

ORIGINAL ARTICLE

Clinical Profile of Somatoform Disorders in Patients Presenting with Complaints in Ear, Nose and Throat in a Tertiary Hospital

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ABSTRACT

In a prevalence study, 205 patients presenting to the department of ear, nose and throat (ENT) with symptoms, which could not be explained by clinical and diagnostic modalities, were subjected to a standardised diagnostic interview and the diagnosis of somatoform disorder was made by the 10th revision of the International Classification of Diseases (ICD-10) criteria. Psychiatric co-morbidities such as, anxiety and depression were diagnosed in these patients by Hamilton anxiety and depression scales respectively. The most common somatoform disorder was globus pharyngeus, seen in 23.9% of patients. Somatoform disorders were more commonly seen in females (57.1%) than males (42.9%). Psychiatric co-morbidities with anxiety and/or depression were encountered in 153 of 205 patients, out of which 65 were males and 88 were female patients.

Keywords: Somatoform disorders, Ear, nose and throat.

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INTRODUCTION

Somatoform disorders are characterized by physical symptoms, without any explainable medical illness, injury, toxicity or malingering. Patients with these disorders often undergo repeated medical consultations and investigations, with no substantial relief of their distressing symptoms [1]. The term somatoform disorders (SDs) was first introduced in the Diagnostic and Statistical Manual of Mental Disorders, 3rd edition (DSM-III) in 1980, which had been further categorized as per diagnostic criteria of DSM-IV-TR (text revision of the DSM 4th edition) and the 10th revision of the International Classification of Diseases (ICD-10) [2]. Patients with SDs have increased risks of disease burden, distress, higher medical expenses, mental co-morbidities, which lead to a poor quality of life [3]. The present study intends to analyze the prevalence of SDs in patients with symptoms related to ENT and to evaluate the association of psychiatric co-morbidities such as, anxiety and depression in these patients.

MATERIALS AND METHODS

Patients presenting to the department of ENT from January to December 2015, with symptoms which could not be explained by means of clinical examinations and relevant investigations, were evaluated for the presence of somatoform disorders along with exploration for coexistent psychological factors such as, anxiety and depression. The final diagnosis of SDs was made based on ICD-10 criteria. The patients with explainable organic causes in ENT, responsible for the symptoms were excluded from the study. Moreover, patients diagnosed to have SDs were further evaluated for co-morbidity with anxiety and depression as per Hamilton scales for anxiety (HAM-A) and depression (HAM-D) respectively. Presence of anxiety was confirmed in patients with HAM-A scores from 1 to 4, whereas patients with coexistent depression were detected by HAM-D scores more than 7.

RESULTS

Overall 205 patients presenting with ENT complaints during one year, who had no demonstrable organic abnormalities, were diagnosed as SDs on psychiatric evaluation (Figure 1). Among the patients with SDs, there were 49 cases with globus pharyngeus, 38 with tinnitus, 31 with dizziness, 28 with sense of ear-blockage, 21 with otalgea, 18 with rhinitis, 8 with functional dysphonia, 7 with atypical facial pain and 5 with hearing loss. 129 patients were in the age group of 40 years and above, 68 from 15 to 39 years and 8 patients were from the age groups of 14 years and below. SD was encountered in 117 females and 88 male patients (Table 1). On evaluation of associated psychiatric co-morbidities in 205 patients with SDs, it was evident that 153 patients, comprising of 65 males and 88 females were having co-existent anxiety and/or depression. Among them, 31 males and 25 females had anxiety, whereas depression was detected in 17 males and 34 females. Moreover, 17 males and 29 females were diagnosed to have both anxiety and depression (Table 2).

