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DEPRESSION AND SLEEP DISORDERS IN PROGRESSED GLAUCOMA: AN INDICATION FOR MELATONERGIC ANTIDEPRESSANTS?

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Introduction: Glaucoma is a chronic, progressive optic neuropathy, with visual field defects (VFD) and progressive loss of the retinal ganglion cells, leading herewith to an affected light transmission to the suprachiasmatic nuclei. Progressed glaucoma has been therefore lately suggested to lead to a circadian misalignment and thus to several physiological consequences, including sleep and affective disorders.

Objectives: The investigation of depressive symptoms and sleep disorders among glaucoma patients with and without VFD.

Methods: Patients with confirmed glaucoma diagnosis were recruited and divided in two groups: Patients with extensive VFD (glaucoma fere absolutum) and patients with no or minor VFD. The patients were assessed by self-rating questionnaires to depression (Beck's Depression Inventar), anxiety (State-Trait Anxiety Inventory), affectivity (Positive Affect - Negative Affect Scala) and sleep quality (Pittsburgh Sleep Quality Index).

Results: 88 patients have been recruited, of them 57% with VFD. The prevalence of depression was significantly higher in patients with VFD (p = .037). The VFD group also showed significantly higher trait anxiety rates (p = .027), but no significant differences concerning negative emotion. In addition, the subjective sleep quality in men with VFD was significantly worse than in the control group (p = .048), while VFD was significantly correlated with a longer lag time to fall asleep (p = .026).

Conclusion: This study verifies a high prevalence of untreated depression and sleep disorders among glaucoma patients with VFD, which could be an evidence for a circadian derangement. Subsequently, a psychochronobiological melatonergic depression treatment should be considered in this group.