

Depressive symptoms and related factors in elderly diabetic patients at a national geriatric hospital

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Objective:

To identify the presence of depressive symptoms and the clinical variables associated with depressive symptoms in elderly diabetic patients.

Materials and Methods:

A total of 412 diabetic patients aged ≥ 60 years old admitted to a National Geriatric Hospital from October 2015 - October 2016 were evaluated. Depressive symptoms were assessed by using the Geriatric Depression Scale (GDS). Socio-demographic, medical history, glycaemic control, daily activities and fall risks factors were investigated. Chi-square (χ^2) statistics and logistic regression were used to analyse the collected data.

Results:

327 (79.4%) patients were categorized according to having depressive symptoms. The proportion of participants with mild, moderate and severe depression symptoms were 62.9%, 14.6% and 1.9%, respectively. Advanced age, low educational level, history of hypertension, decreased ADL, duration of diabetes ≥ 5 years and using insulin were higher in the depressive symptom group than those in the non-depressive symptom group ($p < 0.05$). The level of HbA1c was significantly different between the depressive symptom group and the non-depressive symptom group ($7.74 \pm 1.57\%$ and $6.61 \pm 1.21\%$, $p < 0.05$, respectively). Depressive symptoms increased risk of falls (OR: 2.93; 95% CI: 1.28-6.72, $p = 0.01$), uncontrolled fasting blood glucose (OR: 4.09, 95% CI: 2.1-7.9, $p < 0.001$) and impairment of IADL (OR: 7.12, 95% CI: 3.4-14.9, $p < 0.001$). Conclusion:

The prevalence of depressive symptoms was high and the presence of depressive symptoms was associated with increased poor glycemic control, fall risk and impairments of ADL, IADL among elderly diabetic patients.