

P01-285 - **DEPRESSION AND ACUTE ISCHEMIC CORONARY SYNDROME**

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**Objective:** This research aimed to evaluate the prevalence of psychic depression in patients with acute coronary syndrome (ACS) and the interdependency with risk factors for coronary artery disease (CAD).

**Methods:** Prospective study of patients consecutively admitted with ACS and screening for depression through the Beck Depression Scale, which was used within the first 5 days after admission. Patients who presented simultaneous diagnosis of severe neoplasia, use of antidepressant medication, incapability to communicate or comprehend, were excluded from the research. Statistical analysis included the t test of Student or Mann-Whitney, chi-square test or Fisher's exact test and the log-linear model to evaluate interdependency among risk factors for CAD.

**Results:** 98 out of the 135 patients admitted with ACS presented acute myocardial infarction, while 37 presented unstable angina, mean age of 61.8 years, of which 40% were female. Prevalence of depression in this study was 53.3%. (n=72) distributed in three groups according to the degree of intensity: 28.1% with mild depression, 14.1% moderate depression, and 11.1% with severe depression. Among in-hospital deaths, 88.9% (n=8) were in patients with depression and only 11.1% (n=1) in patients without depression, with relative risk of 6.99 (p=0.027). Depression was more prevalent in female patients. Depression was present in association with great numbers of risk factors: dyslipidemia, sedentary habits, sex (p=0.0259), family history systemic arterial disease and hypertension (p=0.0098).

**Conclusion:** The results of this study show a high prevalence of psychic depression among patients with acute coronary syndrome with elevated mortality risk and interdependency with other risk factors.