Personality Disorders in Medical Students: Measuring by IPDE-10

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Objectives: *The purpose of the present study was to investigate the personality disorders(PDs) of fifth year medical students of Chiang Mai University according to International Classification of Disease -10 (ICD-10) system by using IPDE-10.*

Material and Method: *A group of ninety-nine out of 150 of fifth-year medical students of Chiang Mai University undertook personality disorder inventory - International Personality Disorder Examination ICD-10 screening questionnaires (IPDE-ICD 10). Those who received diagnoses of personality disorders were subsequently interviewed by the authors to find definite diagnoses.*

Results: *The prevalence rate of PDs was 9%. The proportion of all PDs was as follows; 1%, 3%, 2%,2%, and 1% for paranoid, impulsive, histrionic, anankastic, and dependent, respectively. The rate of probable diagnoses of PDs ranged from 1%-22.8%.*

Conclusion: *The prevalence rate found in the medical students group did not differ from that in other populations. The benefit of ICD diagnosis system was discussed.*

Keywords: *Medical students personality disorders, IPDE*

One of the most serious problems is emotional disturbance that arises from their personality traits which would affect their academic performance[1]. To learn of students' abnormal characters would help preventing them from academic failures, i.e. dropouts, premature retirement, on the contrary to improve students' performance by eliciting their positive traits and help them find out the life style they should have[2].

The university students' personalities have been long studied including Chiang Mai medical students[3-6]. Several tools were used to measure them - 16 Personality Factors (16PF), California Psychological inventory (CPI), Drawing test, House tree person test, Rorchach test etc. Most of them were used for the admission process in order to screen out applicants who had derogatory traits and to recruit ones with good personalities that were found on the test.

Nevertheless, a basic study on their personalities according to the Mental Disorder system,

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i.e. International Classification of Diseases (ICD) is nil in Thailand. Also, the authors searched on the MEDLINE, PsyLit, Socioflie from 1990 to the present and did not find any study evaluating medical students' personalities by ICD,or using IPDE. Thus, the authors investigated personality disorders (PDs) in medical students of Chiang Mai University by using the ICD-10 (International clsasiification of Disease -10) on their prevalence rate of personality disorder.

Material and Method

One hundred and fifty five - year medical students in the year 2003 were introduced to undertake the personality disorder questionnaire. Ninety-nine of them anonymously carried out the test- the International Personality Disorder Examination ICD-10 screening questionnaires (IPDE-ICD 10).

IPDE is short for international personality disorder examination developed by Lorager et al[6]. IPDE comprised of 85 true-false questions covering 9 personality disorders in ICD-10, i.e, paranoid, schizoid, dissocial, histrionic, impulsive, borderline, anankastic,

anxious, and dependent personality disorders. In general, it takes 5-7 minutes to finish it.

Those who received high scores which could be judged to be positive, would be interviewed by the authors. The interview by the International Personality Disorder -10 Module interview schedule[6] took 75 minutes to complete. After that the interviewer could give a definite diagnosis when a subject meets full criteria, whereas a probable diagnosis is used if a subject meets some.

The data were analyzed in descriptive fashion by using the SPSS program for Windows version 10.

Results

Participation rate was 67%.The average age of the 99 students was 22.56 years (range 21-25 years; SD = 1.53). The sex ratio was, male to female, 50.5: 49.5. Of the total survey samples, nine persons(9%) had at least one PD. The proportion of definite diagnoses of personality disorders was as follows; 1%, 3%, 2%,2%, and 1% for paranoid, impulsive, histrionic, anankastic, and dependent, respectively. Probable diagnoses of PDs accounted for from 1% -23.2 %, by which histrionic and dependent were the most whereas borderline was the least.There was no difference amongthe groups by sex, and among clusters. Of these 9 students with PDs, 5 were male and 4 were female. Most of them were in cluster B and C.

Discussion

Because data concerning medical student's personalities categorized by ICD does not exist, thus, the present finding can only be compared to other results in different classified samples or differrent personality attributes. In comparison between this outcome and the Arab Emirates where the same tool was applied, it was found that the prevalence rate of both studies was quite close(12.7%)[8]. However, the study was conducted in primary health care patients.

Likewise, Ionescu and Popescu found nearly 15% had prominent personality traits in a group of 111 students with depressive disorders[9].

In the study of Samuels J et al using the DSM-IV criteria, it showed a similar prevalence rate to the present stydy, in that the estimated overall prevalence of DSM-IV personality disorders was 9%[10]. Cluster A disorders were most prevalent in men who had never married. Cluster B disorders were most prevalent in young men without a high school degree, and cluster C disorders were most prevalent in high school graduates who had never married. Whereas, Jackson and Burgess studied an Australian population and found that the prevalence rate at 6.5%, in which 3.09% were anankastic PD and 0.52 % histrionic PD[11].

