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Personality Traits in Men with Alcohol Dependence Syndrome

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Abstract: ***Background: Psychiatric comorbidity appears to be a rule rather than the exception for treatment of patients with alcohol dependence syndrome , with concurrent PD among the most prevalent diagnosis In clinical settings, the rates of concurrent PDs among patients with alcohol dependence syndrome range from 22- 78% with estimates around 60%.Prevalence rates for PDs in patients with alcohol dependence are consistently higher than the estimated 9-16% PD lifetime rates in the general population. Aim: To assess frequency of personality traits in men with alcohol dependence syndrome .To assess the personality traits more commonly associated with alcohol dependence syndrome. Methodology: A consecutive sample of 95 patients meeting inclusion and exclusion criteria admitted in family/de-addiction ward were included in the study. Details of Socio-demographic status were enquired into. IPDE screening was used to assess the personality traits in both the groups, once the patient had completed detoxification treatment and was clinically out of delirium. Results: The results were obtained using statistical methods chi square test and percentage frequency. Paranoid (66.7%), schizoid (75.6%), impulsive (26.7%), borderline (17.8%) and histrionic traits (44.4%) were found to be statistically significant. Conclusion: Study implies the need for assessing personality disorders in alcohol dependence patients as many have atleast one personality disorder. It will help in developing treatment patterns in these patients and also help in relapse prevention***

Keywords: alcohol dependence syndrome, personality, traits

1. Introduction

Personality disorders, in particular, are considered to be an important contributing and/or predisposing factor in the pathogenesis, clinical course and treatment outcome of alcohol dependence.

A study by Bridget et al showed that men with alcohol dependence has atleast one personality disorder most strongly related were antisocial, histrionic and borderline most prevalent diagnosis.

Study by Enrique suggested that in normative control group the most prevalent personality were histrionic and paranoid. Studies also suggest the high prevalence of concurrent personality disorders particularly cluster B between observed high levels of impulsivity and worse course in early treatment with cluster B merits further investigations.

Our aim was to assess the frequency of personality traits in men with alcohol dependence syndrome and also to identify the personality trait more frequently associated with alcohol dependence syndrome

2. Materials and methods

Study was conducted in Father Muller Medical College Hospital which is a multispecialty teaching general hospital. All patients admitted in psychiatry or de-addiction ward were taken . Data collection was done from june 2017 to august 2017. All patients admitted in psychiatry ward or de-addiction ward with a clinical diagnosis of alcohol dependence syndrome as per ICD-10-DCR (International Classification of Disease, 10th revision, Diagnostic Criteria for Research) form the population of the study.

/90 consecutive patients meeting inclusion and exclusion criteria were included. Inclusion criteria: Group 1 (i) Patients admitted in psychiatry ward / de-addiction centre diagnosed as alcohol dependence according to ICD -10 diagnostic guidelines.(ii) Age 18 - 65 years Exclusion criteria(i)Patients not consenting for the study. (ii)Patients with history of known psychiatric disorder. (iii)Patients with other co-morbid substance use disorder other than nicotine (iv) Patients with medical co morbidities (v)Patients with h/o head injury (vi) Mental retardation

Inclusion criteria:GROUP 2(i)Males aged 18-65years. (ii)First degree relatives of subjects (iii)No lifetime diagnosis of psychiatric or medical disorders Exclusion criteria:(i) Men not consenting for the study.(ii)History of known psychiatric disorder or medical disorder (iii) Subjects with other co-morbid substance use disorder other than nicotine.

2.1 Materials

1) Socio-demographic and clinical variables was recorded in a specific proforma prepared by the authors for this study.
2) Kuppuswamy's socio-economic status scale[3] was used to collect the socio economic data.
3) ICD-10 AM symptom checklist[4]; Australian modification of the WHO ICD-10 symptom checklist for mental disorders was used to screen for the presence of psychiatric disorders.
4) International Personality Disorders Examination screening was used to assess the personality traits.

