Depression in Acute Coronary Syndrome in AHSA City

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Abstract: **Depression is a common co -morbid condition in patients with acute coronary syndrome (ACS). Some studies have been done in Western populations; there are currently no studies on depression prevalence in ACS patients in AHSA.**

Objectives: To explore the prevalence of depression in the adult Saudi population in Ahsa city with ACS attending the clinic and inpatient at Prince Sultan Cardiac center.

Methodology: this is an observational, cross-sectional study use convenience sample. Patient Health Questionnaire -9 questionnaire and criteria used to calculate the severity of depression.

Result: A total of 50 patients were included in the study diagnosed with ACS. 14 of these patients were free from depression.18 were mild, 10 were Moderate and 8 were severe.

Keywords: **Acute coronary syndrome (ACS), Prince Sultan Cardiac center.**

1.   INTRODUCTION

Epidemiology studies in western countries showed a relation between depression and cardiac diseases with many patients. [1] According to the events that happen to the patients with Acute coronary syndrome (ACS) there is a major important role of independent depression risk factor. [2] The established patients with coronary artery disease has been shown that depression has an adverse affect for the prognosis with little evidence to be documented for the initiation of the disease. [3] Depression increase the prevalence of morbidity and mortality in coronary heart disease. [4] A major depression has been played a significant major role to increase the mortality in post myocardial infarction hospitalized patients during first 6 months. [5] There are currently no studies on depression prevalence in ACS patients in AHSA. The Objectives of this study is explore the prevalence of depression in the adult Saudi population in Ahsa city with ACS attending the clinic and inpatient at Prince Sultan Cardiac center.

2.   METHODOLOGY

This is an observational, cross-sectional study. It obtained approval from Prince Sultan Cardiac Center, Al-Hassa (PSCCH), Saudi Arabia. All information collected from patients was kept confidential. All patients were informed before questioning, that their answers will be used in the research. Oral consent was taken and the responded patients were allowed to refuse continuing the study in any time. Variables included in the study were age, ACS and severity of depression. Only the patients above 50 years old were accepted in the study. We considered a patient had ACS if he was diagnosed by physician as a case of unstable angina, non ST elevation myocardial infarction (non STEMI)or ST elevation myocardial infarction (STEMI) at the last the severity of depression was calculated by used Patient Health Questionnaire -9 (PHQ-9) questionnaire and criteria. The sampling process included all the Saudi cardiac patients came to OPD or admitted to the hospital between Day 5 of February 2017 to 15 February 2017 with history of ACS we invited them to join in the study, making up a convenience sample. Data collection was done by explaining the questionnaire to

the patient and asked him to fill out it and the patients who had difficulty in reading or understanding the physician was reading the questionnaire for him and allow him to answer. The statistical analysis of data was performed manually.

3. RESULT

A total of 50 patients were included in the study diagnosed with ACS. A table below show a comparison of those results. 14 (28%) of these patients were free from depression.

Description	No	Percentage
Normal	14	28%
Mild	18	36%
Moderate	10	20%
Moderately-severe	4	8%
Severe	4	8%

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