

RAZLIKE U SOCIODEMOGRAFSKIM I KLINIČKIM KARAKTERISTIKAMA, POSTAVLJANJU DIJAGNOZE I TERAPIJSKIM ALGORITMIMA IZMEĐU PACIJENATA SA NEPSIHOTIČNOM I PSIHOTIČNOM DEPRESIJOM

DIFFERENCES IN SOCIODEMOGRAPHIC AND CLINICAL CHARACTERISTICS, DIAGNOSIS MANAGEMENT AND TREATMENT ALGORITHMS BETWEEN PATIENTS WITH NONPSYCHOTIC AND PSYCHOTIC DEPRESSION

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SAŽETAK

Uvod: Psihотиčna depresija je ozbiljna bolest tokom koje pacijent pati od kombinacije depresivnog raspoloženja i psihотичnih katrakteristika u vidu halucinacija i/ili sumanutih ideja.

Naši ciljevi su bili: Procena ispravnosti dijagnoze psihотичne depresije (F32.3, F 33.3) i nepsihотичne depresije (F32.1, F32.2, F 33.1, F 33.2); Procena odstupanja lečenja u kliničkoj praksi od algoritma lečenja psihотичne depresije; Ispitivanje učestalosti najčešće ordiniranih antipsihотika i antidepresiva u kliničkoj praksi, kao i najčešće kombinacije ordiniranih antipsihотika (AP) i antidepresiva (AD) u kliničkoj praksi; Ispitivanje povezanosti socio-demografskih podataka sa psihотичnom depresijom.

Metod: Ovo istraživanje, dizajnirano kao retrospektivna kohortna studija, sprovedeno je u Klinici za psihijatrijske bolesti "Dr Laza Lazarević" u periodu od 1. maja 2014. do 1. maja 2017. godine. U studiju su bili uključeni hospitalizovani pacijenti sa dijagnozom teške epizode depresivnog poremećaja bez psihотичnih karakteristika (F32.2) i teške epizode depresivnog poremećaja sa psihотичnim karakteristikama (F32.3), prema kriterijumima ICD-10. Pacijenti su podeljeni u dve grupe, pri čemu je prvu grupu činili pacijenti sa dijagnozom F32.2, a drugu pacijenti sa dijagnozom F32.3.

Rezultati: U istraživanje je bilo uključeno 60 hospitalizovanih pacijenata, od kojih je 30 (50%) imalo dijagnozu teške epizode depresivnog poremećaja bez psihотичnih karakteristika, a 30 (50%) dijagnozu teške epizode depresivnog poremećaja sa psihотичnim karakteristikama.

Kada su u pitanju sociodemografske karakteristike, jedina statistički značajna razlika primećena je u polu između pacijenata bez psihотичne depresije i onih sa psihотичnom depresijom. Naime, u grupi pacijenata sa nepsihотичnom depresijom, muškarci su činili više od dve trećine ispitanika, dok su u grupi pacijenata sa psihотичnom depresijom žene činile dve trećine ispitanika.

Kada je reč o terapiji, statistički značajna razlika primećena je u učestalosti primene antipsihотika u lečenju pacijenata u ispitivanim grupama ($p=0.001$). Naime, u lečenju pacijenata sa psihотичnom depresijom značajno češće su korišćeni prvenstveno tipični antipsihотici (26,7% naspram 3,3%), ali i atipični antipsihотici (70,0% naspram 50%). S druge strane, pacijenti sa nepsihотичnom depresijom češće su bili bez antipsihотičke terapije u poređenju sa pacijentima sa psihотичnom depresijom (46,7% naspram 3,3%).

Zaključak: U ovom istraživanju su pacijenti imali ispravnu dijagnozu za psihотичnu depresiju, ali nisu tretirani po važećem algoritmu.

Glavne reči: Psihотичna depresija, nepsihотичna depresija, algoritmi lečenja.

ABSTRACT

Introduction: Psychotic depression is a severe disorder in which the patient suffers from a combination of depressive mood and psychotic features such as hallucinations and/or delusional thoughts.

Our aims were: Assessment of the accuracy of the diagnosis of psychotic depression (F32.3, F33.3) and non-psychotic depression (F32.1, F32.2, F33.1, F33.2); Assessment of deviations in clinical practice from the treatment algorithm for psychotic depression; Examination of the frequency of the most commonly prescribed antipsychotics and antidepressants in clinical practice, as well as the most common combinations of prescribed antipsychotics (AP) and antidepressants (AD) in clinical practice; Examination of the association between socio-demographic data and psychotic depression.

Methods: This research, designed as a retrospective cohort study, was conducted at the Clinic for Psychiatric Diseases "Dr Laza Lazarević" from May 1, 2014 to May 1, 2017. The study included hospitalized patients with a diagnosis of Major Depressive Disorder, Single Episode, Severe without Psychotic Features (F32.2) and Major Depressive Disorder, Single Episode, Severe with Psychotic Features (F32.3), according to ICD-10 criteria. The patients were divided into two groups of patients, where the first group consisted of patients with a diagnosis of F32.2, and the second group consisted of patients with a diagnosis of F32.3.

Results: The study included 60 hospitalized patients, 30 (50%) with a diagnosis of Major Depressive Disorder, Single Episode, Severe without Psychotic Features and 30 (50%) with a diagnosis of Major Depressive Disorder, Single Episode, Severe with Psychotic Features.

When it comes to sociodemographic characteristics, only a statistically significant difference in gender was observed between patients without psychotic depression and those with psychotic depression. Namely, in the group of patients with non-psychotic depression, male made over two-thirds of the respondents, while in the group of patients with psychotic depression, women made up two-thirds of the respondents. When it comes to therapy, a statistically significant difference was observed in the frequency of antipsychotic use in the treatment of patients in the studied groups ($p=0.001$). Namely, in the treatment of patients with psychotic depression, primarily typical antipsychotics (26.7% vs. 3.3%) but also atypical antipsychotics (70.0% vs. 50%) were used significantly more often, while non-psychotic patients were more often without antipsychotic therapy than psychotic patients (46.7% vs. 3.3%).

Conclusion: In this study, patients had an accurate diagnosis of psychotic depression, but were not treated according to the current treatment algorithm.

Keywords: Psychotic depression, non-psychotic depression, treatment algorithms.