P-761 - DEPRESSION IS A HIDDEN COMPLICATING FACTOR IN DIABETIC WOMEN WITH OBESITY

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Introduction: According to WHO reports, the risk of chronic noncommunicable diseases increases with raised body mass index and females have both obesity and depression rates higher.

Aims: To analyze the association obesity-psychiatric disorders in patients with diabetes and modified BMI, by gender. **Methods:** We assessed emotional (HADS,PHQ,MADRS,HAM-A), cognitive (MMSE, clock test), and medical status in 50 consecutively admitted patients (March-June 2011), in our medical ward.

Results: Sex ratio F/M:35 / 15; the mean duration of diabetes was lower in women: 9 vs. 15 years; at least two of diabetes complications have been noted in similar proportions, 62% vs. 66%; obesity / overweight ratio women =3:1/ men=1:1; men being treated mostly with OAD (73.3% vs. 42.8%). Stressful life events, in the past year, have been reported mostly in men (60% vs. 40%). Anxiety (F/M - 22.8% / 20%), insomnia (F/M - 68% / 60%), and an average score of 27 in MMSE were similarly present in both sexes. Depression was strikingly more common in females (clinical depression F/M: 40% / 26.6%, subclinical depression F/M: 22.8% / 13.3%).

Conclusions: Untreated clinical and subclinical symptoms of depression in women with diabetes and modified body mass index is a rule, and the aspect appears to be chronic. In men unspecific anxious-depressive symptoms and insomnia could be a reaction to a stressful life event. The results raise the suspicion that depression is a hidden complicating factor in diabetic women with obesity. In this group, early specific psychiatric and psychological interventions may improve the multidisciplinary treatment team approach.