

Poster presentation

Depression after stroke

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from International Society on Brain and Behaviour: 1st International Congress on Brain and Behaviour
Hyatt Regency Hotel, Thessaloniki, Greece, 20–23 November, 2003

Published: 23 December 2003

Received: 1 November 2003

Annals of General Hospital Psychiatry 2003, **2**(Suppl 1):S85

This article is available from: <http://www.general-hospital-psychiatry.com/content/2/S1/S85>

Background

Stroke is the third commonest cause of death but the leading cause of disability in Western societies. Although stroke's financial and social impact have been well established, its psychological parameters have not been well established yet. Depression is also a frequent disorder (15–30% among the elderly). Hence, post-stroke depression is difficult to discern whether it is being either a primary organic affective syndrome or a direct effect of stroke.

Material and methods

A Medline and Cinhal search was conducted in order to retrieve papers concerning Post Stroke Depression (PSD). There was a total of 123 papers, 25 of which were relevant for this reviews' purpose.

Results

PSD is a quite common condition among stroke survivors with a prevalence ranging from 17–64%. The wide range frequency may be explained by differences in diagnostic criteria, patient selection, instruments used and acute or subacute phases of recovery.

Discussion

The diagnosis of depression after stroke is a troublesome task, especially in the light of the following: the target population is elderly with a high incidence of depression prior to the stroke (coexistence), with high comorbidity, stroke's aetiology (lesion's size and location), patient's social problems, and patient's post stroke communication problems (dysarthria, dysphasia or aphasia). Conclusion: Various studies have shown that PSD is a significant predictor for mortality and rehospitalization. There is also increasing evidence that PSD slows patients down in rehabilitation, (as it has been calculated at 6 months and two

years after stroke) and limits their overall potential for recovery.

However, PSD is not a disorder that is all that difficult to tackle. Clinicians who have an interest in PSD can use interview skills and sensitivity to non-verbal communication in order to detect and treat depression after stroke.