

Racial differences in link between depression and early death in kidney disease patients

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Treatment of depressive symptoms may help lower the risk of early death in individuals with chronic kidney disease, but racial differences may exist. The findings come from a study that will be presented at ASN Kidney Week 2017 October 31-November 5 at the Ernest N. Morial Convention Center in New Orleans, LA.

Depression is common, under-recognized, and undertreated among patients with [chronic kidney disease](#), especially among racial/ethnic minorities. Delphine Tuot, MD (University of California, San Francisco) and her colleagues assessed the presence of [depressive symptoms](#) among 3725 participants in the Chronic Renal Insufficient Cohort (CRIC). The team found that 23.3% of participants had depressive symptoms at the start of the study, with 17.0% prevalence of anti-depressant use. The rate of death was 3.37 per 100 person-years during a median of 6.7 years of follow-up. (A person-year is the number of years of follow-up multiplied by the number of people in the study.)

In white individuals, those who experienced depressive symptoms had a 1.5-fold higher risk of death than those without depressive symptoms, even when taking into consideration socioeconomic factors, severity of kidney disease, and burden of other chronic conditions. This risk was much lower when the researchers accounted for use of anti-depressants, however. In black individuals, the presence of depressive symptoms was not linked to risk of death.

The findings suggest that depressive symptoms may be differentially

associated with the risk of [early death](#) among white and black individuals with CKD. "This study confirms prior research that depressive symptoms are common among individuals with CKD and suggests that there are potential long-term mortality benefits of treating depression among patients with mild to moderate [kidney disease](#). More research is needed to understand differences in mortality risk among racial/ethnic subgroups," said Dr. Tuot.

More information: Study: "Treatment of depression symptoms is associated with attenuated risk of all-cause mortality" (Abstract 2763107)

Provided by American Society of Nephrology

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