Depression as a major issue in chronic heart failure

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The very essence of cardiovascular practice is the early detection of heart failure. (Sir Thomas Lewis, 1933) Depression is a major issue in chronic heart failure (CHF) and its prevalence is about 20–40 %, which is 4–5 % higher than in the normal population. The prevalence of depression increases with New York Heart Association (NYHA) functional class, with the biggest difference seen between NYHA classes II and III.

Many studies have suggested a worse outcome in CHF patients with depression across a broad range of events including mortality, healthcare use and associated clinical conditions. Depression was found to be an independent risk factor for mortality in CHF, and this persists independent of NYHA class.

The purpose of study was evaluation of correlations between depression and main hemodynamic and lipids' metabolism parameters in patients with chronic heart failure.

80 patients with CHF II-III NYHA classes caused by chronic coronary artery diseases (CAD) were observed. All patients were divided into two groups: 1 – 20 persons without signs of depression and 2 – 60 persons with depression. Diagnosis of CHF was confirmed based on ESC guidelines (2016). Depression was diagnosed by some questionnaires (Zung Self-Rating Depression Scale, Beck Depression Inventory, Hamilton's Depression Scale).
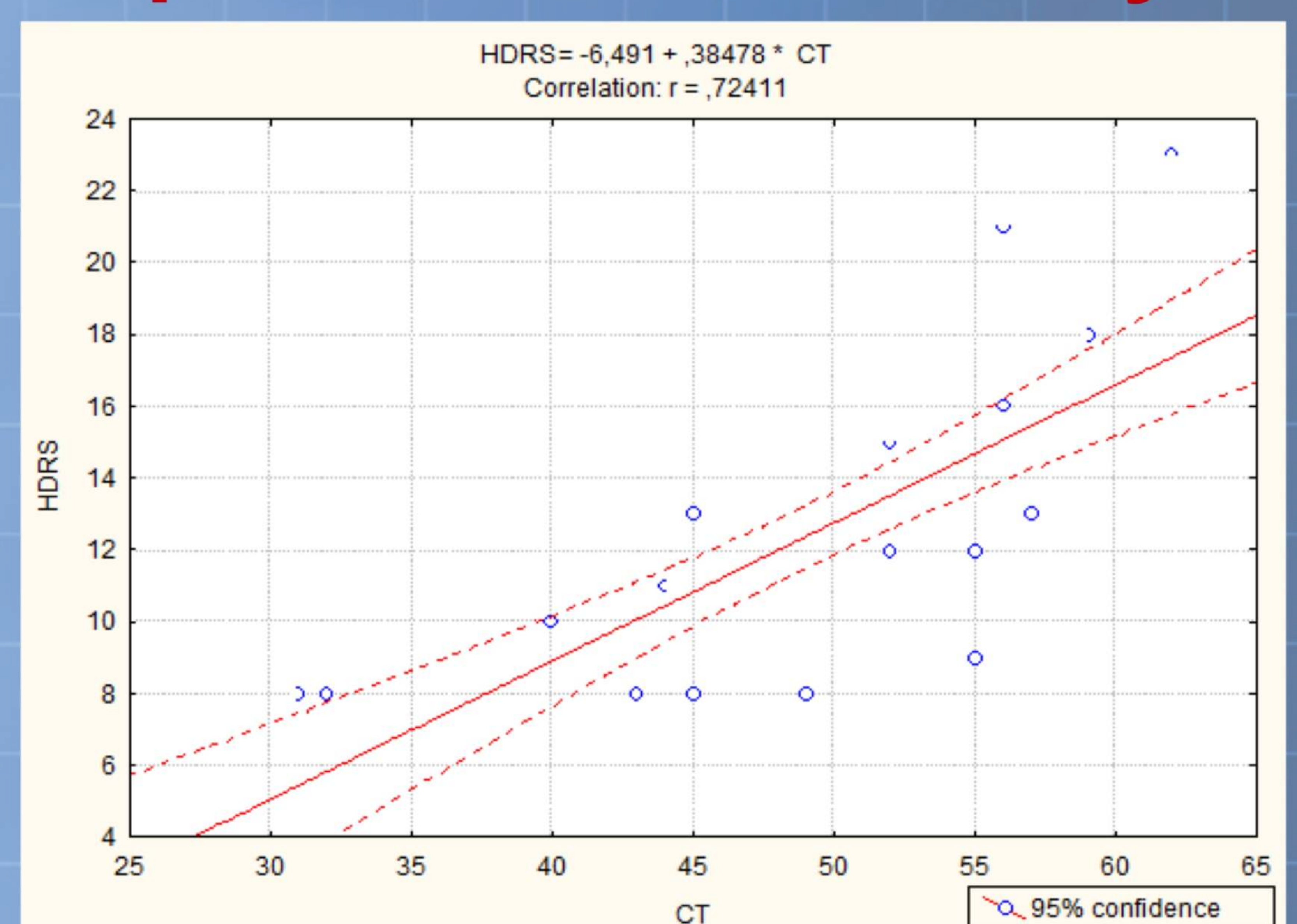
Using Hamilton's Depression Scale, it was established that mild depressive disorders are mostly observed in patients with CHF - 71.6% of patients. However, the average expression of depression was observed in 23.4% of patients studied, severe one – in 3.3%, and extreme hard depression - in 1.7% of cases. It was reported about the reciprocal medium strength relationship between the severity of depression and the level of blood pressure: both systolic (SBP): r = -0.30 and diastolic (DBP): r = -0.35.