2.2 Procedure

The design and nature of the clinical study was explained to all the patients. Informed consent was obtained from all the patients. All the participants were subjected to a thorough

physical and mental state examination at the first contact with the investigator. Semi structured form consisting of details pertaining to socio-demographic data and history of other substance use was done. The diagnosis of ADS was made using ICD 10 criteria. IPDE screening was used for the assessing the personality. The relationship between socio-demographic and clinical variables was assessed. IPDE was administered once the participants completed detoxification treatment and were clinically out of delirium. IPDE scale was applied by the first author; however, it was translated into the local language by the first author for some of the patients who were not well versed in English.

2.3 Statistical Analysis

Statistical analysis was assessed using chi square test to test comparison of categorical variations and frequency percentage

3. Results

This study included 95 participants, all of them were males. Majority of the subjects participated in the study belonged to age group of 31 – 40 years (40%); Comparison of the AGE between the two groups showed that age is higher in control group which was statistically non significant with a p value of 0.18. 80% of participants were Hindus, 13.3%were Christians and 6.7% were Muslims. 29.8% of them had completed primary education; followed by 24.4% of them who had studied till high school. Majority were labourers among which 37.8% were unskilled and 35.6% were skilled labourers. 60% of participants were married (table 1).

Table 1: comparison of age,religion,education,marital status and occupation

			GROUP					
			ALCOHOL DEPENDENCE SYNDROME		CONTROLS			
		N	Count	Column N %	Count	Column N %	Chi square	P value
AGE	18-30	21	6	13.30%	15	33.30%	11.895	0.008
	31-40	41	18	40.00%	23	51.10%		
	41-50	21	15	33.30%	6	13.30%		
	51-60	7	6	13.30%	1	2.20%		
	>60	0	0	0.00%	0	0.00%		
RELIGION	hindu	72	36	80.00%	36	80.00%	0.234	0.89
	muslim	7	3	6.70%	4	8.90%		
	christian	11	6	13.30%	5	11.10%		
EDUCATION	illiterate	9	7	15.60%	2	4.40%	11.573	0.041
	primary	17	13	28.90%	4	8.90%		
	high school	24	11	24.40%	13	28.90%		
	predegree	16	5	11.10%	11	24.40%		
	degree	17	6	13.30%	11	24.40%		
	professional	7	3	6.70%	4	8.90%		
	others	0	0	0.00%	0	0.00%		
MARITAL	single	23	13	28.90%	10	22.20%	6.424	0.17
	married	62	27	60.00%	35	77.80%		
	livingtogether	1	1	2.20%	0	0.00%		
	separted	3	3	6.70%	0	0.00%		
	divorced	0	0	0.00%	0	0.00%		
	widow	1	1	2.20%	0	0.00%		
	others	0	0	0.00%	0	0.00%		
OCCUPATION	unskilled	33	17	37.80%	16	35.60%	8.271	0.309
	skilled	18	13	28.90%	5	11.10%		
	government employee	4	2	4.40%	2	4.40%		
	private employee	6	2	4.40%	4	8.90%		
	self employed	10	5	11.10%	5	11.10%		
	business	11	4	8.90%	7	15.60%		
	professional	3	0	0.00%	3	6.70%		
	others	5	2	4.40%	3	6.70%		

44.4% were belonging to rural area. 73.3% of the subjects belonging to nuclear family. Majority of them with 37.8% belonged to lower middle socio-economic class.

Table 2: Comparison of residence, family type and SESS class

			GROUP					
			ALCOHOL DEPENDENCE SYNDROME		CONTROLS			
		N	Count	Column N %	Count	Column N %	Chi square	P value
RESIDENCE	urban	52	25	55.60%	27	60.00%	0.182	0.67
	rural	38	20	44.40%	18	40.00%		
	others	0	0	0.00%	0	0.00%		
FAMILY TYPE	nuclear	72	33	73.30%	39	86.70%	2.5	0.114
	joint	18	12	26.70%	6	13.30%		
	extended	0	0	0.00%	0	0.00%		
	others	0	0	0.00%	0	0.00%		
MONTHLY INCOME	<5k	7	6	13.30%	1	2.20%	4.098	0.251
	5-10k	34	17	37.80%	17	37.80%		
	10-25k	25	11	24.40%	14	31.10%		
	>25k	24	11	24.40%	13	28.90%		
SESS CLASS	UPPER	3	1	2.20%	2	4.40%	1.148	0.765
	UPPER MIDDLE	22	11	24.40%	11	24.40%		
	LOWER MIDDLE	37	17	37.80%	20	44.40%		
	UPPER LOWER	28	16	35.60%	12	26.70%		
	LOWER	0	0	0.00%	0	0.00%		

