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LONG-TERM CONSEQUENCES OF CHRONIC PTSD ON QUALITY OF LIFE, CARDIOVASCULAR RISK AND STRESS HORMONES IN AGING FORMER REFUGEE CHILDREN

C. Muhtz¹, K. Godemann¹, C. von Alm¹, C. Wittekind¹, K. Wiedemann¹, A. Yassouridis², M. Kellner¹

¹Psychiatry and Psychotherapy, University-Hospital Hamburg-Eppendorf, Hamburg, ²Max Planck Institute of Psychiatry, Munich, Germany

Introduction: Several studies suggested that having a history of posttraumatic stress disorder (PTSD) is associated with higher rates of somatic morbidity and disease.

Aim: The aim of the present study was to investigate systematically the long-term-consequences of PTSD on cardiovascular risk, quality of life and stress hormones in a sample of former refugee children.

Methods: In 25 subjects with chronic PTSD and 25 trauma-controlled subjects we measured variables of the metabolic syndrome supplemented by the ankle-brachial index and h-CRP. Quality of life was assessed by the SF-36. Cortisol, ACTH, DHEA were measured in the low dose dexamethasone-suppression-test. Additionally, salivary cortisol was assessed at 0800, 1200, 1600 and 2200 hours.

Results: We found a significant group effect between participants with PTSD and without PTSD regarding quality of life, but not on any metabolic parameter including the anklebrachial index or cortisol, ACTH and DHEA in plasma before and after dexamethasone or salivary cortisol.

Conclusion: Chronic PTSD was associated with diminished quality of life more than six decades after traumatization, but not with altered metabolic or endocrine variables. Nevertheless, search for subgroups of PTSD patients with childhood traumatization leading to different metabolic and endocrine long-term consequences in aging PTSD patients is needed.