

Q & A Mindline



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I am a 25-year-old accounts executive. For the past two months, I have been experiencing bouts of poor memory. I cannot concentrate very well and this is affecting my work. Please do advise.

Poor memory may be one of the most common reasons individuals consult a neurologist or a psychiatrist in India. This may be partly due to our memory-obsessed culture or rote learning educational method with which we all grew up. Therefore, any perceived shortcoming in concentration is thought to be parallel to a memory problem and leads to early consultation. Remember, poor concentration means, reduced registration of information and therefore poorer recall.

Other reasons for poor memory may include nutritional deficiencies, especially as many (in India) are vegetarian. Nutritional deficiencies lead to anaemia (low haemoglobin) and vitamin B 12 deficiency, which can affect memory. Lifestyle too is one big contributor for poor memory especially

stress, burnout, alcohol abuse, smoking, poor dietary habits and sleep disorder.

Further, we need to consider medical causes like hypertension, high cholesterol, heart and thyroid problems, dementia (seen mainly in much older adults) and other neurological conditions, which will depend on age, individual, family history, lifestyle and fitness.

A good start is to have an executive health check under supervision of a physician and/or psychiatrist, who alongside can evaluate mind and bodily causes of memory problems. They are likely to consider additional investigations like blood, vitamin B 12 level and possible imaging study like CT brain or MRI brain. The treatment will therefore depend on any underlying cause.

My aunt aged 50, suffered from serious and widespread breast cancer, which she struggled to accept and also had doubts with regard to the treatment offered. To our surprise, she was referred to a psychiatrist. Please explain the role of a psychiatrist for cancer patients.

Cancer is a serious medical condition that can be hard to accept no matter what the age of the patient is, as it brings with it, uncertainty about the outcome of the illness, recovery and life itself. Therefore, it is imperative that the clinician consider a multidimensional approach to address the needs of the mind and the body.

Consequently, patients must be offered palliative care (a multidisciplinary approach to specialized medical care

for people with serious illnesses). Such care focuses on providing individuals with relief from the symptoms, pain, stress, and anxiety associated with serious illness - whatever the diagnosis. Importantly, it works on improving the patient's and family's ability to make decisions about the treatment by enhancing the understanding of the illness, treatment options and likely outcome of each of those options. Additionally, it assists individuals all the way through the advanced stages of illness and in some cases to the last periods of life, as well as to follow families through the bereavement process.

Besides the above, the essential role of psychiatry in palliative care is to expand the focus beyond pain and physical symptoms control and to include other aspects of quality of life, such as the psychiatric (over 50 per cent of individuals with cancer suffer from diagnosable psychiatric ailment), psychosocial, existential and spiritual aspects of care. This may ultimately result in some patients being able to have a peaceful acceptance of the ailment and work on the process of recovery or acceptance of the life that they lived, so that they can face death with peace.

Psychiatrists will offer therapy and support, address and treat any psychiatric and psychological disorders besides existential distress that is common to all of us, more so, in those with cancer. I am glad that your specialist has referred your aunty for psychiatric support early. I believe this will reduce family distress and enable better engagement with needed intervention.

Ask your queries at bpositiveQA@apollolife.com