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Poststroke depression. Clinical features, predictors, neuroimaging correlations

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Background

Depression can be an important sequela of stroke and often unrecognized complication. The correlation between the location of stroke and post-stroke depression remains controversial and has been extensively studied. The purpose of the study to assess the prevalence of depressive symptoms at the acute stage of stroke, their clinical and MRI correlates, effects of initial depressive symptoms on stroke recovery, development of poststroke depression in relatively unselected well-diagnosed cohort of consecutive stroke survivors.

Materials and methods

The prospective study of 147 stroke patients, hospitalised with acute stroke conducted. Stroke severity was evaluated by NIHSS. Neurological disability was established according to Barthel Index and Rankin Disability. Patients assesment was performed at acute stage and three month poststroke. All patient underwent MRI/CT investigation at acute stage. Depressive symptoms were evaluated with Hamilton Scale at acute stage and 3 month after acute stroke. Diagnosis of depression was performed according to criteria outlined in DSM IV. Patients were divided in two groups – I group patients with poststroke depression, II group – patients without depression. Different statisticalal tests were performed by SPSS.

Results

depressed and nondepressed patients did nor differ in respect of site, size and type of stroke. Multiple linear regression analysis revealed significant share of hypertension in development of depression at acute stage and 3 month poststroke. Depressive reactions at acute stage correlated with thalamic strokes, while 3 month poststroke depression correlates with fronto-parietal stroke. Accord-

ing to multiple linear regression analyzes deficit severity has significant share on 3 month poststroke depression.

Discussion

Poststroke depression have vascular origin.