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CLINICAL IMPLICATIONS OF ANXIETY IN DIABETES: A CRITICAL REVIEW OF THE EVIDENCE BASE

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Introduction: Substantial literature supports clinically important associations between anxiety and chronic medical conditions. Diabetes is among the most psychologically and behaviorally demanding chronic medical illnesses. Anxiety has been associated with poor glycemic control, regimen adherence, and with accelerated rates of coronary heart disease in diabetic patients.

Aim: The aim of this study is to provide an overview of the role of clinically significant anxiety in patients with diabetes mellitus.

Methods: MEDLINE, EMBASE and PSYCINFO databases were searched using the combined search terms diabetes, diabetes mellitus, anxiety symptoms and anxiety disorders. Published reference lists were also examined. In total 25 studies were identified that fulfilled the inclusion criteria.

Results: Anxiety was present in 41.7% of diabetic patients. There was no significant difference between those with Types 1 and types 2 diabetes. The rate of elevated symptoms was significantly higher in diabetic women than in diabetic men. General anxiety disorder was the most prevalent of the clinical disorders and was found in 13.2% of the diabetic patients. The rates of the other anxiety disorders were within the range of those reported in community studies. Treatment of anxiety was associated with improved glycemic control, particularly in the subgroup of patients with severe anxiety.

Conclusions: Emerging data offer a strong argument for the role of anxiety in diabetes. Psychological interventions and/ or pharmacological treatments in patients with diabetes are needed, in order to increase treatment adherence and control of the disease and improve patients' functioning and quality of life.