

DEMENTIA VS. SEVERE MENTAL ILLNESS: A COMPARATIVE ANALYSIS WITHIN THE “RYTHM” PROGRAM IN KERALA, INDIA



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BACKGROUND

Community mental health programs play a vital role in managing chronic psychiatric and neurodegenerative disorders. The Rythm Community Mental Health Program, a community initiative of IQRAA International Hospital and Research Centre (Kozhikode, Kerala), provides comprehensive mental healthcare through outpatient services, home visits, and psychosocial support. This study compared clinical characteristics, service utilization, and recovery outcomes between individuals with Dementia and Severe Mental Illness enrolled in the program.

METHODS

- A comparative analysis was conducted among 34 participants enrolled in the Rythm Community Mental Health Program, comprising 17 individuals with Dementia and 17 with Severe Mental Illness (SMI).

Data collected included:

- . Demographic characteristics
- . Duration of illness
- . Service utilization (outpatient and home visits)
- . Clinical outcomes

Outcomes were categorized as **Good, Fair, or Poor** based on standardized measures of clinical recovery, functional stability, and overall psychosocial functioning.

RESULTS

Variable	Dementia (n=17))	SMI (n=17)	P-Value
Median Age (years)	85.0	73.0	<0.001
Median Duration of Illness (years)	0.5	12.0	<0.001
Home Visits	Comparable	Comparable	NS
Outpatient Visits	Comparable	Comparable	NS
Good Outcome	Lower proportion	41.2%	
Poor Outcome	41.2%	Lower proportion	
Overall Outcome Difference	---	---	0.025

Key Findings

- Dementia participants were significantly older than SMI participants.
- The SMI group had a substantially longer identified duration of illness.
- Home-visit and outpatient service utilization were comparable between groups.
- Clinical outcomes differed significantly between cohorts (p = 0.025).
- The SMI group demonstrated greater stability, with 41.2% achieving a Good Outcome.
- The Dementia group experienced poorer outcomes, with 41.2% classified as having a Poor Outcome.

CONCLUSIONS

- Dementia participants experienced significantly poorer outcomes despite comparable service utilization.
- Later identification and entry into care may contribute to adverse outcomes in dementia.
- Early detection and dementia-specific community interventions are needed to improve recovery trajectories.
- Sustained community-based care appears effective in promoting stability among individuals with SMI.