Needs of depressed patients with coronary artery disease

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Depression is a complex disorder commonly present in patients with coronary heart disease (CHD) that is independently associated with increased cardiovascular morbidity and mortality. The prevalence of depression in various heart diseases ranges from 15% to 20%.1,2

Although, uncertainty and anxiety about the outcome of coronary disease is experienced by the majority of hospitalized patients, however depression does not consist a normal response to the process of disease.

Usually, health professionals are reluctant to treat depression in patients with CHD because they perceive it as a normal reaction to a stressful life event such acute myocardial infarction that is going to remit when the acute event stabilizes and the individual resumes customary activities. In such cases, symptoms are misdiagnosed as physical problems while the underlying cause remains. Another reason why health professionals fail to recognize depression is the lack of education on the typical and atypical symptoms or the greater concern for the treatment of the disease. Consequently, needs of depressed patients with CHD remain without treatment.1-4

Depression exerts a negative influence on coronary disease patients since it related to decreased adherence to prescribed medications, unwillingness to modify cardiac risk factors, increased rates of smoking and other risk behaviors, non compliance with treatment advice, reduced chance of successful participation in cardiac rehabilitation and increased incidence of cardiac events. Furthermore, the social stigma that follows depression causes patients to avoid needed treatment or don’t even mention their needs. This chronic disease imposes several limitations to patients’ daily activities and is strongly associated with poor quality of life.1-4

Needs of hospitalized patients with coronary disease who experience depression are mainly defined by the severity of the disease, subsequent physical and mental impairment, co-existence of other illness, difficulties to comply with the hospital’s rules, gender and whether the patient lives alone or not.1-4

In addition to conventional cardiac treatment, needs’ assessment of coronary disease patients, the systematic screening of depression, the in-hospital counseling by coronary care nurses and psychological interventions have a positive influence on the outcome of the disease.

Defining cardiac patients’ psychological needs and developing an accessible service to patients which offers interventions to meet their specific needs, to improve patients’ outcome and follow required behavior change is a matter of vital importance.

Bibliography
