Affective Temperaments and Somatization Among Unipolar Depression Patients and Healthy Controls

A. Gentile¹, A. Ventriglio², I. Bonfitto¹, G. Piemontese³, A. Bellomo¹

¹Department of Clinical and Experimental Medicine, Institute of Psychiatry University of Foggia, Foggia, Italy ; ²Department of Clinical and Experimental Medicine, University of Foggia, Foggia, Italy ; ³SPDC, Mental Health Department ASL Foggia, Foggia, Italy

Introduction

Literature describes important comorbidity rates between somatization and mood disorders. Furthermore, there are data suggesting an association between affective temperament and somatization traits in healthy subjects.

Objective

In the present observational study, we investigated affective temperaments and somatization aspects in clinical and healthy samples.

Aim

The study focused on differences between unipolar depressive inpatients (DEP) and controls (C).

Method.

We administered to 20 DEP and 20 C following questionnaires: Mini International Neuropsychiatric Interview (MINI), 17-item Self Rating Depression Scale (SDS), Hypomania check list 32(HCL-32), Self Rating Anxiety Scale (SAS), DCPR diagnostic criteria for psychosomatic research, Brief TEMPS-A, Modified Somatic Perception Questionnaire (MSPQ), Somatosensory Amplification Scale- SSAS. DEP and C were matched for age, sex and marital status.

Result

About temperaments, ANOVA showed that DEP were more cyclothymic (p<0.0001), depressive (p<0.0002) and irritable (p<0.0425) (scores to Brief TEMPS-A) than C. In addition, in DEP, MSPQ scores (somatic perception scale) were higher than C (p<0.0001). Similar results were about SASS scores (somatosensory amplification scale). DEP present more frequently than C Type A Behavior Pattern (DCPR diagnosis) (CHI-SQUARE p <0.0601).

Conclusion.

Our data suggest that DEP present an important affective temperamental dysregulation. Relative to somatization aspects, DEP show a greater vulnerability than C.