



Physical health crisis in people living with severe mental illness

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Abstract:

People living with severe mental illness (SMI) with physical health faces one of the greatest health inequality gap. The aim of this work is to consider the evidence in relation to health-care provision for people with SMI, identify gaps in knowledge, and provide an overview of the field. People with severe mental illness (SMI) have more physical comorbidity than the general population. The physical health disorders which have high prevalence in people with severe mental illness are mainly Nutritional and metabolic diseases, Cardiovascular diseases, Viral diseases, Respiratory tract diseases, Musculoskeletal diseases, Sexual dysfunction, pregnancy complications, Stomatognathic diseases, and Obesity related diseases. Furthermore, contributing factors are considered that impact on the physical health of these people, such as psychotropic medications (antipsychotics, antidepressants and mood stabilizers), individual lifestyle choices (e.g., smoking, diet, and exercise), psychiatric symptoms, as well as disparities in the health care. Life expectancy tends to decrease by 15-25 years among those people. People with mental health problems are two to three times more likely to smoke cigarettes, consume alcohol, and use cannabis and other illegal drugs observed by (Tidey and Miller, 2015) and (Hartz et al, 2014). To improve mental health of individuals and society at large includes the promotion of mental well-being, prevention of mental disorders, protection of human rights, and care of people suffering from mental disorders.

Biography:

Working as project coordinator in Diabetes project. Act as a technical expert for certain medical device and help patients to manage their Diabetes. Handles data collection and patient consent process.



Recent Publications:

1. Australian health policy collaboration, The Cost and Impact of a Deadly Combination: Serious Mental Illness with Concurrent Chronic Disease. A policy Issues paper for: The Royal Australian and New Zealand College of Psychiatrists, 2016.
2. Walker, E., R. McGee, and B. Drugs, Mortality in mental disorders and global burden of disease implications. A systematic review and meta-analysis. JAMA psychiatry, 2015.
3. World Health Organization, Risk to mental health: An overview of vulnerabilities and risk factors, 2012.
4. Akbaraly, T., et al., Dietary patterns and depressive symptoms in middle age. Br J Psych, 2009. 195: p. 408 413.
5. Serfaty, M., D. Haworth, and M. Buszewicz, Clinical Effectiveness of individuals cognitive Behavioral Therapy for Depressed Older people in Primary Care. Archives of General Psychiatry, 2009. 66: p. 1332.
6. World health organization, Global action plan for the prevention and control of noncommunicable diseases 2013-2020. 2013, WHO: Geneva, Switzerland.

Webinar on Natural and Traditional Medicine October 30, 2020, London, UK

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