

Inter-Rater Reliability of the Short Arabic Form of The Present State Examination (PSE-10)

Noha Sabry.

Faculty of Medicine, Cairo University,
Cairo, Egypt.

Date received: 1/1/2009

Date accepted: 4/3/2009

Background: The PSE-10 (WHO-SCAN, 1992) is a reliable and standard international instrument for the detection of symptoms of mental disorder. It is time consuming, requiring 2-3 hours to apply, and can only be used by trained clinicians. The Short Arabic version of the PSE (10) has been developed in conjunction with a large scale epidemiological survey of the prevalence of mental disorders in Southern Egypt. This was done in order to avoid a two stage assessment process, and shorten the assessment time.

Aim of the study: To assess the inter rater reliability of the Short Arabic Form of the PSE-10 so as to introduce it as a research instrument that can be used in epidemiological studies in Arab countries.

Methods: 160 subjects: 109 (68.1%) males and 51 (31.9%) females were each assessed by two trainees to make a total of 320 assessments by 32 trainees. Each trainee had a minimum of 2 years psychiatric training. All trainees attended a 5 day course application of the PSE. At the end of training, trainees were divided into 6 groups each supervised by a senior supervisor. Each team of two trainees assessed 10 cases. Both raters made independent symptom ratings, rated the level of confidence as to the clinical severity of any detected symptoms, and recorded a diagnosis according to DSM IV at the end of each section when applicable. Each rater made his/her final diagnosis independently and no change was made in subsequent

discussions. The degree of agreement concerning individual items, case status, and final diagnosis are calculated using Kappa. Internal consistency of the different subscales of the Short Arabic PSE is measured using Cronbach's coefficient alpha.

Results: Inter-rater reliability of individual symptoms is very high levels for most symptoms. Only 4 symptoms namely sudden loss of movement, irritability, situational anxiety and conscious resistance of obsessive thoughts and acts have moderate degrees of reliability. Inter rater agreement on the degree of certainty about caseness: this diagnostic decision distinguishes between those with no or minimal symptoms, sub clinical cases that do not require intervention, likely and definite cases of mental disorder. Raters agreed on caseness in 48 subjects (30%). There were excellent degrees of agreement on diagnosis: 20 cases have anxiety disorders ($k=0.91$), 14 cases had mood disorders ($k=0.86$), 9 cases have psychotic disorders ($k=0.88$), and 5 cases have a somatoform disorder ($k=0.82$).

Conclusion: The results of this study illustrate that the short Arabic PSE is a reliable interview with adequate levels of internal consistency. The Short Arabic version is less time consuming, and still retains the core symptoms required to reach a diagnosis of the common mental disorders

Keywords: Reliability, Inter rater, Short Arabic PSE, SCAN, Caseness.

Abbreviations:

PSE: Present State Examination

SCAN: Schedules for Clinical Assessment in Neuropsychiatry

PSE/CATEGO-4: Present State Examination/Computer Assisted Version of the Text

WHO: World Health Organization

Egypt. J. Psychiatry, June 2009; 29(2): 45-54

INTRODUCTION

The present State Examination (PSE-10) type of interview as administered by experienced clinicians can be considered as a "Standard", by which other interviews should be assessed, especially in real life situations which have the aim of detecting cases in the community (Farmer, et al. 2002).

PSE is the central component of the Schedules for Clinical Assessment in Neuropsychiatry (WHO, 1992). The English version of the SCAN (Schedule for Clinical

Assessment in Neuropsychiatry) was developed by Wing, et al. (1990) as an updated form of PSE-9 (Cooper, et al. 1977). The overall aim of SCAN is to provide comprehensive, accurate and standard means of describing and classifying clinical phenomena. The first, clinical aim is to promote the use of high-quality clinical observation. The PSE is designed to allow comparison of each respondent's experience and behavior against the examiner's glossary-defined concepts by a process of controlled clinical 'Cross-