Is there any difference between attitude of interns toward psychiatric illness and other chronic medical conditions? A comparative study

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ABSTRACT

Background: Attitude of doctors towards specific medical conditions plays a crucial role in patient care. Internship, being the final stage in undergraduate medical students’ training, can have a bearing on the attitude they develop towards various specialties. However, there is dearth of Indian studies comparing the attitude of interns towards psychiatric illness and other chronic medical conditions. In this background, the study was conceived with the objective of comparing the attitude of interns towards psychiatric illness and other chronic medical conditions.

Aims: (1) To compare the attitude of interns towards Psychiatric illness and Diabetes Mellitus. (2) To compare the attitude of interns towards Psychiatric illness and HIV/AIDS.

Setting and Design: Conducted at Sri Siddhartha medical college, Tumakuru as a cross sectional study.

Methodology: The sample for this cross sectional study comprised of 130 interns in a tertiary care teaching hospital who had completed their postings in Psychiatry. Medical Condition Regard Scale (MCRS) was used to assess the attitude of interns towards Psychiatry, Diabetes Mellitus and HIV/AIDS.

Statistical Analysis: SPSS 20 was used with Descriptive statistics and non-parametric tests to analyze the data obtained.

Results: There was no significant difference between the overall MCRS scores for Diabetes Mellitus and psychiatric illnesses. However, many individual items and the overall scores of MCRS were significantly higher for psychiatric illnesses when compared to those for HIV/AIDS.

Conclusions: The attitude of interns towards Psychiatric illness was comparable to that towards Diabetes Mellitus. However, their attitude towards Psychiatric illness was more favorable than that towards HIV/AIDS. Further studies need to focus on the various aspects of stigma/attitude and the effect of undergraduate medical training on those aspects.

Key words: Attitude, interns, Medical Condition Regard Scale, psychiatry

INTRODUCTION

Internship is an important and mandatory component of undergraduate medical curriculum in India. Interns are exposed to different specialties during the tenure of 1 year, which not only helps them in understanding various specialty-related aspects, but also their own preferences and attitudes. Old attitudes are reshaped and new ones are formed during the entire undergraduate training when they

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have varying levels of clinical exposure. However, it is only during internship, when they are in a position to assess and manage various common illnesses, that their attitudes have a direct bearing on the patient care. Patient care can be expected to be good with positive attitudes and vice versa.

Psychiatry, as a specialty, has been plagued by stigma[1] and a negative attitude,[2] which is not only restricted to the general public,[3] but also very common among the doctors.[4,5] This is despite the tremendous advancements that have been made in the neurobiological understanding and treatment of psychiatric illnesses. The reasons for persistence of stigma could be many, including relative lack of objectivity compared to other medical illnesses such as diabetes mellitus (where blood sugar levels can be easily recorded) and misconceptions (“it is all in the mind,” “they are dangerous,” and “it is a result of his/her own thinking”).[6]

Very few studies have been conducted to assess the difference in attitude toward various types of medical conditions and most of them are on medical and paramedical students.[7,8] These studies have shown that physical illnesses are rated higher than psychological conditions such as somatoform disorders or psychosis. However, there are also studies which have demonstrated that the attitude toward psychiatric illnesses improved with greater exposure.[9,10] Therefore, it is more prudent that such comparative studies are conducted on interns, who have the maximum exposure among undergraduate trainees and they are unlikely to have further exposure unless they opt to take up psychiatry as their specialization. In this background, the study was conceived to compare the attitude of interns toward psychiatry and other chronic medical illness which included diabetes mellitus and HIV/AIDS.

MATERIALS AND METHODS

The study was conducted in the Department of Psychiatry at Sri Siddhartha Medical College and Research Hospital from January 2014 to December 2015.

**Sample**

The sample comprised 130 interns who consented to participate in the study. Those interns who had not completed their 2 weeks’ posting in psychiatry and those with major psychiatric illnesses/substance use disorders, family history of psychiatric illness, and who had previous contact with psychiatrists were excluded from the study.

