

Poster presentation

Co morbidity of alcoholism in patients with anxiety and mood disorders

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Background

According to the World Health Organization (W.H.O), the alcohol dependence – abuse related disorders presents a prevalence of 1 – 5%. Furthermore, it is well known that there is a high co-morbidity between mental disorders and alcoholism.

The goal of this study is to investigate and to make a comparison of alcohol use and abuse in patients with anxiety and mood disorders.

Materials and methods

For a two months period, all the patients examined and diagnosed with anxiety and/or mood disorders (according to D.S.M – IV – TR) in the Emergency Department of two General Hospitals, completed the Cage Test, which traces covered alcoholism problems. The test includes 4 items and is specified to detect alcoholism in the general population and in general hospital patients. Two or more positive answers suggests alcohol dependence – abuse. Residents acquainted with its use gave the test. Finally, we recorded the demographics (sex, age, education and family status) of all examined patients included in the study.

Sample: 130 patients (68 with anxiety disorders and 62 with mood disorders) are included in the study. 49.2% were males and 50.8% were females. The mean age of the sample was 42.58 (\pm 14.63) years and the mean duration of education was 10.98 (\pm 4.18) years. As to family status,

41.5% were married, 39.2% were single and the rest of them were divorced.

Results

The mean score of the sample in the Cage Test was 0.73 (\pm 1.23). The corresponding mean score in patients with anxiety disorders was 0.60 (\pm 1.04) and in patients with mood disorders was 0.87 (\pm 1.41), with no statistical difference between the two scores (t test $p > 0.05$). A percentage of 21.5% of all patients presented positive score in the test (positive answers > 2). Separating the sample as to diagnosis, 19.1% of patients with anxiety disorders and 24.2% of patients with mood disorders presented positive score, with no statistical difference between the two groups ($x^2 p > 0.05$). Male patients had higher mean score in Cage Test than females (0.95 ± 1.34 vs 0.52 ± 1.08 , t test $p < 0.05$). There was no correlation between Cage test score and age (Pearson correlation $p > 0.05$). As to family status, married patients (mean cage score 0.43 ± 0.84) presented statistically lower scores in comparison with singles (mean cage score 0.84 ± 1.30) and divorced patients (mean cage score 1.26 ± 1.66). We observed negative correlation between the duration of education and cage score in patients with mood disorders (Pearson correlation $p < 0.05$, $r = -0.303$), in contradiction to patients with anxiety disorders who presented positive correlation (Pearson correlation $p < 0.05$, $r = 0.259$). The introduction of age factor doesn't differentiate the correlation above (partial correlation).

Conclusions

Our results confirms an increased alcohol abuse in patients with anxiety and mood disorders in comparison with the general population. These patients, probably, use alcohol in order to self – medicate their symptomatology. Demographic factors, like age or family status have a different impact. Although aging seems to reduce alcohol use in the general population, this is not observed in our patients. In contrast, family status has a significant role in the pattern of alcohol use. Further studies are required in order to investigate the participant role of the duration of education in the alcohol use and abuse in patients with anxiety and mood disorders.

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