

REVIEW OF RESEARCH

ISSN: 2249-894X IMPACT FACTOR : 5.7631(UIF) UGC APPROVED JOURNAL NO. 48514 VOLUME - 8 | ISSUE - 9 | JUNE - 2019



A STUDY OF DEPRESSION AMONG HIGH BLOOD PRESSURE AND ASTHMA PATIENTS

Ambika Karanppa¹ and Prof. S. P. Melkeri² ¹ Dept of Psychology , Gulbarga University Kalaburgi. ² Research Guide , Dept of Psychology , Gulbarga University Kalaburagi.

ABSTRACT:

The present study aimed at accessing the level of depression among high blood pressure and Asthma Patients. The study consisted of 200 respondents out of which 100 are high blood pressure and 100 are Asthma Patient besides this study also divided the samples in terms of domicile i.e. rural and urban and male and female respectively, respondents have been selected using purposive sampling method. The depression scale was used to collect the data. The statically tools means, standard deviation and independent samples. T-test have been used. Results found that females have greater level of depression in comparison to female psychosomatic disorder patients, and it was found that



urban respondents have higher level of depression. Than their rural counterparts conclusions pertaining to the study have been discussed.

KEYWORDS: Depression, gender, domicile, high blood pressure and asthma patients.

INTRODUCTION

High blood pressure and Asthma these symptoms might be seen in depression patients. Than the depression (major depressive disorder or clinical depression) is a common but serious mood disorder. If causes severe symptoms that affect how you feel, think and handle daily activities, such as sleeping, eating or working. Depression is a major disorder in medical setting and also it is most common in mental health problems as well and it is approximately present 10% to 20% (Spitzer et.al. 1994) studies in elderly also suggest that life

events. especially financial problems and death in family are as important a precipice young adult. It is also seen that stressful life events were especially more in the elderly females those with lower per capita income (Sandeep Grover, Alakananda Dutra) Researcher at the centres for disease control and prevention (CBC) provided evidence that depression and severe anxiety may increase a persons risks for developing hypertension. Depression and anxiety often lead people to smoke, drink excessively, and gain weight, behaviors that can difinately

promote hypertension and heart diseases. People with Asthama have twice the risk of developing mood and anxiety disorder (Debrafulghum Bruce).

Asthma the inability to breath is stressful. This emotional stress can add to depressive feelings ad can worsen Asthma symptoms. The present study has been designed to investigate differences between the gender and domicile with respect among high blood pressure and Asthma patients.

STATEMENT OF PROBLEM:

"A study of depression among high blood pressure and Asthma Patients".

Variables:

Independent Variables.

- 1. High blood pressure and Asthama
- 2. Male and female.
- 3. Rural and Urban.

Dependent Variables:

1. Depression:

Objectives:

- 1. To Study the level of depression among high blood pressure and Asthma Patients.
- 2. To Study the level of depression among male and female high blood pressure patients.
- 3. TO study the level of depression among rural and urban high blood pressure patients.
- 4. To study the level of depression among male and female Asthma patients.
- 5. TO study the level of depression among rural and urban Asthma Patients.

Hypothesis:

- 1. There is significant difference in depression between high blood pressure and Asthama Patients.
- 2. There is significant difference in depression among male and female high blood pressure patients.
- 3. There is significant difference in depression among rural and urban high blood pressure patients.
- 4. There is significant difference in depression among male and female Asthama Patients.
- 5. There is significance difference in depression among rural and urban Asthama Patients,

Sample and research design:

The present study consisted of 200 respondents out of them 100 high blood pressure and 100 asthma patients' male and female and urban and rural respondents. The respondent's technique and present study is exploraratory in nature and adopts survey method for data collection.

	High blood pressure		Asthma		
	Male	Female	Male	Female	Total
Rural	25	25	25	25	100
Urban	25	25	25	25	100
Total	50	50	50	50	200

Table No.1

Tools :

Depression scale by Dr. Shamimkarim and Dr. Rama Tiwari

Statistical application:

Mean, Standard deviation and independent sample t-test have been used.

RESULT AND DISCUSSION:

Depression is a mental health disorder characterized by persistently depressed mood or loss of interest in activities consuming significant impairment in daily life.

Table No. 2
Showing the mean SD, and t-value of depression between high blood pressure and Asthama
nationts

patients.			
	Highblood Pressure	Asthma	
Mean	25.49	20.91	
SD	11.35	6.09	
t-value	*5.081		

* Significant at 0.05 level

A Perusal of the above table and figure illustrates depression of high blood pressure and Asthma Patients. The results indicates the high blood pressure have high mean score 25.49 and SD 11.35 and Asthma comparably lower mean score 20.91 and SD 6.09 the t-value is 5.081, which is significant at 0.05 level of significance.