While assessing personality traits majority of patients when compared with controls 66.7% were found to have paranoid traits the comparison was statistically significant (p value <0.001).[fig 1] 75.6% had schizoid traits and the comparison was statistically significant (p value <0.001).[fig 2] 17.8% of patients had dissocial traits however the comparison was not statistically significant.(p value 0.36). 26.7% were found to have impulsive trait the comparison is statistically significant (p value 0.027).[fig 3] 17.8% were found to have borderline traits which was statistically significant (p value 0.04).[fig 4] 44.4% were found to have histrionic traits which was statistically significant (p value 0.003).[fig5]. 44.4% when compared to controls had anakastic traits which was not statistically significant(p value 0.52) 37.4% were found to have anxious traits this comparison was not statistically significant (p value 0.172). 28.9% had dependent traits this comparison was not statistically significant(p value 0.634) (table 3).

			GROUP					
			ALCOHOL DEPENDENCE SYNDROME		CONTROLS			
		N	Count	Column N %	Count	Column N %	Chi square	P value
PARANOID	yes	38	30	66.70%	8	17.80%	22.045	<0.001
	no	52	15	33.30%	37	82.20%		
SCHIZOID	yes	47	34	75.60%	13	28.90%	19.639	<0.001
	no	43	11	24.40%	32	71.10%		
DISSOCIAL	yes	13	8	17.80%	5	11.10%	0.809	0.368
	no	77	37	82.20%	40	88.90%		
IMPULSIVE	yes	16	12	26.70%	4	8.90%	4.865	0.027
	no	74	33	73.30%	41	91.10%		
BORDERLINE	yes	10	8	17.80%	2	4.40%	4.05	0.044
	no	80	37	82.20%	43	95.60%		
HISTRIONIC	yes	27	20	44.40%	7	15.60%	8.942	0.003
	no	63	25	55.60%	38	84.40%		
ANAKASTIC	yes	37	20	44.40%	17	37.80%	0.413	0.52
	no	53	25	55.60%	28	62.20%		
ANXIOUS	yes	28	17	37.80%	11	24.40%	1.866	0.172
	no	62	28	62.20%	34	75.60%		
DEPENDENT	yes	24	13	28.90%	11	24.40%	0.227	0.634
	no	66	32	71.10%	34	75.60%		

