

VA Study: Untreated Anxiety, Depression Found

BY DOUG BRUNK
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SAN DIEGO — Most patients with chronic obstructive pulmonary disease have at least moderate levels of anxiety or depression, results from a Veterans Affairs hospital study showed.

In fact, most such patients have anxiety as well as depressive symptoms, often at moderate to severe levels, Mark E. Kunik, M.D., reported at the annual meeting of the American Association for Geriatric Psychiatry.

"We need to develop interventions that are aimed at the level of diagnosis, acute treatment, and long-term management that targets both anxiety and depression," Dr. Kunik said.

In a study that was part of a larger randomized, controlled trial of cognitive behavioral therapy for cognitively intact COPD patients who are anxious or depressed, Dr. Kunik and his associates at the Michael E. DeBakey VA Medical Center, Houston, screened 557 men with COPD or related diagnoses by telephone with five questions from the Primary Care Evaluation of Mental Disorders (PRIME-MD):

1. During the past month, have you been bothered often by "nerves" or feeling anxious or on edge?
2. During the past month, have you been bothered often by worrying about a lot of different things?
3. During the past month, have you had an anxiety attack (suddenly feeling fear or panic)?
4. During the past month, have you been

bothered often by feeling down, depressed, or hopeless?

5. During the past month, have you been bothered often by having little interest or pleasure in doing things?

Patients who screened positive by phone were assessed at the medical center with the Beck Depression Inventory, the Beck Anxiety Inventory, spirometry, the Mini Mental State Examination, and the structured clinical interview for DSM-III-R (SCID). Of the 557 men, 204 met eligibil-

ity for the trial. The rest did not have COPD by spirometry, did not have anxiety or depression based on the Beck scales, or were excluded for other reasons.

Of the 204 eligible men, 24 (12%) met SCID criteria for depressive disorder only, 48 (23%) met SCID criteria for anxiety disorder only, and 53 (26%) met criteria for co-occurring depressive and anxiety disorder, whereas 79 (39%) did not meet SCID criteria for anxiety or depression, reported Dr. Kunik, a geropsychiatry health

services researcher at the medical center.

"When we looked at the spectrum of diagnosis, the most common was major depressive disorder (23%), followed by generalized anxiety disorder (19%," he said. "One of the surprises is that there wasn't more panic disorder."

A limitation of the study, he noted, was that the sample consisted only of males in the VA system. "Anxiety and depression occur more frequently in females," Dr. Kunik said. "That's a key limitation." ■

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Post-Acute MI, Depression, And Women

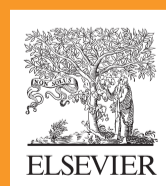
NEW ORLEANS — Younger women with acute MI are a particularly high-priority target population in terms of screening for and treatment of postinfarct depression, Susmita Mallik, M.D., said at the annual scientific sessions of the American Heart Association.

She reported on 2,501 patients admitted with acute MI to 19 U.S. medical centers participating in the Prospective Registry Evaluating Outcomes After Myocardial Infarction: Events and Recovery (PREMIER) study. Roughly half the patients were age 60 or younger, and 815 participants were women.

The prevalence of in-hospital depression—as defined by a score of at least 10 on the Primary Care Evaluation of Mental Disorders Brief Patient Health Questionnaire—was 40% in women and 22% in men age 60 or younger, and 21% among women and 16% in men above age 60, reported Dr. Mallik of Emory University, Atlanta.

After adjusting for several factors, the odds of in-hospital depression after an acute MI were nearly fourfold greater in women under age 60 than in men over age 60.

—Bruce Jancin



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