



1st World Congress on Healthy Ageing, Kuala Lumpur, Malaysia

Abstract 55

Title: Relationship between depressive symptoms and subsequent mortality and role of disabilities across age groups: A prospective population-based study

Professor Slimane Belbraouet
Qatar University, Jamaa St., Doha 2713, Doha, Qatar

Abstract

Background: Depressive symptoms are common, relate to unhealthy behaviours, and may become the most frequent cause of disability worldwide. They increase mortality risk but the mediating roles of disabilities and unhealthy behaviours across age groups are little addressed.

Objectives: To assess the role of depressive symptoms in mortality and the contributions of physical, sensorial and cognitive disabilities and tobacco smoking, alcohol abuse, and obesity among men and women.

Methods: The sample included 2,951 men and 3,249 women randomly selected in north-eastern France, who responded to a self-administered questionnaire in mid-1996, and were followed up until the end of 2010. Depressive symptoms were measured with the Duke questionnaire. Mortality was derived from France register-based information and linked to the baseline data. Data were analysed using Cox models which yield hazard ratios (HR) and 95% confidence intervals (CI).

Results: The prevalence of depressive symptoms differed between sexes and age groups: 10.2%, 13.0%, and 13.9% ($p < 0.05$) among men aged <50, 50-59, and 60+ years respectively; 20.7%, 27.6%, and 25.1% ($p < 0.001$) among women, respectively. Depressive symptoms related to mortality for all sample: HR adjusted for education, marital status, occupation, and income (HR₁) 1.43 (CI 1.22-1.67) which decreased to HR₂=1.02 (HR-reduction 95%) with further adjustment for disabilities and unhealthy behaviours. Among men, depressive symptoms related to mortality among the subjects aged 60 or over only: HR₁=1.39 (CI 1.06-1.83) which decreased to HR₂=1.12 (69%). Among women, depressive symptoms related to mortality among the subjects aged <50 (HR₁=2.33, 1.21-4.49) and more markedly among those aged 50-59 (HR₁=3.83, 1.76-8.35) whereas the association was close to significance among those aged 60 or over (HR₁=1.24, 0.98-1.58); the contribution of disabilities and unhealthy behaviours were 1%, 3%, and 112%, respectively.

Conclusions: Prevention aiming at reducing mortality risk among people with depressive symptoms should consider disabilities, unhealthy behaviours, gender, and subject's age.