

Clinical and psychopathological characterization of patients with diabetes mellitus complicated by depression

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ABSTRACT

Epidemiologic trials showed that the depression occurs 3 times more often among the patients with the D.M. than among the ordinary population. We decided to study the early forms of depression of patients with D.M. and their clinical peculiarity. We were observing 115 patients with D.M. without any complication. The population was chosen in the D.M. center. There were 56 patients with type I D.M.; 32 men, 24 women at the age of $42,6 \pm 7,1$; 59 patients with Type II D.M.; 32 men, 27 women at the age of $52,3 \pm 7,1$. They did not undergo a course of insulinotherapy. Hamilton's estimate scale was used to show the early period of depression. From 115 patients with D.M. 61 patients had not the signs of depression. We came to the conclusion that the both types of D.M. had symptoms of depression with pathognomic signs especially among the patients of type II. The patients with D.M. have depression, nervousness, psychometric agitation and suicidal tendency. The D.M. patients without any complications have moderate depression.

KEYWORDS: *depression, diabetes mellitus*

By the investigations of the last years it was confirmed that psychological problems and mental disorders often encounter among the patients with diabetes mellitus (D.M.), which influence the disease.

The development of D.M. is caused by the numerous complications and limitations (restrictions). The definite part of patients complains of disappointment, aggression and depression.

Epidemiologic study showed that the depression occurs 3 times more often among the patients with the D.M. than among the ordinary population. It is twice more often among the women than the men.

Two causes of a depression can be identified in D.M.: 1) metabolic changes of the cerebrovascular bed and thereafter the abolishment of brain function as a result of chronic hypoglycemia; 2) the development of depression within the nosogeny.

The complication of D.M. can cause the situation of hypochondriac depression. At that time the hypochondriac phobia (the fear of hypoglycemia) comes on the first line. The depression mentioned above can cause:

- 1) The complication of a somatic disease;
- 2) The growth of rescue of complication;
- 3) The aggravations of glucose metabolism disturbances;
- 4) The negative relation to diet.
- 5) The worsening of the living conditions

From the mentioned above we decided to study the early forms of depression of patients with D.M. and their clinical peculiarity.

We were observing 115 patients with D.M. without any complication. The population was chosen in the D.M. center.

There were 56 patients with type I D.M.; 32 - men, 24 - women at the age of $42,6 \pm 7,1$; 59 patients with Type II D.M.; 32 - men, 27 - women at the age of $52,3 \pm 7,1$. They did not undergo a course of insulinotherapy.

Hamilton's estimate scale was used to show the early period of depression.

From 115 patients with D.M. 61 patients had not the signs of depression.

After the investigation of the patients with D.M. and symptoms of depression 4 clinical-phenomenological types were shown: 1) melancholic 2) apathetic 3) depression with suicidal opinions 4) hypochondriac.

The symptoms of depression are distributed among the women and men nearly with equal frequency. Only in one case we received statistically authentic difference. Particularly the sense of crime and disability with the women $77,8 \pm 14\%$, and men $16,7 \pm 11\%$.

The type II we divided into 2 groups ± 50 . We didn't find the women with suicidal intention up to 50. We found $80,0 \pm 13\%$ of the women more than 50 years of age with suicidal intention.

As to the women with complicated depression of type II D.M. ± 50 . We met the depression of melancholic type of 60%.

We met one case of hypochondriac depression among the men more than 50 years of age and two cases of agitation.

We saw no difference among the men with depression at the >50 years.

We have to note the fact that the patients don't see the elements of depression in their own behavior. Besides that among the type II it was shown the symptoms of excitement, tachycardia and perspiration.

We came to the conclusion that the existence of depression's symptoms gives the pathognomic sign and it has patients with type II D.M.

The patients with D.M. have depression, nervousness, psychometric agitation and suicidal tendency.

The D.M. patients have moderate depression without any complications.

Depression is 3 times more often among the patients with D.M. than among those who have no D.M.

Our aim was to investigate the patients with D.M. without any complication and its clinical peculiarities.

We investigated 115 patients: 56 patients were of type I, 32-men, 24-women 42,6±7,1 years old, 59 patients were of type II 32- men; 27-women 52,3±7,1 years old.

None of these patients got insulinotherapy. Hamilton's estimate scale was used to show the early period of depression.

We came to the conclusion that the both types of D.M. had symptoms of depression with pathognomic signs especially among the patients of type II.

The patients with D.M. have depression, nervousness, psychometric agitation and suicidal tendency.

The D.M. patients without any complications have moderate depression.

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Клинико-психопатологические характеристики больных сахарным диабетом, осложненной депрессией

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РЕЗЮМЕ

Целью работы являлось ранее выявление депрессии и ее клинические особенности у больных неосложненной формой сахарного диабета. Под наблюдением находились 115 больных сахарным диабетом. Среди них типа I - у 56: мужчин – 32, женщин – 24, средний возраст 42,6±7,1 лет; типа II – 59 больных: мужчин – 32, женщин – 27, средний возраст 52,3±7,1 лет. Больным второй группы не проводили инсулинотерапии. Для выявления ранней формы депрессий использовали скрининг-опросник состоящий из 12 вопросов и шкалу оценки депрессии по Гамильтону. Признаки депрессии были обнаружены у 61, из 115 (53,0%) больных среди которых сахарный диабет I типа у 21 из (37,5%), II типа у 40 из 59 (67,8%) больных. Полученные результаты позволяют заключить, что при сахарном диабете симптомы депрессии являются патогномичными и чаще встречаются при диабете II типа. Клиническая картина депрессии при этом характеризуется наличием подавленного настроения, тревоги, психо-соматической агитации и слабо выраженных суицидальных тенденций. При сахарном диабете без осложнений в основном, встречаются легкие и умеренные формы депрессии.

Ключевые слова: депрессия, сахарный диабет