

COMORBIDITY OF ANXIETY AND DEPRESSION IN DERMATOLOGY

V.A. Verbenko¹, O.A. Prytulo²

¹Department of Psychiatry, Psychotherapy, Narcology, ²Dermatology, Crimean State Medical University named after S. Georgievsky, Simferopol, Ukraine

Objectives: The incidence of depressive disorders in patients with skin diseases is about 30% compared with the prevalence of depressive disorders in somatic practice - up to 20% (Filaković P. et al, 2009). The comorbidity of depressive and anxiety disorders with allergic contact dermatitis and atopic dermatitis was spotted. The psychogenic factors and behavioural aspects have significant role in the etiopathogenesis of most dermatological diseases (Shenefelt PD, 2011).

Methods: A survey 46 patients with skin diseases - 28 (61%) atopic dermatitis and 18 (39%) allergic dermatitis, was conducted with psychometric scales (NAMD-21, Q-LES-Q). Skin disease duration was more than 12 months. The average age of the patients $36,4 \pm 3,5$ years.

Results: In social aspect were obtained positive correlations with high demands at work ($p \leq 0.05$), low social support ($p < 0.02$), a state of chronic stress at business ($p < 0.002$), persistent family problems ($p < 0.05$). Most patients demonstrated reduced social functioning and dissatisfaction with family relationships or relationships with a partner. Were identified: anxiety symptoms in 62% patients, somatovegetative manifestations of depression (appetite disorders - in 43%, 71% -of sleep disturbances, impaired concentration - 76%, irritability - in 91%), depressed mood - 39% and in 22% patients - anhedonia.

Conclusions: The business stress factors and interpersonal problems lead to probability of skin diseases occurrence.