Thus it clearly indicates that high blood pressure patients exhibited a higher level of depression which mean, Asthma patient have lower level of depression for the physical and mental illness as compared to high blood pressure patients. Hence, the hypothesis states that there is significance difference in depression between high blood pressure and Asthma patients has been accepted.

Showing the mean, SD, and t-value of depression between male and female					
	high blood	pressure pat	tients.		
	Male		Female		
Mean	15.30		18.00		

9.48 *16.97

Table No. 3

* Significant at 0.05 level

10.79

The hypothesis stating that there is significant difference in depression of male and female high blood pressure patients. The results reveals that the t-value is 16.97 which Is significant at 0.05 level of significance. Therefore the mean score clearly indicates that female have exhibited greater level of depression in comparision to male counter parts. Hence the hypothesis has been accepted. The present study results are supported by previous findings of a bigail James and Adrian Wells (2010) females are external powers as compared to their counter parts. Hashiro and okumuka (197) found that anxiety and depression is more in psychosomatic disorder patients (High blood pressure and Asthma)

_						
	•	h			0	
	а		не.	1.1	0.	4
-	-	~			~ -	_

Showing the mean, SD and t-value of depression of rural and urban high blood pressure patients.

		Rural	Urban
	Mean	8.30	11.00
	SD	3.48	3.79
5	t-value	* 10.97	

* Significant at 0.01 level

A perusal of the above table and figure illustrate the level of depression of rural and urban high blood pressure patients.

The results indicates that the rural patients have a lower mean score 8.30 and SD 3.48 and urban comparably high mean score 11.00 and SD 3.79. respectively. The calculated t-value 10.97, which is significant at 0.05 level of significance thus it is clearly indicates that urban patients exhibited a higher level of depression which means rural patients have lower level of depression. The urban patients exhibited higher level of depression in terms of finding difficultly in relationships,

SD

t-value

communications, environment and etc. moreever rural high blood pressure patients are stronger in their emotionally and mentally whereas, it was found that urban high blood pressure patients shown greater level of depression. Hence the hypothesis has been accepted.

nowing the mean, 5D, and t value of depression of mate and remate Astima r attents.			
	Male	Female	
Mean	18.30	23.25	//
SD	6.91	7.5	
t-value	* 3.34	·	
•	* Significant at (01 lovol	

Table No. 5 Showing the mean, SD, and t-value of depression of male and female Asthma Patients.

Significant at 0.01 level

A perusal of the above table and figure illustrates the level of depression of male and female asthma patients. The results indicates that the male Asthma patients having lower mean score 18.30 and SD 6.91 compared to female Asthma patient who scored higher new score of 23.25 and SD 7.5 respectively. The calculated t-value 3.34, which is significant at 0.01 level of significance. Thus it clearly indicates that female asthma patients exhibited a higher level of depression, compared to male asthma patients having lower level of depression.

Table No. 6 Showing the mean, SD, and t-value of depression of rural and urban Asthma patients.

	Rural	Urban
Mean	20.30	25.24
SD	8.90	9.4
t-value	* 5.35	

^{*} Significant at 0.01 level

The results indicates that the rural patients having a lower mean score 20.30 and SD 8.90 and urban comparably high mean score i.e 25.24 and SD 9.4 respectively. The calculated t-value 5.35 which is higher than the table t-value and significant at 0.05 level of significance. Thus it is clearly indicates that urban Asthma patients exhibited a higher level of depression which means rural Asthma patients having lower level of depression. The urban Asthma patients exhibited higher level of depression in terms of finding difficulty in relationships environment.

CONCLUSION:

- 1) In this study, it was understood that there are gender difference in depression among high blood pressure and Asthma patients.
- 2) Further, the study found that urban high blood pressure and asthma patients have higher level of depression as compared to rural high blood pressure and Asthma patients.

REFERENCES:-

- 1) A/c carlsson P Wandell U obsy BMC Public high prevalence of diagnosis of diabetes depression, anxiety, hypertension, asthma and copdin the total population of Stockholm.
- 2) T Ritz, A Steptoe S Dewilde M costa-psychosomatic medicine: Emotions and stress increase respiratory resistance 2000.
- 3) J. Park TB Kim H Joo, JS Lee: Diseases concomitant with asthma in middle aged and elderly subjects in korea 2013.
- 4) M Knofloch, S kiechl, A mayr J Willeit Allergic rhinitis asthma and atherosclerosis 2005.
- 5) T Nagkura, S Matsuda, K Shichijo, H Sugimoto Euro Raspir Asthma bronchial 2000.



Ambika Karanppa Dept of Psychology , Gulbarga University Kalaburgi.