Group Urges Depression Screening for Heart Patients

They face twice the risk of second cardiac event 1 to 2 years later.

(SOURCE: American Heart Association, news release, Sept. 29, 2008)

WEDNESDAY, Oct. 1 (HealthDay News) -- A new statement from the American Heart Association (AHA) emphasizes the need to screen heart patients for depression.

Depressed people with heart disease have at least twice the risk of second cardiac events in the one to two years following a heart attack. And more severe depression is associated with more severe second events.

The new statement, published in the current issue of *Circulation*, includes the following recommendations, which are endorsed by the American Psychiatric Association:

- Early and repeated screening for depression in heart patients.
- Follow-up for both heart disease and depressive symptoms in patients who have both.
- Professional evaluation in heart patients who have depressive symptoms.
- Screening for other psychiatric disorders, such as anxiety, in heart patients who have depressive symptoms.
- Treatment options such as cognitive behavioral therapy, physical activity, cardiac rehabilitation and antidepressants.
- Screening of heart patients for depression in multiple settings, including the hospital, physician's office, clinic and cardiac rehabilitation center.
- Coordination of care between health providers.

"The statement was prompted by the growing body of evidence that shows a link between depression in cardiac patients and a poorer long-term outlook," Erika Froelicher, a professor at the University of California, San Francisco, School of Nursing and Medicine and co-chair of the writing group, said in an AHA news release.

The statement, which was the first to specifically focus on depression and heart disease, is important, since depression is a common problem in heart patients.

One study found that 15 percent to 20 percent of hospitalized heart attack patients met the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) criteria for major depression.
And an even greater proportion of the patients showed more depressive symptoms than the general population, though they did not meet the diagnostic criteria for depression.

Depressed heart patients are less likely to take their medicines as directed, improve their diets, exercise, and attend cardiac rehabilitation sessions.

"There is no direct evidence yet that treating depression improves coronary heart disease outcomes, but plenty of evidence shows that having depression worsens those outcomes," said Judith H. Lichtman, co-chair of the statement and an associate professor of epidemiology at Yale University School of Medicine, said in the news release. "By understanding the prevalence of depression and learning more about the subgroups of heart patients at particular risk of depression, we can begin to understand the best ways to recognize and treat it."

More information

The National Heart, Lung, and Blood Institute has more about heart attack.

Copyright © 2008 ScoutNews, LLC. All rights reserved. EXIT Disclaimer

HealthDayNews articles are derived from various sources and do not reflect federal policy. healthfinder.gov does not endorse opinions, products, or services that may appear in news stories. For more information on health topics in the news, visit Health News on healthfinder.gov.