There was also marked a reverse, medium strength relationship between QOL and severity of depression on the Hamilton scale (r = -0,33; p <0,05);and the strong reverse relationship between life quality and personal

Depression and HF

- mild — 71,6%
- moderate — 23,4%
- severe — 3,3%
- extreme hard — 1,7%
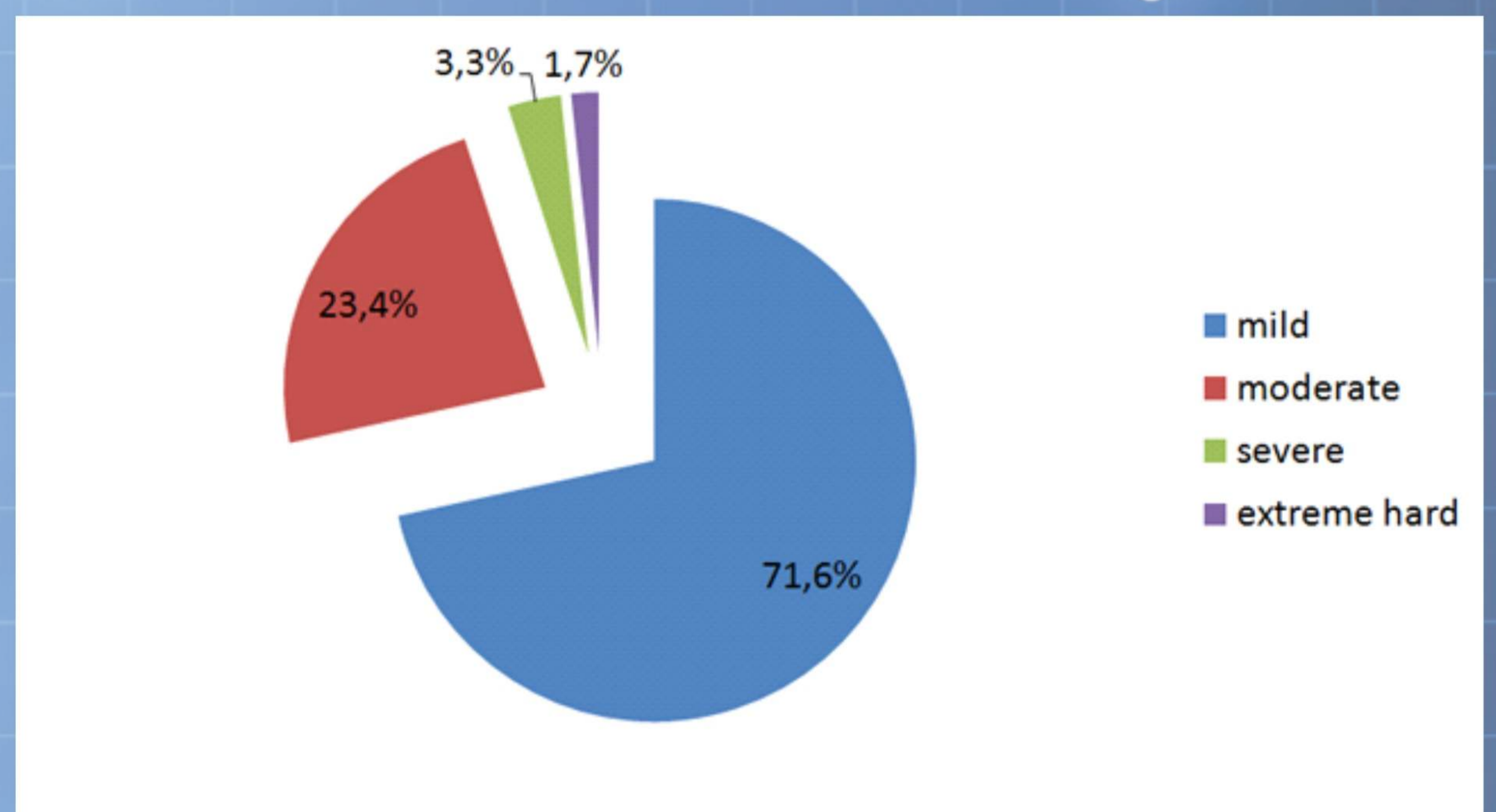
Correlation QoL with depression and anxiety

HDRS= -6,491 + ,38478 * CT
Correlation: r = ,72411
95% confidence

Conclusion Therefore, patients with chronic heart failure and depression have more strong central hemodynamic and lipid metabolism disorders versus without

Rules for Happiness: something to do, someone to love, something to hope for...   Immanuel Kant