

SUMMARY

OBJECTIVE OF THE STUDY IS:-

Our main objective of this study is to find out the factors contributing to alcoholic dementia

SPECIFIC HYPOTHESES ARE-

- (1) Alcoholics with high depression would be at high risk of alcoholic dementia.
- (2) Alcoholics with stress would be at high risk of alcoholic dementia.
- (3) Coping strategies are positively related to alcoholic dementia.
- (4) Chronic alcohol exposure leads to exaggerated aging.
- (5) Alcoholics with high dementia would perform poorly in short term or working memory.

212 male Alcoholics drawn from Hospitals and Rehabilitation centers of Jalandhar, Nawashaher, Banga, Nakodor, Kapurthala and dahan kalera served as subjects in this study. Their age ranged from 19 yrs to 85 yrs with an average of 45 yrs approximately. The sampling can be described as incidental as only those alcoholics were included in the study who belonged to different areas of Punjab. Pre dominantly they belonged to various villages in Doaba belt.

The following tests were used for the collection of data:-

- (1) Ways of coping Questionnaire(Folkman and Lazarus,1988)
- (2) Presumptive Stressful life Events scale (Gurmeet Dalbir and Harsharan, 1971).
- (3) PGI Memory Scale (Parsad and Wig, 1979)
- (4) Personal Assessment Inventory (Krug and Laughlin,1984)
- (5) Blessed Dementia Scale (BLS-D) (Blessed,1968)

In order to find out the various factors which influence the relationship between Dementia and Alcoholism each and every variable is closely examined with the help of above given tests. All the above mentioned tests were administered and scored according to the standard instructions provided in the respective manuals.

The data were processed essentially using mean, skewness, Kurtosis, t-ratios, frequency distribution and discriminant analysis

The main findings are:-

(1) Frequency distributions along with their means, standard deviations, skewness and kurtosis are reported in following tables. A Careful review of the distributions reveal that scores on most of the variables are more or less normally distributed. Distributions of scores on some of the indices were not very smooth.

(2) If we look upon depression's mean scores we can say that the depression is playing a significant role in Dementia and Alcoholism relationship, as the mean score of the high dementia group is comparatively high in depression. Even the studies indicate that depression is a common causal factor between Alcoholism and dementia. It leads to Alcoholism and Dementia.

(3) In case of stress, both t-ratio and mean score clearly declare. Stress as a strong factor which contributes enough to build a strong relationship between Dementia and Alcoholism. The t-ratio of this variables is 2.7 ** i.e. significant on both the levels (.05 and 0.01). As we know that high amount of stress leads to Alcoholism as people use it as a coping style. With excessive drinking, brain cells get damaged and leads to dementia. Studies also support the fact that stress can directly triggers dementia in elderly people. Hence stress is also a strong variable of our study, which is inturn found to be most significant variable influencing directly or indirectly the relationship between dementia and Alcoholism.

(4) Coping styles are another variable of our present study which contrary to expectations shows no influence or plays no significant role in Dementia and Alcoholism relationship. Following coping styles were use in the present study:-

- (1) Confrontive coping-(CN)
- (1) Distancing (DIS)
- (2) Self control - (SC)
- (3) Seeking social support(SSS)
- (4) Accepting Responsibility –(AR)
- (5) Escape Avoidance (EA)
- (6) Planful problem solving(PPS)
- (7) Positive Reappraisal (PR)

All the above given coping styles are high among the high dementia group which is quite contrary, As we were predicting in the beginning that only coping styles like confrontive, distancing and escape avoidance would be high among the Alcoholism. It is rarely seen that coping styles like self control, accepting responsibility planful problem solving and positive reappraisal used by Alcoholics. Even Alcoholism itself is a coping mechanism which distance the person from his responsibilities and duties and make the person stress free or happy for certain time period.

(5) Contrary to expectations, once again, the high dementia group shows high scores in the Memory Scale. We were expecting in the beginning of the present study that the memory could be the factor which influence Dementia and Alcoholism relationship, as Alcoholics with high dementia cannot perform well in the various subtests of the Memory Scale. Following are the various Memory subtests used in the present study:-

- (1) Remote Memory(RM)
- (2) Recent Memory (RCM)
- (3) Mental Balance (MB)
- (4) Attention Concentration (AC)
- (5) Delayed Recall (DR)
- (6) Immediate Recall (IR)
- (7) Retention for Similar pairs (RSP)
- (8) Retention for Dissimilar pairs(RDP)
- (9) Visual Retention (VR)
- (10) Recognition (REC)

All the variables mentioned above shows high score in the high dementia group. Which is clearly shows that memory do not support the relationship between dementia and alcoholism relationship.

(6) Contrary to our expectation Total Score of Memory (TS) is high among the high dementia group. Total score (TS) signifies the total score of all the ten sub tests of PGI Memory scale.

(7) If we look upon the discriminant analysis we find out that variables like coping styles and Memory subtests plays a significant role in the relationship between Dementia and Alcoholism.

According to discriminant Analysis following are the variables which contribute to the relationship between Dementia and Alcoholism.

GROUP II –HIGH DEMENTIA GROUP

1. Visual retention (VR)
2. Immediate Recall (IR)
3. Total score (TS)
4. Planful problem solving(PPS)
5. Retention for similar pairs(RSP)
6. Recent Memory (RCM)
7. Recognition (REC)
8. Mental Balance(MB)
9. Remote Memory (RM)
10. Retention for Dissimilar pairs (RDP)
11. Confrontive coping (CN)
12. Depression (DEP)
13. Self control (SC)
14. Delayed Recall (DR)
15. Attention Concentration(AC)

(8) Overall analysis reveals that all the five factors i.e. Memory, depression, stress, coping mechanism and age contribute to the relationship of dementia and Alcoholism in one way or the other.