Two studies related to medical students by Sinha BK and Watson Dc, although they are different kinds of tools. The first one examined the prevalence of PDs in a sample of first-year university students. The three self-reporting measures used to assess personality disorders were (a) the Coolidge Axis II Inventory (CATI); (b) Millon Clinical Multiaxial Inventory-II (MCMI-II); and (c) Minnesota Multiphasic Personality Inventory-Personality Disorder Scale (MMPI-PD). The results indicated a prevalence in the range of 0% to 16% for males, and approximately 1% to 26% for females. These findings generally confirm the prevalence range of 5% to 15% reported in other investigations of nonpatient samples[12].

Table 1. The number of students who met the criteria for ICD-10 personality disorders

| Types of PDs | Definite Diagnoses of PDs | | Probable diagnoses of PDs | |
	No.	Sex	No.	%
Cluster A				
Paranoid	1	male	3	2.9
Schizoid	0	-	9	8.9
Cluster B				
Dissocial	0	-	2	1.9
Impulsive	3	1 male, 2 female	16	15.8
Borderline	0	-	1	1
Histrionic	2	1 male, 1 female	23	22.8
Cluster C				
Anankastic	2	both male	19	18.8
Anxious	0	-	17	16.8
Dependent	1	male	21	20.8

The previous study discovered that the overall scale on California Psychological Inventory (CPI) of the fifth year medical students six years ago were in normal range except the low score on some variables such as communuality, sense of well-being, social presence[6]. Whereas, the present group of study showed more in a social encounter. The personalities in Cluster B,those of impulsive, histrionic, anankastic were still more common than in other clusters. It seemed that medical students of Chiang Mai University (or almost every part of Thailand) in former times tended to be schizoid, anankastic. However, the new trend is changing. There was more emotional expression than before.

Even though students with personality disorders may have some difficults in academic problems, the studied students' performances were not covered in the present study. In the selection process of the Faculty of Medicine, Chiang Mai university, all applicants who passed the written examination undertook some personality tests such as 16 Personality Factor (16PF), California psychological inventory (CPI) which could determine those desirable or undesirable characteristics. Those who had significant abnormalities on the tests would receive a second intense interview to tell how eligible they were. It seems that the authors made a great effort allowing only individuals with normal personalities in. However, in terms of personality disorder clssified by ICD-10, they have never been used as a tool for the selection process, nor ever been studied in Thailand.

Even though, the classification of personality disorders by ICD-10 can help the service of the psychiatric clinical practice in terms of predisposing factors to some psychiatric illnesses, it can be useful to counsal work in aiding students to make a career choice after their graduation. For example, those who have paranoid characters would be better working without much social interaction, whereas theseones with an anakastic personality should be apt at delicate or detailed jobs like a surgeon.

Conclusion

The prevalence rate found in this group of medical students did not differ from that in other populations. The number of studied of medial students' personalities using the standard diagnosis system, DSM and ICD, was insufficient. To study the PDs by means of ICD would help to guide their future career because those who have personality disorders need comfortable surroundings to fit them in more than they themselves would be adaptable to people and settings.

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บุคลิกภาพผิดปกติของนักศึกษาแพทย์: วัดโดยใช้ IPDE-10

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วัตถุประสงค์: เพื่อศึกษาบุคลิกภาพผิดปกติตามเกณฑ์วินิจฉัยแบบ ICD-10 (international classification of disease-10)ของนักศึกษาแพทย์มหาวิทยาลัยเชียงใหม่ ด้วยเครื่องมือ International Personality Disorder Examination ICD-10 screening questionnaires (IPDE-ICD 10)

วัสดุและวิธีการ: นักศึกษาแพทย์ชั้นปีที่ 5 คณะแพทยศาสตร์ มหาวิทยาลัยเชียงใหม่จำนวน 99 คนจากทั้งหมด 150 คนในชั้นปี ได้ตอบแบบสอบถาม IPDE-ICD10 หลังจากนั้น นักศึกษาแพทย์ที่ได้รับการวินิจฉัยว่ามีบุคลิกภาพผิดปกติจะได้รับการสัมภาษณ์โดยจิตแพทย์เพื่อยืนยันการวินิจฉัยโรค

ผลการศึกษา: อัตราความชุกของบุคลิกภาพผิดปกติร้อยละ 8 ความผิดปกติของบุคลิกภาพชนิดต่าง ๆ ที่พบมีสัดส่วนดังนี้ paranoid 1%, impulsive 2%, histrionic 2%, anankastic 2%, และ dependent 1% และมีแนวโน้มความผิดปกติทางบุคลิกภาพ (probable diagnosis) ที่1%-22.8%

สรุป: พบว่าอัตราชุกของแนวโน้มความผิดปกติในนักศึกษาแพทย์ไม่แตกต่างกับกลุ่มประชากรอื่น ๆ ที่มีการศึกษามาก่อนหน้านี้ และได้อภิปรายถึงประโยชน์ของการวินิจฉัยด้วย ICD