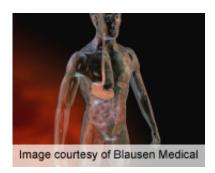


## **Depression modifies type A behavior, mortality link in T1DM**

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For individuals with type 1 diabetes, type A personality is associated with lower all-cause mortality, with the correlation modified by depressive symptomatology, according to a study published online July 8 in *Diabetes Care*.

(HealthDay)—For individuals with type 1 diabetes, type A personality is associated with lower all-cause mortality, with the correlation modified by depressive symptomatology, according to a study published online July 8 in *Diabetes Care*.

Catherine E. Fickley, M.P.H., from the University of Pittsburgh, and colleagues used data from 22 years of follow-up from the Pittsburgh Epidemiology of Diabetes Complications study involving 506 participants with <u>type 1 diabetes</u> to examine whether type A behavior predicts all-cause mortality and incident <u>coronary artery disease</u> (CAD). At baseline in 1986 to 1988, participants completed the Bortner Rating Scale (to assess type A behavior) and the Beck Depression Inventory



(BDI).

During follow-up, the researchers identified 128 deaths (25.3 percent). There was a significant inverse correlation between Bortner scores and all-cause mortality in univariate analysis, which persisted after adjustment for multiple confounders, including age, sex, duration, glycated hemoglobin, education, smoking, body mass index, and physical activity. The correlation was attenuated after adjustment for BDI scores; the protective effect was limited among those with lower BDI scores (lower three quartiles; P = 0.07), but no effect was observed in those with higher BDI scores (P = 0.97). A borderline association was observed for Bortner scores with incident CAD (P = 0.09).

"Those with higher type A behavior have lower all-cause mortality in our type 1 diabetic population, an effect that interacts with depressive symptomatology such that it is only operative in those with low BDI scores," the authors write. "Further research should focus on understanding this interaction."

## More information: Abstract

Full Text (subscription or payment may be required)

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