



After performing t-test and ANOVA to determine the difference of means between males and females, there is a considerably high level of significance (P = 0, 001; ANOVA & t – test). This means that female students experience significantly more symptoms of anxiety compared to male students.

Table 2: Gender subject

		Anxiety Levels				Total
		Minimal Anxiety	Low Anxiety	Moderate Anxiety	Severe Anxiety	
Gender of subject	Males	N 177	154	76	24	431
	%	13.8%	12.0%	5.9%	1.9%	33.6%
Females	N	204	280	197	170	851
	%	15.9%	21.8%	15.4%	13.3%	66.4%
Total	N	381	434	273	194	1282
	%	29.7%	33.9%	21.3%	15.1%	100.0%

ANOVA

	Sum of Squares	df	Mean of Square	F	Sig.
Between Groups	7481.949	1	7481.949	81.494	0.000
Within Groups	117517.100	1280	91.810		
Total	124999.049	1281			



Evaluate of consume ALCOHOL and description of Anxiety scale.

Correlation

		Description	Alcohol consume
Correlation of 'Pearson'	Description	-	0.742
	Alcohol consume	0.742	-
Significant	Description	-	0.01
	Alcohol consume	0.01	.
N	Description	-	264
	Alcohol consume	264	-

ANOVA^a

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	610.932	1	610.932	5.411	.021 ^b
Residual	29583.701	262	112.915		
Total	30194.633	263			

a. Hangign variable: Description
 b. Predictor: (constant) , Alcohol consume

Coefficient

Model	Without standard coefficient		Standard coefficient	t	P.	95.0% CI for B	
	B	Error Std	Beta			Under border	Over border
Constant	11.572	1.266		9.135	.000	9.079	14.066
Alcohol consume	1.160	.499	.142	2.326	.021	.178	2.142

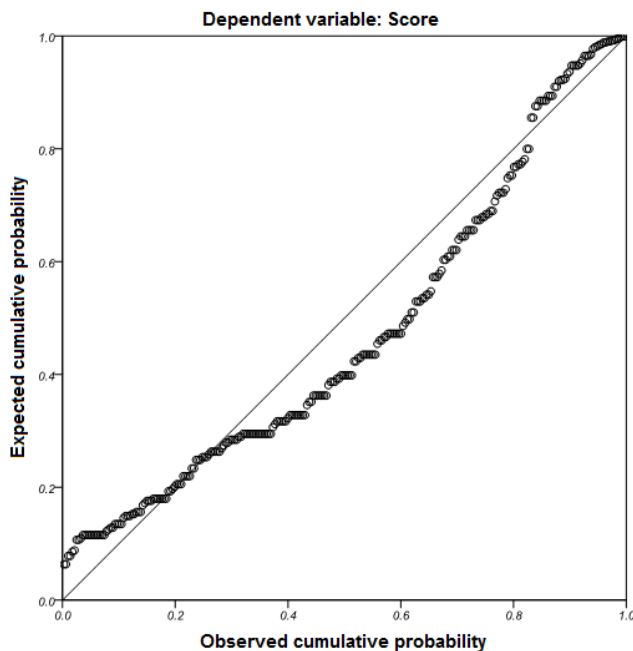
a. Hunging variable: Description

As we saw from result of regressive analysis, alcohol consume is a good predictor of anxiety. Equation conclusive from linear model of regression is:

Description = 11.572 + 1.16 * Alcohol consume.

This thing to interpret in this way:

“For every unit that change **alcohol consume**, description change with **1.16 time + 11.572**. Then how many time increase **alcohol consume**, this mean automatically increase of **level anxiety symptoms**”



5. Discussion

Consistent with previous research studies, we confirmed a higher prevalence of anxiety and panic disorders in females among almost all anxiety disorders examined. For moderate and severe anxiety disorders we had a difference of a ration 1 to 30 (1 male with moderate anxiety vs. 30 females). We noticed no males with severe anxiety symptoms, but there were 7 females. The pattern of gender differences across the anxiety disorders is consistent with data from Kessler et al. (1994), with some variation in the prevalence rates¹².

Our findings suggest the conclusion that anxiety disorders represent a significant source of impaired life quality, especially for females. This could be due to greater comorbidity of anxiety disorders among women, higher competitive factors of student's females in the in Albania.

Our study constitutes from 1282 students, who most of part of them was female, especially 851 female, and others are male, especially 431 male.

Separation in conformity with symptoms of panic attack was: **numbness** found in 10 student or 0.8% server anxiety but 736 student or 57, 4% have had low anxiety, **sensation of hot** found 28 student or 2.2% severe anxiety, but 512 student or 39.9% in low anxiety, **sensation of tremble**

found in severe anxiety 48 student or 3.7% and low anxiety found 557 student or 43.4%, **impossibility to relax** found severe anxiety 79 students or 6.2% and low anxiety 419 students or 32.7%, **to fear that bad is happen** found 90 students or 7%, and low anxiety 544 student or 42.2%, **dizziness** found 74 student or 5.8% severe anxiety, low anxiety 535 student or 41.7%, **pounding heart** found in severe anxiety 80 students or 6.2%, but 456 students or 35.6% have had low anxiety, **absence of calmness** found in severe anxiety 93 students or 7.3%, bat low anxiety was 504 students or 39.3%, **sensation of dread** found in severe 57 students or 4.4%, low anxiety was 757 students or 59%, **irritability** in severe anxiety 102 student or 8.0% but low anxiety was 463 students or 36.1%, **sensation of suffocation** found in severe anxiety 41 student or 3.2% and low anxiety 854 students or 66.6%, **tremble of hands** found in severe anxiety 44 students or 3.4%, but low anxiety was 749 students or 58.4%, **shake of body** found 35 students or 2.7% severe, but 821 or 64% low anxiety, **to become crazy** found 27 student or 2.1% severe anxiety, but 821 students or 64% of them was low anxiety, **to breath laboriously** found in severe anxiety 45 students or 3.5% but low anxiety was 859 students or 67%, **lest he/she should dead** found severe anxiety 33 students or 2.6%, but 1062 students or 82.8% have had low anxiety, **to be terrified** found 42 students in severe anxiety or 3.3%, but 916 or 71.1% students was low anxiety **indigestion** found 44 students or 3.4%, but low anxiety 678 students or 52.9%, **sense to faint** found 30 students or 2.3% severe, but 829 students or 64.7% found low anxiety, **frying in face** found 54 students in severe or 4.2% but 549 students or 42.8% low anxiety, **sweating** found 144 students or 11.2% severe anxiety but 647 students or 50.5 low anxiety.

6. Conclusions

Previous researches and literature have shown that anxiety represent a significant mental health issue. A review of the literature in the area indicates that there is limited information regarding gender differences in Albania and University of Medicine. The current study determined whether were any observable gender differences in the expression of symptoms, and anxiety responsiveness for a nonclinical sample of 851 females and 431 males.

ANOVA analysis revealed gender differences in the expression of general level of anxiety sensitivity among students of Medical University of Tirana. Reliable in the results of our study, we can to attain conclusions that: early recognize symptoms of anxiety are important to prepare a treatment plan immediately and professional to include psychological intervention, pharmacological. Recognition of panic disorder is more important to reduction overindulgent with alcohol or sedative pill, whose often use from these persons how only choose.

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