Prevalence and factors associated with obesity in the patient followed in psychiatry

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Introduction:

Obesity is a common problem in psychiatric patients. It is associated with significant physical morbidity and a decrease in the quality of life of these patients.

Aims:

- ❖ To measure the **prevalence of obesity** in a population of patients followed in psychiatry in Gabes (southern Tunisia)
- ❖ To determine the **factors associated** with it.

Methods:

- A cross-sectional, descriptive and analytical study.
- We included all patients who consulted during the study period (regardless of diagnosis and who gave their consent).
- A semi-directive interview with the patient and a member of his family.
- The diagnosis of mental disorders: Diagnostic and Statistical Manual of Mental Disorders (**DSM-5**)
- Estimating obesity: body mass index (**BMI**)

Overweight = BMI between 25 and 29.9 kg /m²

Obesity = BMI ≥ 30 kg /m²

Results:

- **115 patients** (TABLE 1: characteristics of our sample)
- The mean BMI = **25 kg /m²**
 - Overweight:** 40.9%.
 - Obesity:** 49%.
- Obesity was significantly more common among **women, living in couples** (FIGURE 1, 2).
- There were no differences between obese and non-obese patients in socioeconomic status, educational level, occupation and diagnosis.

DISCUSSION:

- Rates of obesity are higher than normal across a range of psychiatric disorders, including major depressive disorder, bipolar disorder, schizophrenia and anxiety disorders [11].

Variable		Percentage
Gender	Male	59.1%
	Female	40.9%
Civil status	Living in couples	40%
	Living alone	60%
Professional activity	Working	29.6%
	D'ont working	70.4%
Socio-economic level	Low	20%
	Medium	76.5%
	High	3.5%
Sports activity	Yes	9.6%
	No	90.4%

TABLE 1: Characteristics of our sample

- Our study showed a prevalence of obesity of 49%. This joins the results of De Hert M and al [1] and Correll Cu and al [2] who found a prevalence of obesity in case of Schizophrenia 45% - 55%; (RR: 1.5-2); and 21% -49%(RR: 1-2) in case of bipolar disorder.
- According to our study, the factors associated with obesity were female sex and couple living. Dickerson et al. [3] found that 50% of a female, and 41% of a male psychiatric sample were obese, compared to 27% of women and 20% of men in a non psychiatric matched comparison group.
- According to the French health safety agency of health products (Afssaps) [4], age, sex, family and personal antecedents as well as treatments are involved in the genesis of these disorders.
- Current and past unhealthy dietary patterns are associated both with obesity and psychiatric disorders [5]. Lower rates of physical activity and increased sedentary behaviours are also commonly observed in currently obese and psychiatric patients [6].
- In a recent meta-analysis, the antidepressants amitriptyline, mirtazapine, and paroxetine were associated with the greatest risk of weight gain [7]. Weight gain is also a common problem associated with many atypical antipsychotics such as clozapine and olanzapine[8].

Conclusion:

Obesity is frequent in the patient followed in psychiatry. It must be screened and prevented by the implementation of recommendations on lifestyle (diet, physical activity) during consultations.

FIGURE 1: Variation of obesity by gender

FIGURE 2: Variation of obesity by lifestyle

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