Psychiatric comorbidity in diabetes type 1: a cross-sectional observational study

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SUMMARY

Objective: This study aims to investigate the prevalence of psychiatric disorders, i.e., the presence of signs and symptoms of anxiety and depression in type 1 diabetic patients, as well as to investigate the prevalence of psychiatric disorders in insulin dependent patients.

Methods: A cross-sectional observational study of 110 diabetic outpatients (mean = 58.3, SD = 14.5; 50 male and 60 female) was conducted in a public health clinic with patients diagnosed with diabetes mellitus who were under the medical supervision of an endocrinologist. The patients were evaluated through the Mini International Neuropsychiatric Interview and the Hospital Anxiety and Depression Scale (HADS).

Results: With respect to anxiety symptoms, we found a prevalence of 60% (n = 66) among patients, while in depression symptoms we found a prevalence of 53.6% (n = 59) concerning the 110 patients evaluated. More specifically, we found 28.2% (n = 31) of patients without depression or anxiety, 13.6% (n = 15) of patients with depression, 16.4% (n = 18) of patients with anxiety and 41.8% (n = 46) of patients with depression combined with anxiety. The most remarkable data were generalized anxiety disorder (22.7%), dysthymia (18.2%), panic disorder (8.2%) and social phobia (5.5%).

Conclusion: The need for accurate assessments about the presence of symptoms related to psychopathology in patients with type 1 diabetes is evident.

Key words: Anxiety. Depression. Prevalence and Diabetes.

INTRODUCTION

Studies indicate that groups of chronic diseases, such as type 1 diabetes, can present severe psychiatric disorders. Faced with direct relationship of type 1 diabetes with mental health, studies demonstrate that the prevalence of psychiatric disorders in diabetic patients may reach 84% for mood disorders and 80% for anxiety disorders¹. A previous study² evaluated the presence of psychiatric comorbidities both in patients with diabetes types 1 and 2. The first group showed higher values for the presence of general anxiety disorder (24%), dysthymia (20%), social phobia (6%), depression (9% for current and 5% for lifelong), panic disorder (5%) and suicide risk (3%), all values were higher than those found in the general population or in patients with type 2 diabetes. The instrument used in this study was the Mini International Neuropsychiatric interview, which is aimed to detecting psychiatric disorders².

Patients with a high prevalence of psychiatric disorders have further compromising their mental health when assessed in terms of signs and symptoms. The presence of psychiatric signs and symptoms, and more specifically depression and anxiety, can increase morbidity, and lead to worse clinical prognosis.

OBJECTIVE

This study aims to confirm the prevalence of psychiatric disorder and assess the prevalence of depression and anxiety signs and symptoms in patients with type 1 diabetes.