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Assessment of Depression and Quality of Life in Patients On Continuous Hemodialysis

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Introduction: Depression is common in patients suffering from somatic diseases particularly chronic, life threatening and disabling diseases such as renal impairment requiring hemodialysis. It contributes to further deterioration of the quality of life. The goal of consultation psychiatry is to advise screening and early interventions for this most often treatable disorder.

Aims: To assess and compare presence and severity of depression, and subjective assessment of QOL between patients on hemodialysis and healthy subjects.

Methods: This study included 80 subjects age between 19 and 82 (χ 49.6 \pm 14.2) on continuous hemodialysis and 40 subjects from the general population of Zenica. Assessment instruments used: Beck Depression Inventory - BDI; SF36- QOL, and sociodemographic questionnaire.

Results: The subjects in the experimental group had significantly higher ($p < 0.05$) average score on BDI, 17.1 \pm 9.4, corresponding to mild to moderate depression compared with the subjects in control group who scored an average of 8.5 \pm 7.0 (range 2-39), which corresponds to absence of depression. Comparison of results on a scale for assessing the quality of life SF 36, indicates that the subjects in the control had a higher average score or higher quality of life compared to the experimental group.

Conclusion: The research results indicate a significant difference in the presence of depressive symptoms and in the subjective assessment of QOL in patients on hemodialysis compared to healthy subjects. This justifies routine screening for depression in this group of patients.

Key words: depression, QOL, hemodialysis