

Many ICU survivors depressed—study finds young and African-Americans at highest risk

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Babar Khan, MD and Sophia Wang, MD. Credit: Indiana University Center for Aging Research

Intensive care unit survivors, growing in number as clinicians and medical technology save more lives, are psychologically as well as medically fragile. The first study to examine antidepressant use and depressive symptoms after an ICU stay has found that even if prescribed antidepressants, a significant percentage—about a third—had symptoms

of depression at the time of their initial visit to a clinic specially designed for ICU survivors. Young ICU survivors and African American ICU survivors were at the highest risk for depression.

The new study of [depression](#) risk profiles of ICU survivors, conducted by Indiana University Center for Aging Research and IU Center for Health Innovation and Implementation Science clinician-researchers, is published in the *Journal of Hospital Medicine*.

In the study, 204 racially diverse ICU survivors, 18 years or older, were screened for depressive symptoms with a standard depression test on an initial visit to the Eskenazi Health Critical Care Recovery Center (CCRC) prior to any treatment in the CCRC. Young age was found to be a risk factor for post-ICU depression whether the ICU survivor was being treated for depression or not. African Americans who had been prescribed antidepressants were also found to be at increased risk of depression.

"Now that we have determined that in addition to being young, being African American imparts higher risk of depression for ICU survivors, the next step will be to determine the underlying reasons for this elevated risk," said study first author Sophia Wang, MD, a Center for Health Innovation and Implementation Science researcher and Indiana University School of Medicine assistant professor of clinical psychiatry. "Why are younger ICU survivors more vulnerable to depression? What genetic and environmental factors are causing a lower likelihood of response to antidepressants in African Americans? Once we know the answers to these questions we can begin to counter the problems and more effectively treat depression in these ICU survivors."

Approximately 5 million adults are admitted to medical or surgical ICUs across the United States annually. The majority survives its ICU stay.

"Spending time in an ICU, where very invasive things happen quickly—is by its nature a very anxiety-provoking experience for many people, no matter their age, ethnicity or level of education," said Dr Wang. "Our study reveals two important findings: one, that not all ICU survivors have the same level of risk for depression, and two, that the mental health of ICU survivors is being inadequately treated."

"The CCRC provides an ideal space for all ICU survivors to be screened and treated for depression, which is prevalent among ICU survivors," said senior author Babar Khan, MD, an IU Center for Aging Research and Regenstrief Institute investigator. "The CCRC is a model of care that merges clinical operations with research. Further development of such models across the nation is needed to enhance care access to vulnerable ICU survivors."

Dr. Khan developed the CCRC model and serves as medical director of the Eskenazi Health Critical Care Recovery Center and is an implementation scientist with the IU Center for Health Innovation and Implementation Science

Drs. Wang and Khan call for future studies to examine new approaches to increase access to effective depression treatment and to test new antidepressant regimens for post-ICU depression.

Authors of "Antidepressant Use and Depressive Symptoms in Intensive Care Unit (ICU) Survivors" in addition to Drs. Wang and Khan are Chris Mosher, MD and Sujuan Gao, PhD, of IU School of Medicine; Kayla Kirk, MA of Eskenazi Health; Sue Lasiter, RN, PhD, formerly with the IU School of Nursing and now with the University of Missouri-Kansas City School of Nursing and Health Studies; Sikandar Khan, MD and You Na Kheir, MD of IU School of Medicine and Malaz Boustai, MD, MPH. Dr. Boustani is the founder of the Indiana Clinical and Translational Science Institute's IU Center for Health Innovation and Implementation

Science; associate director of the IU Center for Aging Research, a Regenstrief Institute investigator and Richard M. Fairbanks Professor of Aging Research at IU School of Medicine.

The authors note that their study provides a much-needed database for future research and potential personalized mental [health](#) treatment of ICU survivors based on objective measurement of their [depressive symptoms](#) and a greater understanding of risk for these symptoms.

Provided by Indiana University

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