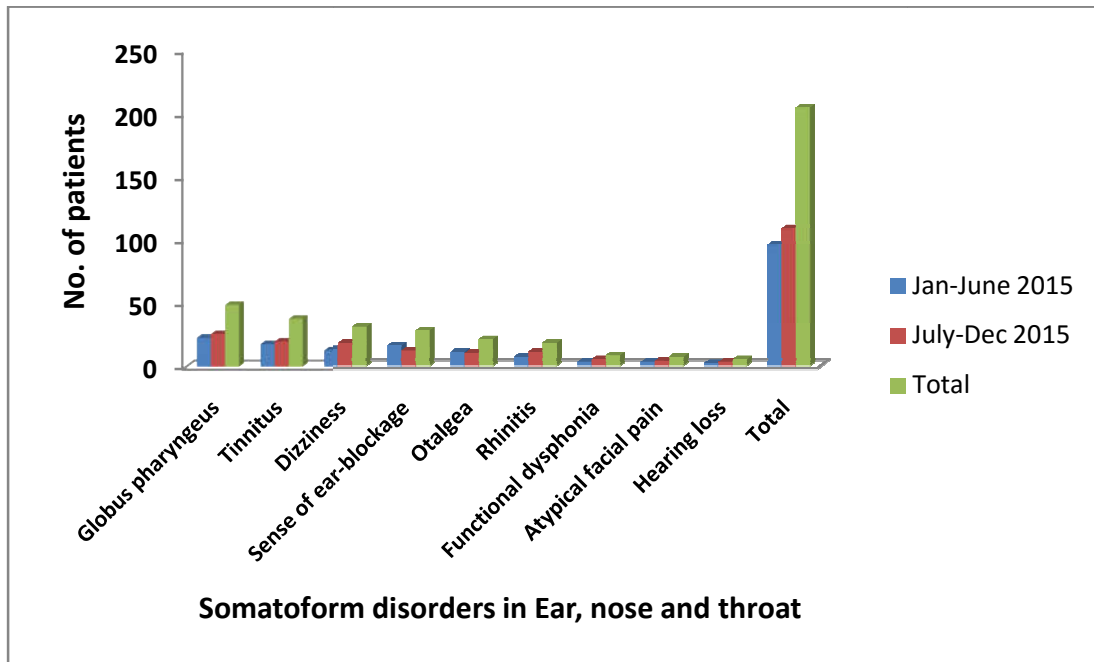


Figure 1: Somatoform disorders in patients of ear, nose and throat in 2015.

Table 1: Age and sex distribution of somatoform disorders in ENT patients in 2015

Somatoform disorders	Age (year)			Sex		Total (205) n (%)
	≤ 14	15-39	≥ 40	Male	Female	
Globus pharyngeus	1	10	38	18	31	49 (23.9)
Tinnitus	-	13	25	15	23	38 (18.5)
Dizziness	2	11	18	13	18	31 (15.1)
Sense of ear-blockage	1	9	18	15	13	28 (13.7)
Otalgea	2	9	10	10	11	21 (10.3)
Rhinitis	2	7	9	9	9	18 (8.8)
Functional dysphonia	-	4	4	2	6	8 (3.9)
Atypical facial pain	-	3	4	2	5	7 (3.4)
Hearing loss	-	2	3	4	1	5 (2.4)
Total	8	68	129	88	117	205

Note: ENT, ear, nose and throat; -, nil.

Table 2: Psychiatric co-morbidities in ENT patients with somatoform disorders

Somatoform disorders	Anxiety		Depression		Anxiety with depression		No anxiety/ depression		Total
	M	F	M	F	M	F	M	F	
Globus pharyngeus	5	8	4	9	5	8	4	6	49
Tinnitus	6	3	3	5	2	6	4	9	38
Dizziness	5	5	3	3	2	4	3	6	31
Sense of ear-blockage	7	2	1	4	3	5	4	2	28
Otalgia	3	2	2	4	2	2	3	3	21
Rhinitis	3	3	2	4	1	1	3	1	18
Functional dysphonia	-	2	-	2	1	1	1	1	8
Atypical facial pain	1	-	-	3	-	1	1	1	7
Hearing loss	1	-	2	-	1	1	-	-	5
Total	31	25	17	34	17	29	23	29	205

Note: ENT, ear, nose and throat; M, males; F, females; -, nil.

DISCUSSION

The present study revealed that globus pharyngeus was the most common somatoform disorder in ENT, seen in 49 (23.9%) patients, which was encountered most frequently in females and in the age group of 40 years and above. As reported in a study, patients with globus had a persistent or intermittent non-painful sensation of a lump or foreign body in the throat, which was long-lasting and difficult to treat, having potential for recurrence. Moreover, the symptoms were unaccompanied by any difficulty in swallowing [4]. A study revealed globus to be accountable for 4% of new referrals to ENT clinics and up to 46% of apparently healthy individuals, most commonly seen in the middle age group [5]. As per the present study, 117 (57.1%) females were affected by SDs, which was more common than SDs seen in males (42.9%). This finding was comparable to observations in studies, which concluded that SDs were consistently more prevalent in women than in men; and somatization disorder, a paradigmatic SD, occurred up to 10 times more commonly in women [6,7]. On assessment of psychiatric co-morbidities in ENT patients with SDs, it was observed that anxiety disorder was more frequent in males, whereas depression was the more commonly encountered condition in females. 153 of 205 (74.6%) patients with SDs had co-existent anxiety and/or depression. Among them anxiety and depression were seen in 56 (27.3%) and 51 (24.8%) patients respectively, whereas both anxiety and depression were diagnosed in 46 (22.4%) cases. This finding is comparable to that of a similar study, which revealed association of SDs with anxiety and depressive disorders in 14.8% and 18.6% of patients respectively [8]. As revealed in the present study, the overall occurrence of anxiety and/or depression was more frequent in females than males, which was similar to the results of prior studies (9, 10).

CONCLUSION

As revealed in the present study, among the patients with somatoform disorders presenting with ENT symptoms, globus pharyngeus was the most common encountered condition. A gender difference with female preponderance was observed in patients of somatoform disorders as well as in those with associated co-morbidities with anxiety and depression. Multidisciplinary approach is essential for proper evaluation and subsequent management of somatoform disorders with manifestations in ENT that leads to substantial relief of the distressing symptoms in these patients.

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