**Tools**

A brief questionnaire inquiring about sociodemographic details was used to obtain data such as age, gender, and religion. The attitudes of interns toward psychiatric illness and chronic medical condition (represented by diabetes mellitus and HIV/AIDS) were evaluated using the Medical Condition Regard Scale (MCRS) [Appendix 1].[11] MCRS is a noncondition specific scale to capture biases, emotions, and expectations regarding various medical conditions. It contains 11 items rated through a 6-point Likert scale (1 = strongly disagree, 2 = disagree, 3 = not sure but probably disagree, 4 = not sure but probably agree, 5 = agree, and 6 = strongly agree). Five items that are worded negatively are reverse scored for analysis. The item number 7 is modified (from wastage of medical dollars to wastage of money) to suit Indian context. MCRS score (minimum score – 6 and maximum score – 66) was considered as an indicator of attitude toward the conditions studied.

**Statistical analysis**

Statistical Package for the Social Sciences software version 20 was used for statistical analysis. Sociodemographic data were analyzed by using descriptive statistics. The attitude toward psychiatric illness, diabetes mellitus, and HIV/AIDS, as measured by the MCRS scale, was compared using Wilcoxon signed rank test. \( P < 0.05 \) was considered statistically significant.

Prior approval for the study was taken from the Institutional Ethics Committee of Sri Siddhartha Medical College and Hospital. Prior written informed consent was taken from the participants of the study.

| MCRS item | Psychiatric illness (mean score) | Diabetes mellitus (mean score) | \( P \) |
|-----------|---------------------------------|-------------------------------|------|
| 1. Working with patients like this is satisfying | 5.00 | 4.90 | 0.677 |
| 2. Insurance plans should cover patients like this to the same degree that they cover patients with other conditions | 5.07 | 4.80 | 0.065 |
| 3. There is little I can do to help patients like this | 3.77 | 3.25 | 0.045* |
| 4. I feel especially compassionate toward patients like this | 4.53 | 4.47 | 0.673 |
| 5. Patients like this irritate me | 4.97 | 5.10 | 0.807 |
| 6. I wouldn’t mind getting up on call nights to care for patients like this | 4.75 | 4.67 | 0.781 |
| 7. Treating patients like this is a waste of money | 5.08 | 5.37 | 0.101 |
| 8. Patients like this are particularly difficult for me to work with | 4.65 | 5.10 | 0.079 |
| 9. I can usually find something that helps patients like this feel better | 4.77 | 4.58 | 0.320 |
| 10. I enjoy giving extra time to patients like this | 4.72 | 4.88 | 0.271 |
| 11. I prefer not to work with patients like this | 4.97 | 5.40 | 0.020* |
| Total | 51.78 | 52.32 | 0.591 |

\( P < 0.05 \). MCRS – Medical Condition Regard Scale

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RESULTS

Out of the 130 interns who completed the questionnaire, 76 (58.46%) were female and 54 (41.54%) were male. Interns' median age was 23 years and majority belonged to urban background (n = 117) and were Hindu (n = 117) by religion.

Table 1 shows the comparison of MCRS scores between psychiatric illness and diabetes mellitus. The score for only one item (out of 11) was significantly higher for diabetes mellitus compared to that of psychiatric illness. However, there was no significant difference between the overall MCRS scores of the two conditions (P = 0.591).

Table 2 shows the comparison of MCRS scores between psychiatric illness and HIV/AIDS. The scores for five items (out of 11) were significantly higher for psychiatric illness compared to those of HIV/AIDS. Furthermore, the total MCRS score for psychiatric illness was significantly higher compared to that of HIV/AIDS (P = 0.001).

DISCUSSION

The interns' exposure during clinical rotation typically includes supervised assessment of patients in outpatient department and wards, involvement in management planning and execution, attending postgraduate training programs (such as seminars, case presentations, and journal clubs), and clinical discussions during daily ward rounds. In this process, it is expected that they not only gain medical knowledge and skills, but also develop the right attitude toward the patients and their illnesses. This study was conceived with an objective of comparing the attitudes of interns toward psychiatric illness and other chronic medical conditions. For the purpose of assessment with MCRS, diabetes mellitus and HIV/AIDS were selected as two chronic medical conditions. HIV/AIDS was included as it is one of the traditionally stigmatized medical conditions.[12-14]

This study found no significant difference between the attitudes of interns toward psychiatric illness and diabetes mellitus as assessed by overall MCRS scores. The finding is interesting because the results in the earlier studies done on medical students have shown that the attitude toward medical conditions (such as diabetes mellitus and cancer) is significantly better than that for psychiatric illness.[6] This can possibly be explained on the basis of evidence provided by many studies which have clearly demonstrated that the attitude of undergraduate medical trainees improves with increasing exposure to psychiatry.[10] Therefore, the interns, who have maximum exposure to psychiatry among the trainees, also have the most favorable attitude which is almost comparable to their attitude toward diabetes mellitus.

