WHO defines health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”. Though we know that Mental Health is an integral part of Health, mental health is often neglected in the parlance of health.

Studies in Nepal have shown that at any one point in time at least 35% people in the community experience ‘conspicuous psychiatric morbidity’. In spite of the high prevalence, government of Nepal has not given enough priority for psychiatry in terms of psychiatry teaching and expanding psychiatric services.

The WHO World Mental Health Survey Consortium surveyed six less developed and eight developed countries to estimate prevalence, severity, and treatment of common mental disorders in 2001-2003. One of the shocking finding was that more than two-third of serious cases in less-developed countries received no treatment in the 12 months before the survey. One of the reasons for this could be the unavailability of psychiatric services in the community. The other could be lack of awareness about psychiatric illnesses in the primary care physicians.

Nepal has only one government psychiatric hospital in the country. The establishment of private medical colleges in different parts of the country have certainly helped to reduce the gap in care by providing the psychiatric services to the needy. However this is still inadequate, since majority of the patients visit government hospitals and Primary Health Care Centres for treatment, majority of which don’t have psychiatric services.

Most of the medical school’s undergraduate curriculum don’t give sufficient knowledge on psychiatry. So, the primary care physicians posted in these Primary Care Centres do not get adequate training to diagnose and treat common psychiatric problems. General epidemiological surveys in primary care setting have indicated that as many as 30% of patients attend health services primarily for a mental health problem and most of the primary care physicians with limited knowledge in psychiatry most of these patients go untreated.

The basic purpose of teaching and training at undergraduate level is to prepare medical graduates to serve better at primary health care level. The patients with physical illness have concomitant emotional problems requiring professional handling, therefore teaching of Psychiatry at undergraduate level becomes even more relevant and essential.

Psychiatry is taught under Internal Medicine in most of the medical curriculum with very less marks allotment in spite of its greater impact on health. The objective of undergraduate psychiatric education should be to equip medical students with core psychiatric knowledge useful in daily medical practice.

It is now realized that training of Psychiatry as a separate subject to
undergraduate medical students is essential. Knowledge of Psychiatry, Mental health, and Behavioural Sciences equips the students to deal with various difficult and complex situations during medical practice. This will in turn help them to develop proper communication skills and to empathize with their patients and their suffering. It instils humanistic values in them, further empowering them to establish and maintain fruitful professional relationships with their patients.

Thus to conclude, establishing Psychiatry as a separate subject in the undergraduate curriculum is essential and necessary to provide basic mental health services to all of Nepal.

REFERENCES

