

Mental health treatment extends lives of older patients with diabetes and depression

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Researchers at the University of Pennsylvania School of Medicine report that older adults with diabetes and depression are half as likely to die over a 5-year period when they receive depression care management than depressed patients with diabetes who do not receive depression care management. The first known study to examine the relationship between diabetes and mortality in a depression intervention trial appears in the December issue of *Diabetes Care*.

“Depression is common among people with diabetes and contributes to issues with medication and diet adherence, and also leads to an overall reduced quality of life,” says lead author, Hillary R. Bogner, MD, MSCE, Assistant Professor, Department of Family Practice and Community Medicine at Penn.

The multi-site, practice-randomized controlled trial was conducted in 20 primary care practices in New York City, Philadelphia, and Pittsburgh. A total of 584 participants 60 – 94 years of age were identified through a depression screening, and of these participants, 123 reported a history of diabetes. The practices were randomly assigned to usual care, or a depression care management intervention, which involved a depression care manager who worked with the primary care provider to recommend treatment for depression and assist patients with treatment adherence.

At follow-up, 110 depressed patients had died. Depressed, older adults with diabetes who were in practices randomized to depression care management were less likely to have died at the end of the 5-year follow-

up than were depressed, older adults with diabetes who received usual care. The authors note that they believe these findings support the integration of depression evaluation and treatment with diabetes management in primary care.

Source: University of Pennsylvania

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