Abstract:

BACKGROUND: Anorexia nervosa is a rare disorder in Africans, in spite of posing a serious public health hazard in the West. Whereas it is possible that African psychiatrists lack the skills to diagnose the disorder, other possible explanations for its apparent rarity must be sought in view of emerging evidence, which suggests a real lack of occurrence. OBJECTIVES: To establish the knowledge of practicing Kenyan psychiatrists about the signs, symptoms and management of anorexia nervosa and to establish the number of cases they had seen during all their years of practice of psychiatry. DESIGN: Telephone survey and data collection: case-finding approach. SETTING: Kenya, June 2001 METHODS: Forty seven psychiatrists registered to practice in Kenya as of June 2001 qualified for inclusion. The respondents were interviewed on the same day, to reduce the likelihood of cross checking between colleagues. RK called each one, (all knew her) explained the nature of the survey and obtained verbal consent to administer the brief (10 minutes) questionnaire, developed by the authors for the purpose. RESULTS: Twenty seven of all those eligible were reached on the day. All but one gave consent for the interview (55% response rate). The 20 who were not reached were similar to the respondents with regard to experience in psychiatry, (mean duration 11.4 versus 10.9 yrs) but differed in their place of residence, the majority of those not reached resided out of Nairobi (60% versus 26%). In a cumulative total of 320 years of practice, they had seen 16 cases of which seven were of African origin. The rest were Caucasian or of Asian origin. The psychiatrists demonstrated adequate skill in recognising anorexia nervosa. CONCLUSION: Kenyan psychiatrists can recognise cases of anorexia nervosa. The condition is rare in Kenya. The reasons for this remain unclear and traditional explanations for its cause as due to pressure for thinness may not be adequate for the Kenyan case.