

P-387 - PSYCHOPATOLOGICAL SYMPTOMS AND QUALITY OF LIFE IN PATIENTS RECEIVING INTERFERON: RESULTS OF A PROSPECTIVE STUDY

D.Primavera¹, I.Scanu¹, S.Lostia di Santa Sofia¹, M.E.Lai², C.Balestrieri², G.Serra², L.Chessa², E.Zaccheddu¹, C.Bandecchi¹, B.Carpiniello¹

¹Public Health - Psychiatry, University of Cagliari, ²UOD Internal Medicine and Liver Disease, University Hospital of Cagliari, Cagliari, Italy

Introduction: Becoming aware of being HCV positive has a very negative impact on quality of life and IFN therapy is also responsible for the development of neuropsychiatric side effects (Pariante 2002).

Objective: This prospective study aims to determine the role of IFN in psychopathological symptoms experienced by patients in treatment, in particular it deals with its impact on quality of life and determines which patients can be safely treated with Peg-interferon α , because the therapy is expensive, has significant side effects and prolonged psychiatric that unfortunately cannot be predicted with absolute certainty.

Methods: The sample includes 32 patients, including 18 males and 14 females of mean age of 48.19 years (DS. = 9.660) hepatitis C affected, evaluated before the start of peg-interferon antiviral therapy using the interview semi-structured SCID-I and II and self-administered tests Scl90, BDI, SF36 and followed up at first and third months by HAM-a, HAM-D, CGI, YMRS, and sixth months of therapy through Scl90, BDI, SF36, HAM-A, HAM-D, CGI, YMRS.

Conclusions: Although psychiatric disorders worsened or manifested during the peg-interferon α + ribavirin therapy, only 2 out of 32 patients did not come to the end point of our study because of a psychopathological disease. Despite the predominantly psychopathological depressive symptoms and the marked quality of life reduction, with adequate support, even patients predisposed to mood disorders or anxiety, can take the peg-interferon α , and the presence of a life-time psychiatric diagnosis is not an a priori therapy exclusion criterion.