On the other hand, the study found that the attitude of interns toward psychiatric illness was more favorable compared to that toward HIV/AIDS, as assessed by the significant difference in five (out of 11) items of MCRS as well as overall MCRS scores. Interns expressed more satisfaction in treating patients with psychiatric illness when compared to treating patients with HIV/AIDS. Furthermore, they perceived more compassion and were ready to give extra time to patients with psychiatric illness. They were also in favor of insurance cover for psychiatric illnesses. Therefore, it can be deduced that, with increasing exposure, the attitude toward psychiatric illness improved, but the same did not happen with HIV/AIDS. A previous research has shown that stigma related to HIV/AIDS is associated with a perception of “immoral behavior” (such as drug use and sexual behavior) and the “offensive” nature of conditions affecting physical appearances (Kaposi’s sarcoma and opportunistic diseases).[12,13] In addition, it was found that the reluctance to treat HIV/AIDS was more prevalent in the advanced clinical years (with greater exposure),[13] and many students believed that health-care workers are at a high risk of contracting HIV at work.[14] In contrast, psychiatric illnesses do not share these “stigma-genic” factors, resulting in a more favorable attitude among the interns. This important difference may have a crucial bearing on the

| MCRS item                                                                 | Psychiatric illness (mean score) | HIV/AIDS (mean score) | P     |
|---------------------------------------------------------------------------|---------------------------------|-----------------------|-------|
| 1. Working with patients like this is satisfying                          | 5.00                            | 4.50                  | 0.019*|
| 2. Insurance plans should cover patients like this to the same degree that they cover patients with other conditions | 5.07                            | 4.52                  | 0.003*|
| 3. There is little I can do to help patients like this                    | 3.77                            | 3.40                  | 0.130 |
| 4. I feel especially compassionate toward patients like this              | 4.53                            | 3.98                  | 0.010*|
| 5. Patients like this irritate me                                         | 4.97                            | 4.58                  | 0.147 |
| 6. I wouldn’t mind getting up on call nights to care for patients like this | 4.75                            | 4.40                  | 0.097 |
| 7. Treating patients like this is a waste of money                        | 5.08                            | 5.02                  | 0.938 |
| 8. Patients like this are particularly difficult for me to work with      | 4.65                            | 4.45                  | 0.535 |
| 9. I can usually find something that helps patients like this feel better  | 4.77                            | 4.33                  | 0.025*|
| 10. I enjoy giving extra time to patients like this                       | 4.72                            | 4.32                  | 0.026*|
| 11. I prefer not to work with patients like this                         | 4.97                            | 4.87                  | 0.322 |
| Total                                                                     | 51.78                           | 48.23                 | 0.001*|

*P<0.05. MCRS – Medical Condition Regard Scale
CONCLUSION

The attitude of interns toward psychiatric illness was comparable to that toward diabetes mellitus. However, their attitude toward psychiatric illness was more favorable than that toward HIV/AIDS. Further studies focusing on the various aspects of stigma/attitude and the effect of undergraduate medical training on those aspects need to be conducted, the findings of which may help in planning strategies to improve the attitude of undergraduate medical trainees and doctors toward any medical illness, particularly those conditions afflicted with stigma such as HIV/AIDS and psychiatric illnesses.

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Conflicts of interest
There are no conflicts of interest.

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Appendix 1: Medical Condition Regard Scale

| A | B | C | D | E | F |
|---|---|---|---|---|---|
| 1. Working with patients like this is satisfying |
| 2. Insurance plans should cover patients like this to the same degree that they cover patients with other conditions |
| 3. There is little I can do to help patients like this |
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