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MONITORING OF THE METABOLIC SYNDROME IN PSYCHIATRIC INPATIENTS

J. Cordes¹, G. Regenbrecht¹, M.W. Agelink², J. Zielasek¹, K.G. Kahl³

¹Heinrich-Heine-University Duesseldorf, Düsseldorf, ²Department of Psychiatry, Psychotherapy and Psychosomatic, Herford,

³University of Dresden, Dresden, Germany

In this naturalistic observational study carried out in an inpatient treatment setting we as yet surveyed the parameters of the metabolic syndrome. A weekly monitoring procedure was implemented. The analysis included data of 350 patients over a time of 12 weeks. The last observation carried forward method was applied. Additionally we are evaluating the informative value of visceral body fat percentage as measured by a body composition analyzer. The patients showed a weight increase over the first 12 weeks (mean increase: 0.87 kg, $p < .001$) as well as an increase of the body mass index (mean increase: 0.45 kg/m^2 , $p < .001$). Accordingly, waist circumference (mean increase: 1.06 cm, $p = .007$) and visceral fat index (mean increase: 0.19, $p = .007$) increased. No worsening of fasting glucose and blood lipid concentrations was detected. Spearmans coefficient indicated correlations between visceral fat index and body mass index ($\rho = .77$; $p < .001$), waist circumference ($\rho = .70$; $p < .001$), and triglyceride concentrations ($\rho = .39$; $p < .001$). Correlations between visceral fat index and fasting glucose ($\rho = .18$; $p = .019$), and visceral fat index and total cholesterol ($\rho = .16$; $p = .049$) were weak but also significant. In contrast, the HDL cholesterol showed a negative relation with $\rho < -.39$ at each point in time ($p < .001$).

We conclude that psychiatric patients are at increased risk for the development of metabolic alterations during inpatient treatment. The possible underlying mechanisms of this interaction are discussed.