

Mental disorders and exposure to war in Lebanon

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In the first study in the Arab world to document mental illness and treatment on a national level, researchers from Lebanon have described the prevalence of mental disorders and their relation to exposure to war.

Elie Karam and colleagues, who publish their study in the open access journal *PLoS Medicine* this week, used a World Health Organization (WHO) interview tool to diagnose mental health disorders in a sample of 3,000 adults in Lebanon representative of the population. They investigated the question of lifetime prevalence (the proportion of Lebanese who have a mental disorder at some point in their lives) and the age of onset of mental disorders, as well as the delay they experienced in receiving treatment.

This kind of information is necessary to ensure that states provide efficient mental-health services to their populations, particularly outside of industrialized countries where mental disorders are less researched. They also asked each participant in the study about their experience of traumatic events relating to war, including whether they had been a refugee (38 % of people in the study), a civilian in a war zone (55%), or witnessed death or injury (18%). Although the relationship between war and the mental health of people serving in the military has been described before, this is the first time that a nationally representative study has assessed the effect of war on the first onset of mental disorders in a civilian population.

The authors describe that one in four Lebanese in this study had a mental

health disorder during their lifetime, according to the Diagnostic and Statistic Manual of Mental Disorders (DSM-IV) criteria that the WHO tool uses, with major depression being the most common disorder. This is similar to prevalence of mental illness in the United Kingdom and lies within the range observed in the WHO's World Mental Health Surveys in other countries.

The researchers also estimated that one in three Lebanese would have one or more mental disorders by the age of 75, which is also similar to survey results in other countries. Only half the surveyed people with a mental disorder had ever received professional help; of those who did have a mental disorder, the delay in treatment ranged from 6 years for mood disorders to 28 years for anxiety disorders. Finally, exposure to war-related events increased the risk of developing an anxiety, mood, or impulse -control disorder by 6-fold, 3-fold and 13-fold respectively.

Further studies are needed to establish whether this relationship between war events and mental illness can be generalized to other countries. But as Robert Ursano and David Benedek, uninvolved with the research, say in their perspective also published in PLoS Medicine this week: by “quantifying the strength of this association in a nation historically torn by conflict serves as a guidepost for health policy makers in nations engaged in prolonged conflicts”. The finding that many people in Lebanon who develop mental disorders never receive treatment is not due to a shortage of health-care professionals in the country, so the researchers suggest that the best way to improve diagnosis and treatment might be to increase the awareness of these disorders and to reduce the taboos associated with mental illness.

Citation: Karam EG, Mneimneh ZN, Dimassi H, Fayyad JA, Karam AN, et al. (2008) Lifetime prevalence of mental disorders in Lebanon: First onset, treatment, and exposure to war. PLoS Med 5(4): e61. ([medicine.plosjournals.org/perl ... journal.pmed.0050061](http://medicine.plosjournals.org/permalink/journal.pmed.0050061))

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