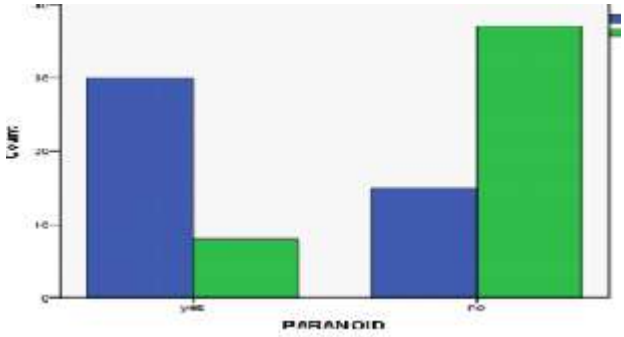

Figure 1: Paranoid trait

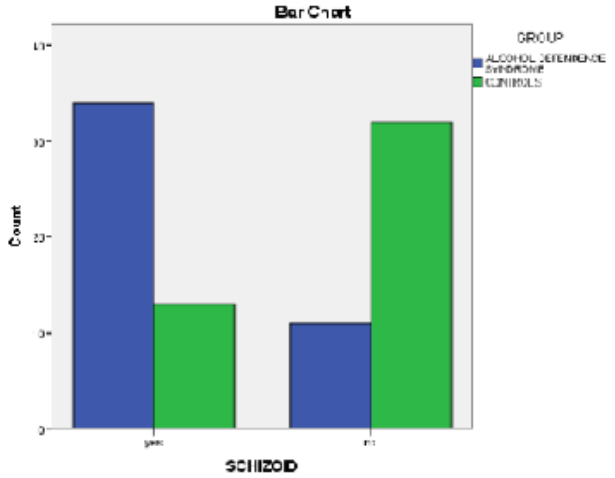

Figure 2: Schizoid Trait

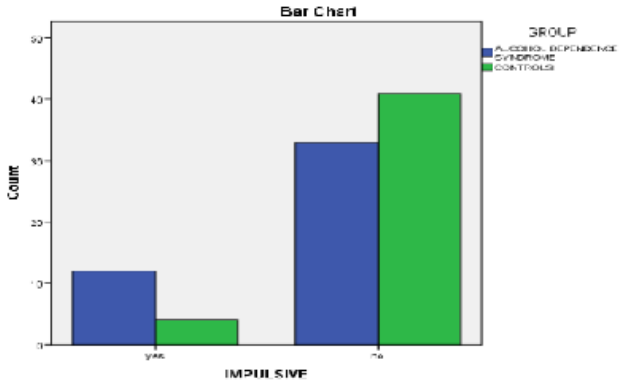

Figure 3: Impulsive Trait

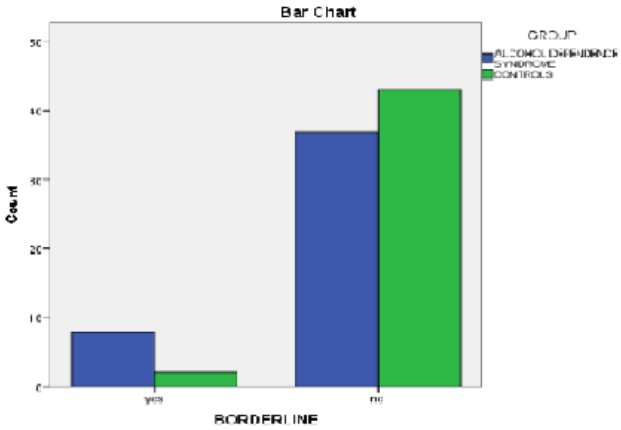

Figure 4: borderline trait

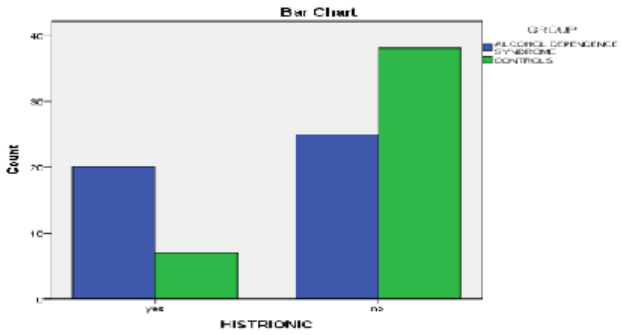

Figure 5: Histrionic Trait

5. Discussion

This is a observational analytical case control study conducted in a tertiary care centre. When assessing personality traits, majority of the patients were premorbidly well adjusted. This study shows statistical significance in paranoid , schizoid, impulsive, borderline and histrionic traits.

Study done by Enrique et al showed that obsessive compulsive traits were more common in alcohol dependent patients followed by antisocial , paranoid and dependent. Another study by Paola et al showed borderline personality more frequently seen. Obsessive compulsive, antisocial and borderline traits were commonly seen in various other studies however our study showed more paranoid , schizoid , histrionic ,impulsive and borderline traits. Strenghth of the study was it was done in a tertiary care centre. One of the few studies done ,There were no drop outs during the study. Limitation Sample size is small . Study is done only in men with alcohol dependence syndrome

6. Future Direction

Study can be done with a larger sample size .Detailed IPDE will help in assessing the personality disorders better .Assessing personality disorders will help treatment of these patients , motivating them and also in relapse prevention. Research regarding treatment decisions according to the patients personality pattern will be helpful in better treatment and outcome. Specific gender differences can also be studied which will be useful for treatment in patients with alcohol dependence syndrome

7. Conclusion

This study implies the need for assessing personality disorders in alcohol dependence patients as many have atleast one personality disorder. It will help in developing treatment patterns in these patients and also help in relapse prevention.

8. Conflict of Interest

Nil

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