

P01-276 - DEPRESSION AND HEART FAILURE OUTCOMES

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Chronic illnesses such as HF may precipitate depression. In either case, there are both behavioral and pathophysiologic mechanisms by which depressive symptoms may lead to adverse outcomes in patients with HF.

Depressive symptoms are common in patients with HF, and are associated with markedly worse baseline health status, and are a strong predictor of worsening of HF symptoms, functional status, and quality of life over time and leads to increased hospitalization and rate of mortality.

Depression is an independent risk factor for HF mortality, either through direct pathophysiological mechanisms of neurohormonal activation ,arrhythmia , inflammation and hypercoagulation or through behavioral mechanisms .

A meta-analysis has demonstrated that patients with depression were three times more likely to be nonadherent with treatment recommendations .As for the treatment of obesity, poor nutritional habits, smoking, and sedentary lifestyles , patient non-adherence can complicate physician attempts to modify psychosocial risk factors

In this article we review and synthesizes the research assessing the effects of depression as mental disorder in HF treatment and prognosis and can arise many unresearched issues regarding the future managment difficulties in untreated and undiagnosed depressive disorder and his outcomes.

Clinicians should be aware of the strong link between depressive symptoms and adverse health status outcomes in patients with HF and the treatment of non-physical aspects of chronic disease should be considered as part of the management of HF, in order to reduce anxiety, depression, and disturbances of social function.