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DEPRESSION IN CHRONIC HEPATITIS C TREATED WITH INTERFERON: PREVALENCE AND MANAGEMENT

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Neuropsychiatric disturbances, from depression to psychosis and attempted or successful suicides are reported during interferon (IFN) therapy for chronic viral hepatitis. IFN schedule and history of psychiatric illness are not enough to predict who will develop symptoms.

Aims: To assess the prevalence of depression during IFN therapy; to test whether a computerized version of the Minnesota Multiphasic Personality Inventory (MMPI) is a sensitive and reliable test for the early identification of patients at risk of depression before IFN therapy is started; and whether and how the depression can be cured. Patients. 185 patients treated with IFN.

Methods: Before therapy, all patients underwent an MMPI and a clinical examination for identification of depressive symptoms.

Results: Thirty-one patients developed a psychiatric disorder, 11 of them requiring treatment. Among the 18 patients with MMPI positive tests, 16 developed a psychiatric disorder (sensitivity of 0.58). Among the 154 who did not develop psychiatric side effects, 152 had a negative MMPI (specificity: 0.99). Severe psychiatric disorders (8 patients) were successfully treated with antidepressant drugs.

Conclusions: Psychiatric side effects are easy to see during IFN therapy. An accurate psychiatric evaluation should be considered on all patients before treatment. However, as this specific examination cannot always be performed because of the lack of psychiatrists in liver units, it is necessary to identify tests, that are easy to carry out, reproducible, self-administered and inexpensive in order to screen all patients. If depression develops, it should be treated aggressively, and selective serotonin re-uptake inhibitors are the anti-depressant of choice.