

P01-46 - DEPRESSION IN DIABETIC WOMEN AND IDENTIFICATION BY PRIMARY CARE PHYSICIANS IN UAE

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Objective: The aim was to:

- 1) identify the prevalence of depression in diabetic women presenting in a primary care clinic;
- 2) determine if the primary care physician detected depression in these patients; and
- 3) determine if a relationship existed between depression and glycemetic control (Hgb A1C) in these patients.

Method: Prospective, convenience sample. All women with a diagnosis of Type I or II Diabetes Mellitus were included. Participant's charts were audited for documentation of Hgb A1C levels, and the diagnosis of depression. Patients were asked to complete Beck Depression Inventory (BDI II) scale. Participants who score 16 or higher on the BDI were considered depressed. Participants' scores on BDI II and their Hgb A1C levels were compared with demographic data, and chart verification of depression. Statistical analyses was accomplished using Chi-Square for categorical variables and student's t-test for independent variables all analyses was run using SPSS v. 10

Results: 61 patients participated. When prevalence of depression in diabetic participants was compared with BDI II scores, 47% (N=24) of participants were found to be depressed. Primary care physician recognized and documented depression in 4% (N=2) of the depressed participants. The mean Hgb A1C was higher for depressed participants (9.31%) when compared to non-depressed participants (8.03%), but was not statistically significant I II ($p = .788$).

Conclusions: Depression was a major problem for patients with diabetes presenting to primary care clinic, and that diabetes was under diagnosed. Contrary to previous studies, patients in this study with diabetes and depression had similar glycemetic control.