Chapter -5

Summary

&

Conclusion
This chapter deals with the summary and conclusion obtained in the present study. It is already clarified that this study tapped CHD, H.B.P. and gastrointestinal disorders as the independent variable while the group dependent variable covered depression, death anxiety and quality of life. This study was conducted to realize the following objectives.

(1) To ascertain the effects of CHD on the feeling of depression
(2) To study the effects of CHD on the feeling of death anxiety
(3) To evaluate the effects of CHD on the feeling of quality of life.
(4) To investigate the effects of H.B.P. on the feeling of depression.
(5) To ascertain the effects of H.B.P. on the feeling of death anxiety.
(6) To assess the effects of H.B.P. on the feeling of quality of life.
(7) To evaluate the effects of gastrointestinal problems on the feeling of depression.
(8) To measure the effects of gastrointestinal problems on the feeling of death anxiety.
(9) To investigate the effects of gastrointestinal problems on the feeling of quality of life.

Hypotheses

The following hypotheses were examined in the proposed study:

(1) The CHD patients and normal subjects would differ significantly in depression.

(2) The CHD patient and normal subjects would differ significantly in death anxiety.

(3) The CHD patients and normal subjects would differ significantly in quality of life.

(4) The H.B.P. patients and normal subjects would differ significantly in depression.

(5) The H.B.P. patients and normal subjects would differ significantly in death anxiety.

(6) The H.B.P. patients and normal subjects would differ significantly in quality of life.

(7) The gastrointestinal patients and normal subjects would differ significantly in depression.
(8) The gastrointestinal patients and normal subjects would differ significantly in death anxiety.

(9) The gastrointestinal patients and normal subjects would differ significantly in quality of life.

Methodology

Sample

Patients with three types of psychophysiological problems were selected for the present study. The civil hospital and the private nursing homes located in Jaunpur city were visited for this purpose. In all 300 patients suffering from three (CHD, H.B.P. and GI) psychophysiological disorders were indentified for testing. Each group consisted of 100 patients. A sample of normal Ss of 100 was also selected for comparison. Age of the patient and normal subjected ranged from 30 years to 70 years. The mean age being 52.46 yrs.

Design
There types of patients (viz., HBD, CHD & GI) having psychophysiological disorders served as the subjected in the present study. A control (normal) groups.

Tools

The following tools were used:

(1) Depression Scale

It has been developed by Singh (1994). It consist of 42 items accompanied by 5 category of responses. Higher score on it indicate higher depression and vice-versa.

(2) Death Anxiety Scale

It has been constructed by G.P. Thakur and Manju Thakur (1984). It contains 16 items accompanied by five alternative responses. Lower scores on it indicate lower death anxiety and vice-versa.

(3) PGI Quality of Life Scale
This scale has been developed by Mudgil et al. (1998). It consists of 26 items with levels of responses.

The above scales are reliable and valid also.

**Main Findings**

The results obtained in this study are briefly stated as under:

1. The CHD group scored higher mean value on depression scale in comparison to normal group. One thing clearly evident that three patient group scores significantly higher on all the scales in comparison to the normal group. The difference between two means is significant (CR = 10.44) at .01 level of confidence which suggests that the CHD patients suffer more from depressive problem in comparison to control subjects. It is felt that CHD patients should be offered psychological assistance to enjoy healthy life and to improve their psychological well-being.

2. The CHD group scored higher mean value on death anxiety scale in comparison to normal group. The
difference between two mean is significant (CR = 24.09) at .01 level of confidence which suggest that the CHD patient are more anxious about death in comparison to control group

(3) The CHD group scored higher mean value on quality of life scale in comparison to normal group. The difference between two mean is significant (CR = 5.82) at .01 level of confidence, which suggest that

(4) The H.B.P group scored higher mean value on depression Scale in comparison to normal group. The difference between Two mean is significant (CR=6.95) at .01 level of confidence, which suggest that the H.B.P. patient suffer more from depressive problem in comparison to their counterparts.

(5) H.B.P. patient group scored higher mean value death anxiety scale in comparison to normal group. The difference between two mean is significant (CR=5.66) at .01 level of confidence, which suggest that the H.B.P. patient are more anxious about death in comparison to their normal counterparts.

(6) H.B.P. group scored higher men value on quality of life scale
In comparison to normal group

(7) Gastrointestinal group score higher mean value on depression scale in comparison to normal group. The difference between two mean is significant (CR = 8.04) at .01 level of confidence which suggest that the gastrointestinal patient suffer more from depressive problem in comparison to the normal groups.

(8) Gastrointestinal group scored higher mean value on death anxiety scale in comparison group. The difference between two mean is significant (CR = 0.48) at .05 level of confidence which suggest that the GI patients are more anxious about life in comparison to normal group.

(9) Gastrointestinal group scored higher mean value on quality of life scale in comparison to normal group. The difference between two mean is significant (CR =10.97) at .01 level of confidence, which suggest that the GI group is not as satisfied with life as the normal groups appears to be.

(10) When the three patient group were compared on the depression scale. It was found that the CHD group suffers more from depression in comparison to the other groups. The next to CHD gastrointestinal group scored group while not found to be significant which suggest that the three patients suffer more or less equally from depression.
(11) The comparison of three patients groups on death anxiety scale revealed that gastrointestinal patients scored the highest followed by the CHD group and f-ratio was found to be significant which suggest that gastrointestinal patients are more anxious about the death as compared to the other two group.

(12) The comparison of the three patients groups on the quality of life scales shows that GI patients relatively feel well-being in comparison to the other two disease groups.