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혈액 투석환자에서 우울증의 자연경과와 좌심실 심근지수 및 좌심실 충만압과의 관계

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The Relationship of the Course of Depressive Affect with the Left Ventricular Mass Index and Left Ventricular Filling Pressure in Chronic Hemodialysis Patients

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Background : Previous studies have shown that multiple measurements of depression symptoms over time were more predictive of cardiovascular mortality than a single time measurement performed at baseline. The aim of this study is to evaluate the association of the course of depressive affect, based on repeated assessments of depressive affect over time, with the left ventricular mass index (LVMI) and the left ventricular filling pressure in patients with ESRD.

Methods : Sixty-one patients on chronic hemodialysis were assessed for their level of depressive symptoms using the Beck Depression Inventory (BDI) every five months for up to 15 months. The clinical variables were obtained at each follow-up and Doppler echocardiographic examinations were performed at the end of follow-up.

Results : At the end of follow-up, the patients were divided into three groups according to their course of depressive affect: the nondepressive (n=21), the intermittent depressive (n=23), and persistent depressive affect groups (n=17). The LVMI was significantly increased in the persistent depressive affect group compared to that of the nondepressive affect group (134.0±40.7 vs 95.5±34.0 g/m2.7, respectively, p=0.012) and the intermittently depressive affect group (134.0±40.7 vs 87.9±34.0 g/m2.7, respectively, p=0.001). The E/Em was significantly increased in the persistent depressive affect group compared to that in the nondepressive affect group (22.7±7.9 vs 13.4±5.7, respectively, p=0.002) and the intermittent depressive affect group (22.7±7.9 vs 16.0±7.6, respectively, p=0.013). Multivariate regression analysis showed that persistent depressive affect was independently associated with the LVMI (β-coefficient=0.347, p=0.017) and the E/Em (β-coefficient=0.274, p=0.048) after adjustment for age, gender, the systolic blood pressure, the diastolic blood pressure, diabetes and the interdialytic weight gain. There were no statistically significant differences of the LVMI and E/Em between the groups according to the baseline BDI score.

Conclusion : Our data suggests that early identification and treatment of patients with persistent depressive affect, as assessed by multiple measurements of their depression symptoms, may be helpful to prevent LV hypertrophy and diastolic dysfunction in the patients who are on chronic hemodialysis.

Key Words : 우울증, 좌심실 심근지수, 좌심실 충만압
Depression, Left ventricular mass index, Left ventricular fill