O-60 - OUTPATIENTS WITH ANXIETY DISORDERS HAVE LOWER MORTALITY THAN CONTROLS OR DEPRESSIVE PATIENTS BUT ELEVATED PERMANENT DISABILITY

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Aims: It was the aim of this study to estimate effects of depression and anxiety on permanent disability and death in a workers' population.

Methods: 128,001 health insurance clients were followed for a mean period of 6.4 years. Excess risks were calculated for patients suffering from anxiety, depression or both with Cox proportional hazard models adjusted for age, gender, education and job classification.

Results: In several strata patients who received outpatient treatment for anxiety disorders or depression had a higher rate of permanent disability (females/anxiety: odds ratio (OR) 1.3, depression 1.3; males/anxiety not significant, depression 1.7) but a lower premature mortality (females/anxiety 0.4, depression 0.6; males/anxiety 0.6, depression not significant) than controls. Inpatient treatment and co-morbidity was generally associated with even higher rates of permanent disability. Depressive inpatients also had a higher premature mortality. While both illnesses were less frequent in men they showed more frequent disablement.

Conclusions: The reciprocity of disability and mortality among outpatients calls for a stronger focus on occupational functioning and therapy in the outpatient setting, but also raises the question why these patients obviously do better in terms of survival, in spite of worse occupational prognosis. Practitioners also need to be aware of the gender aspects and qualitative difference between depressive outpatients and inpatients in terms of survival.