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Title: COPD and depression

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Body: Background: Patients with chronic obstructive pulmonary disease [COPD] have been characterised as a population of chronically ill patients with a higher than normal prevalence of depression. Objective. To reveal associations of depression with severity, health-related quality of life and mortality of COPD patients. Methods: A group of 39 COPD patients was analysed during one year. St George's Respiratory Questionnaire [SGRQ] and mMRC scale was done in order to assess quality of life and dyspnoea level. We used the Hospital Anxiety and Depression Scale [HADS] and Geriatric depression score [GDS] for depression assessment. Results: The highest value of depression score were in patients with very severe COPD.

Severity of COPD and depression

	Mild and moderate COPD	Severe COPD	Very severe COPD	p
GDS	9.1 ± 6.2	14.0 ± 8.0	15.3 ± 4.8	0.048
HADS – depression	5.5 ± 4.0	9.7 ± 5.0	10.2 ± 4.6	0.028

Statistical significant correlation was between dyspnoea level and depression score [HADS] [$r=0.437$, $p=0.01$]. Also, we found positive correlation between health-related quality of life [SGRQ] and depression score [HADS]: symptoms- depression [$r = 0.654$, $p = 0.000$], activity- depression [$r = 0.624$, $p= 0.000$], impact- depression [$r = 0.556$, $p=0.000$], total score- depression [$r=0.634$, $p=0.000$]. We found statistical significant higher value of initial depression score [HADS] in patients who have been died [$n=6$] during this study [t test, $p= 0.001$]. Conclusions. These data suggest that depressive symptoms in COPD are related to severity of disease. Depression is also associated with dyspnoea level and quality of life. The data suggest that assessment for depression should be considered for all COPD patients, particularly in those with more severe clinical levels of disease.