

P-411 - HOW DEPRESSION AFFECTS QUALITY OF LIFE IN CHRONIC HEMODIALYSIS?

C.E.Roventa¹, A.Ciocalteu², C.Poenar³

¹Psychiatry, ²Nephrology, University of Medicine and Pharmacy Carol Davila, ³Psychology, Emergency Clinical Hospital St Joan Bucharest, Bucharest, Romania

Introduction: Depression is a common disorder in chronic hemodialysis.

Objectives: We intended to determine the positive correlation between depression and quality of life in one year follow up study. Our hypothesis was that quality of life indicators measured by SF 36 questionnaire were directly correlated with depression.

Methods: We used SF 36 questionnaire, Beck questionnaire two times, one at the beginning of the year, and one at the end for 102 patients who were undergoing hemodialysis three times a week, for 4 hours in St Joan Emergency Hospital, Bucharest.

Results: The linear correlation between depression at the reevaluation and score SF 36 total is very, very weak, square of the coefficient of regression is 0.35 (by the linear model we can explain only 35% of the dates). We followed other models (logarithmic, polinomial, exponential), but we couldn't notice better correlation results. P value for Wald test (0.000000) proves an influence of the variable depression on SF 36 total. We noticed the same conclusion for the media of depression at the two moments.

Conclusion: Statistical interpretation didn't prove our hypothesis. From the medical point of view there is an influence of depression on quality of life, but without a linear correlation. It is not clear if depression has a direct causal role in the negative evolution of patients or depression represents a marker of comorbidities or indicator of severity. We have to consider cardiomiopathy, vascular pathology, artropathies in determining the indicators of quality of life.