

うつ病は介護者の身体的健康と関連がある (Abstract 81211)

脳卒中既往患者の介護者におけるうつ症状は将来の健康問題を予測する

Symptoms of depression in caregivers of stroke survivors may predict future health problems

うつ徴候を示す脳卒中既往患者の介護者は、将来的に自身の健康面の課題を有するリスクが高い可能性がある、と ESC Congress 2019 で発表された。慢性的なうつ症状を有する人々の精神的健康状態は、身体的健康状態と密接に関連があった。試験に参加した介護者の3分の1は、1年後の身体の健康状態はまずまず、または不良であると報告し、43%は健康状態が悪化したと報告した。うつ徴候のない介護者に比べ、うつ状態が続いている介護者は、脳卒中既往患者の介護開始1年後の体調不良を訴える確率が7倍高かった。

Full Text

Caregivers of stroke survivors who show signs of depression may have a higher risk of suffering their own health challenges in the future, according to research presented at ESC Congress 2019 together with the World Congress of Cardiology.

The findings highlight the importance of attending to the mental health of caregivers and bring to mind the airline-safety metaphor: 'Secure your own oxygen mask before helping someone else.'

"Caregiving is becoming more common and more demanding," says study first author Professor Misook L. Chung of the University of Kentucky College of Nursing in the United States. "More attention needs to be paid, especially early on, to managing depressive symptoms in caregivers. They must realize that self-care is not selfish."

Stroke is a leading cause of long-term disability around the world and often exerts a heavy toll on those in a supporting position. Providing assistance to patients, including helping the survivor with eating, dressing, going to the bathroom and showering, not to mention taking care of meals, organizing a home and supervising medical care, can become a full-time job with a deep emotional component.

The current project is the first longitudinal study to address the issue of persistent depressive symptoms and their effect on physical health as well as changes in health during the first year of stroke caregiving.

The research team enrolled 102 caregivers with a mean age of 58. Two-thirds were female and about 70% were spouses. The rest consisted of other family members, although two or three were family friends, says study senior author Rosemarie King, a retired research professor at Northwestern University School of Medicine in Chicago, Illinois, USA.

Participants answered questionnaires at two points in time: six to ten weeks after the patient was discharged from the hospital and again one year later.

The overall proportion of individuals reporting symptoms of depression like poor appetite or trouble focusing, declined slightly over the course of the study: 32.4% versus 30.4%. More than half the participants (57.8%) said they had no issues of mental distress at all, but 20.6% (or one in five) suffered persistent depressive symptoms in the first year of caregiving.

The mental health of people with chronic signs of depression was closely associated with their physical health. One-third of caregivers in the study reported their physical health as fair or poor after one year, while 43% said they felt their health had deteriorated. Compared to caregivers who did not have signs of depression, those with ongoing challenges were seven times more likely to report problems with their health after one-year of caregiving for stroke survivors.

Individuals with persistent symptoms of depression during the first year of caregiving reported heavier caregiving duties, poor family functioning and low interpersonal support.

One limitation of the study is that the researchers did not track primary health outcomes such as diagnoses of physical illness. Instead, they relied on self-reports of caregivers' health status and changes in health status. There was also a high attrition rate, with a third of study participants dropping out. Longer-term studies, with objective measures of caregiver health status, are required.

The conclusions suggest the need for earlier interventions and long-term follow-up of caregivers. "We haven't paid enough attention to caregivers' health," stresses Prof Chung. "Self-care intervention programs should include depressive symptom management for caregivers."

A pilot study conducted by Prof Chung found benefits in a more holistic approach incorporating stress management and self-care management for caregivers. "Cognitive behavioral therapy has shown promise, as have interventions that teach caregivers how to better manage patients' and their own emotions", she concluded.

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