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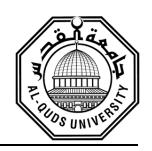
Effect of Sociodemographic Factors and Antipsychotics on Quality of Life in Palestinian Patients with Schizophrenia

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Quality of life has a vital role in developing treatments that can help individuals with schizophrenia to lead more fulfilling and satisfying lives. To date, there are limited studies regarding the quality of life (QoL) in patients with schizophrenia in Palestine. To evaluate the impact of sociodemographic factors and antipsychotics on quality of life in Palestinian patients with schizophrenia, we used the SF-36 Questionnaire. Method: Eighty patients with schizophrenia were interviewed in both HEBRON Community Mental Health Center and Dr. Kamal Mental health hospital in Bethlehem. Data was gathered between the end of December, 2017 and the beginning of February, 2018. Data was collected by the administration of SF-36 Questionnaire during a personal interview with eighty patients. Medical files were used to obtain medication. Statistical analysis was performed using the statistical package for social sciences (SPSS), and data was analyzed by using parametric tests. A number of significant correlations were identified between QoL and the independent factors. There was no impact of gender on QoL. Similarly, the results show no significance difference in the QoL with respect to marital status. Our findings show that being employed was associated with better QoL in the physical function domain (PF) and the role physical domain (RF). Results also show a positive correlation between the two educational levels diploma degree and vocational degree and QoL in the physical function domain (PF) and the role emotional domain (RE). The results show no correlation between bachelor degree and QoL. Regarding place of living, schizophrenia patients who live in the city have better QoL in the bodily pain domain (BP) and in the social functioning domain (SF). In the current study, income higher than 4000 NIS/month was associated with high quality of life score. The study found that 82.5% of patients with schizophrenia live with a very low income, which is below 3000 NIS/month. Finally, our findings reveal that there is a





significant correlation between QoL and patients who did not stay in a mental health hospital. Antipsychotic drugs are the cornerstone for the treatment of schizophrenia. These medications have always been of great interest in studying quality of life in schizophrenia. In our study, majority of the patients were receiving single typical antipsychotic medication (45%). Approximately 35.5% were receiving combinational antipsychotic medications (typical and atypical), and 20% were receiving atypical antipsychotic medications. The results show a positive significant difference between QoL and patients receiving atypical medications in the SF domain. The relationship between subjective treatment satisfaction and QoL in patients with schizophrenia was studied. Our results show that 82.5% of the patients were satisfied with their medication. Moreover, it was found that there is a positive correlation between satisfaction to medication and OoL in mental health domain (MH). The study indicates that 63.8% of schizophrenic patients are smokers. The results show that there is a positive significant difference between QoL and non-smoker patients in the RE and SF domain. Furthermore, results indicate a positive correlation between QoL and family support in all domains of the questionnaire. Unexpectedly, only 18% of our sample have medical conditions other than schizophrenia. In addition, the study found a negative correlation between age and QoL in the PF domain, which means poorer quality of life with increased age. Finally, we found a negative correlation between duration of illness and QoL (As duration of illness increases, QoL decreases). This study characterized the QoL of schizophrenic Palestinian patients and determined the factors that may impact it. The study shows that being employed was associated with better QoL. In addition, living in an area where access to specialist care is available increases QoL for schizophrenic patients. While the majority of the patients receive typical antipsychotic medication (45%), approximately 20% receive atypical antipsychotic medications. Relative to a study conducted in 2004 in which only 2% of patients received atypical medication, the increased use of atypical medication is a positive development. Consistent with literature reports, the results show a positive relationship between QoL and patients receiving atypical medications in the SF domain. This may be attributed to the known effect of atypical medications on negative symptoms. A positive correlation between satisfaction to medication and QoL in the MH domain was identified, in addition to a negative correlation with age (Poorer quality of life with increased age). Finally, we found a negative correlation between duration of illness and QoL (As duration of illness increases, QoL decreases).