

Poster presentation

Depression in acute phase of ischemic stroke: frequency and associated factors

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Background

Depression is associated with poor functional recovery in acute ischemic stroke. Though some factors associated to depression at few months are known, little is known about depression in acute phase of stroke and its related factors. The objective of this research is to study the frequency of depression in acute phase of stroke, as well as what clinical and psychological variables are related with its development and evolution.

Materials and methods

64 patients with a first event of ischemic stroke were included in a prospective study, excluding previous history of depression. 49 patients were evaluated at one month. Volume and location of stroke were confirmed by CT or MRI performed between days 4 to 7. Stroke severity was evaluated by NIHSS at admission, discharge and at one month, and functional condition by modified Rankin Scale (mRS) and Barthel Index (BI) at discharge and at one month. Depression was evaluated by Yessavage depression scale and DSM IV criteria at discharge and at one month. Familiar history of depression and psychiatric disease, social isolation, catastrophic reaction and education level were recorded.

Results

22 patients (34.4%) developed depression at discharge, and 26 (53.1%) at one month. Patients with depression at discharge were older (75 ± 8 vs. 70 ± 10 years, $p = 0.03$), and had more severe stroke (NIHSS 2 [0, 5] vs. 1 [0, 2], $p = 0.02$). At discharge we also found a relationship between the presence of depressive symptoms and stroke severity, such as depressed mood (NIHSS 2 [1, 4], vs. 1 [0,

2] $p = 0.05$), anhedonia (NIHSS 2 [1, 4] vs. 1 [0, 2] $p = 0.03$) and psychomotor agitation or retardation (NIHSS 2 [1, 4] vs. 1 [0, 2] $p = 0.002$), and between feelings of worthlessness and functional condition (BI 40 [35, 95] vs. 100 [80, 100], $p = 0.01$; mRS 4 [3, 4] vs. 2 [1, 3], $p = 0.002$). At one month we only found relationship between some depressive symptoms and functional condition, such as insomnia (mRS 2 [1, 3] vs. 1 [0, 3], $p = 0.04$) and fatigue (BI 90 [70, 100] vs. 100 [95, 100], $p = 0.01$), but not between depression and different variables.

Discussion

1. Post-stroke depression is more frequent at one month of evolution that in the moment of discharge. 2. Depression at discharge is related with functional condition of the patient.

References

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