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DEPRESSION, INFLAMMATION AND CORONARY HEART DISEASE: PROGNOSTICAL VALUE OF C REACTIVE PROTEIN AND DEPRESSIVE SYMPTOMS

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Introduction: The aim of this preliminary study is to assess, in a sample of patients with Coronary Heart Disease (CHD), the specific association between depressive symptoms and systemic inflammation.

Methods: Sixty-One inpatients with CHD, 31 Unstable Angina and 28 Myocardial Infarction, participated in the study. The plasma levels of C Reactive Protein were measured using Dade Behring's High Sensitivity CRP assay (hs-CRP) at T0, T30 and T90.

At the same timings, they were tested by an examiner, unaware of their diagnosis, with a psychometric battery (SCL90-R, HDRS, MADRS, BDI, QlesQ).

Results: The elevation of hs-CRP occurs during the whole observation period, with maximum significance at T90 (p = 0.031).

A multivariate analysis at T0 indicates a statistical correlation between SCL90-R scores and hs-CRP levels (p = 0.02).

The SCL90-R is also associated with the risk of further cardiac events (p = 0.013).

Also the BDI could be useful as a prognostic factor (p = 0.026).

We found a trend towards correlation between CRP values and depressive symptoms, but it never reaches statistical significance for the other scales.

Conclusions: The feelings of loss and the fear of death, related to the environmental and emotional situation of the hospitalization, may prevail in the acute phase of CHDs.

Some patients may overcome this reactive depression, while others may exhibit a biological depression, related to the high level of CRP and thus to an increased risk of re-infarction and other coronary events.