

Abstract

Objective

The study reported herein examined the point prevalence of mood and anxiety disorders, their clinical correlates and health-related quality of life (HRQoL) in Chinese outpatients with treated Graves' disease (GD).

Study design

The study used a cross-sectional design and the data was collected between 1 July 2007 and 30 June 2008. All eligible Chinese remitted GD patients that attended the thyroid outpatient clinic at the Prince of Wales Hospital (PWH) were recruited. All of the participants were interviewed by the candidate using the Chinese-Bilingual Structured Clinical Interview for the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition Axis I, Patient Version (CB-SCID-I/P) to identify patients who suffered from a mood or anxiety disorder, according to the Diagnostic and Statistical Manual of Mental Disorder, Fourth Edition.

A self-rated battery which included the Chinese versions of the Beck Depression Inventory (BDI), the Beck Anxiety Inventory (BAI) and the Hong Kong Chinese Version World Health Organisation Quality of Life Measure - abbreviated version (BREF(HK)) was administered. BDI and BAI measured the severity of depressive and anxiety symptoms, respectively. BREF(HK) measured the HRQoL of the subjects.

Results

156 eligible remitted GD patients were recruited in the study. The point prevalence of depressive and anxiety disorders were 17.3% and 50.0%, respectively. Only 11.1% with 'current depression' (CD) and 6.3% with 'current anxiety' had sought help from mental health professionals. There was a significant difference between the two groups, CA and 'no current psychiatric illness' (CN), in terms of female sex ($p=0.031$), past psychiatric illness ($p=0.046$), not using radioactive iodine as primary treatment ($p=0.019$), BAI ($p<0.001$), BDI ($p<0.001$) and all five BREF(HK) domain scores ($p<0.05$). There was a significant difference between the two groups, CD and CN, in terms of female sex ($p=0.026$), past psychiatric illness ($p=0.049$), previous treatment by psychiatrist ($p=0.047$), not using radioactive iodine as primary treatment ($p=0.011$), BAI ($p<0.001$), BDI ($p<0.001$) and all five BREF(HK) domain scores ($p<0.001$). Not using radioactive iodine as primary treatment ($p<0.05$), female sex ($p<0.05$) and past psychiatric illness ($p<0.05$) were found to be the independent predictors of both CD and CA in remitted GD patients by binary logistic regression. Both BAI and BDI scores were inversely correlated with BREF(HK) scores. Linear regression on BREF(HK) scores by current depression and current anxiety account for 25% and 53%, respectively, of the total variance of BREF(HK).

Conclusion

This study indicated that mood and anxiety disorders are highly prevalent in the Chinese GD patients of thyroid clinics in Hong Kong, even after achieving euthyroidism. Depression and anxiety were found to exert significant effect on the HRQoL of remitted GD patients. The majority of these psychiatric morbidities are currently untreated. There is a need for strengthening liaison psychiatric service in future service planning.

Keywords

Graves' disease, treated, remitted, mood, depression, anxiety, Hong Kong