P-472 - INCIDENCE OF SOMATIC DISEASES IN DEPRESSED PATIENTS HOSPITALISED DURING ONE YEAR

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Background: It has been proven that depression increases the risk of cardiovascular and cerebrovascular disease through activation of the hypothalamic-hypophyseal-adrenal axis, sympatho-adrenal hyperactivation, vascular inflammation and increased aggregation of thrombocytes. Increased production of cortisol and inflammatory substances in depression and stress negatively impacts glikoneogenesis, dyslipidemia, glycemic control and insulin resistance, and increases the risk of endocrine-metabolic disorders.
Aim: Research the incidence and types of somatic comorbidity in depressed patients.
Method: Observation of 65 patients hospitalised during one year at the Cantonal Psychiatric Hospital with a depressive disorder (ICD-10 criteria).
The patients were 24 men (36.92%) and 41 women (63.08%). 48 (73.85%) had one or more somatic diseases. Somatic comorbidity was observed in 31 women (75.61%), average age 51.2 years, and 17 men (70.83%), average age 52.8 years. 20 (41.67%) had 1, 24 (50%) had 2, and 4 (8.33%) had 3 somatic diagnoses. The relationship between age and gender and incidence of somatic comorbidity was analysed based on the first two diagnoses (statistical analysis by x2 and t-test).
Results: Most diseases are endocrine-metabolic, where dyslipidemia and diabetes mellitus are most frequent, and cardiovascular, where arterial hypertension is most frequent.
There was no statistically significant discrepancy in the incidence of somatic comorbidity and depressive disorder depending on gender ($p=0.29$) and age ($p=0.25$). Statistically significant discrepancy was observed between patients with somatic comorbidity ($p< 0.05$) and patients without physicall diseases.
Conclusion: Depressive disorder is accompanied by somatic comorbidity at a high rate, but there is no statistical discrepancy depending on gender and age.

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