Insights on the Depression and Anxiety

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Spiritual and religious Islamic perspectives of healing of posttraumatic stress disorder

It is known today that psycho-trauma and PTSD cause different levels of mental and social dysfunction. Human spirituality and capacity to meet further life difficulties become severely damaged. There is wide accepted attitude today that in holistic approach in process of healing PTSD and psycho-trauma is necessary to include other professionals from community resource regarding needs of trauma victims. In Bosnia and Herzegovina after very severe war (1992-1995) as mental health professionals, we are faced with increasing number of different mental health disorders as result of severe trauma experiences. Regarding community based care orientation it is necessary to include and religion professionals. According national and religious background of majority of our population in Tuzla Canton that is Muslim, we meet spiritual needs of our clients as needs for Islamic explanation of life and death meaning. Our clients need to talk about spiritual issues in daily therapy and to practice daily religious rituals. Regarding that in this paper we tried to interface Islamic principles and it's beneficial toward psycho-trauma and PTSD, as well as Muslim perspectives in attempt to apply spiritual practice in therapeutic tools for better efficacy in spiritual healing of mental dysfunction's of believers who survived severe trauma, especially war trauma.

Review Article **Published Date:- 2017-09-14**

Anxiety and depression as an effect of birth order or being an only child: Results of an internet survey in Poland and Germany

Background: Various studies examined the effect of birth order. First born children show usually better cognitive performance than their later born siblings. Studies on emotional aspects yield heterogeneous results, sometimes in favour of first born, sometimes in favour of later born children. Studies comparing only-children with children with siblings are rare.

Method: An internet survey was performed in 508 Polish and 500 German subjects. Only-children, first born, middle born and latest born children were compared regarding body mass index, depression, anxiety and partnership.

Results: No differences among first born, middle born and latest born children were detected. Only-children reported significantly less symptoms of social phobia than first born children ($z=0.50$, $p< 0.01$).

Conclusions: Except for suicidality, the results of this study question the sense of further investment in studying effects of birth order. In contrast, examining differences between only-children vs. children having siblings seems to have the potential to yield interesting and new results. Optimally, such research would combine self-report measures with reports from others, such as parents, teachers or clinicians.

Mini Review **Published Date:- 2017-05-04**

Multi-factorial Depressive Disorders Need Multi-dimensional Interventions

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Depressive disorders are so frequent and disabling health conditions which have been inarguably accepted to be a public health concern [1]. Many drugs have been developed to treat depression, however the efficacy of the antidepressants are inadequate particularly for mild or moderate depression [2-4]. It is also mentioned that when considering the trials about the treatment effect of the antidepressants, you should be careful about the results because of reflecting a small proportion of the society [4]. Despite the methodological issues related to the controversial results about the antidepressant efficacy, a recent review showed that the antidepressant effects of the drugs persist in a six month period [5,6].

Research Article **Published Date:- 2017-03-09**

Burnout and Related Factors in Caregivers of outpatients with Schizophrenia

Objectives: Care of a person with schizophrenia involves multiple problems, possibly leading to burnout which is a culturally influenced phenomenon. The aim of this study was to investigate burnout and related factors in caregivers of outpatients with schizophrenia.

Methods: Subjects included in the study were 40 primary caregivers of outpatients with schizophrenia (15 males, 25 females) whom were assessed with the Maslach Burnout Inventory (MBI), the Beck Depression Inventory (BDI) and the Beck Anxiety Inventory (BAI). Patients were also administered the Calgary Depression Scale (CDS). Also, sociodemographic information about patients and their caregivers were taken. The significance of differences between two groups was determined by Mann-Whitney U-test. The relationships between the variables were evaluated by Pearson correlation analysis.

Results: No significant difference was found in the MBI subscale scores in terms of caregivers gender, marital status, and education, being a family member, having enough information about the illness and taking support during caregiving. Emotional Exhaustion and Personal Accomplishment subscale scores of the caregivers were significantly different in terms of patients' adaptation to treatment or not (respectively; $p=0.010$, $p=0.030$). The MBI-Emotional Exhaustion scores revealed significant positive correlations with the BDI and BAI total scores. Also, the MBI- Depersonalization scores and the BAI scores were positively correlated.

Conclusions: Burnout levels in caregivers of patients with schizophrenia were lower when compared with other cultures. Only treatment compliance predicted burnout, while other factors were excluded. Therefore, professionals have to help to patients primarily adapt to their treatment.
