

البحث الخامس

(5) بحث مشترك غير مستخلص من رسالة:

عنوان البحث باللغة الإنجليزية:

The prevalence of anxiety-depressive disorder in severe and very severe COPD patients and its impact on exacerbations, rehospitalization, functional status and quality of life.

الملخص الإنجليزي:

Background: It has been suggested that chronic obstructive pulmonary disease (COPD) is associated with depression. In addition, there is evidence that there is relationship between quality of life, functional status and impairment, exacerbations, rehospitalization and comorbid anxiety-depressive disorder (ADD).

The present study was undertaken to investigate whether ADD occurs more common in patients with severe and very severe COPD than in controls. In addition, we assessed the relationship between ADD and quality of life (QOL), functional status and impairment, exacerbations, rehospitalization, length of stay (LOS) and mortality prediction.

Methods: We collected 200 patients with severe and very severe COPD, and 200 non-COPD patients as controls. AAD was assessed for COPD and controls using the Hospital Anxiety and Depression Scale (HAD).

The COPD group is divided into two groups: the depressed and non-depressed groups. Both groups are followed up for 12 months.

Results: The prevalence of ADD in severe and very severe COPD patients were significantly more than non-COPD patients.

ADD was significantly associated with more mortality, longer LOS, failure of smoking cessation and worse Saint George Respiratory Questionnaire (SGRQ).

Conclusion and recommendations: ADD occurs more common in patients with severe and very severe COPD than in controls. In addition, ADD is an important risk factor for poor QOL, poor functional status and impairment, more exacerbations, more rehospitalisations, prolonged LOS, failure of smoking quitting and more mortality. ADD was risk factor independent of physiological measure of disease severity (e.g. FEV₁).