

Abstract

Background: Systemic lupus erythematosus (SLE) is a chronic rheumatological disorder with an estimated prevalence of 0.06% in Hong Kong Chinese population. Psychiatric symptoms, especially depression, are highly prevalent in patients with SLE. The high prevalence of depression may be related to SLE disease activity, other clinical variables, or socio-demographic factors. However, limited data is available in the local population regarding the prevalence of depression and its associated factors.

Objective: This study aimed to determine the prevalence of depressive disorders and measure the severity of depressive symptoms in patients with SLE in a local Chinese population; to identify modifiable factors, including measures of SLE disease activity; and to assess the effectiveness of the Chinese version of the Beck Depression Inventory (BDI) in identifying depressive disorders in patients with SLE.

Methods: One hundred and seventy-five patients with SLE from a regional rheumatology centre were randomly selected. Depressive disorders were diagnosed by using the Chinese-bilingual Structural Clinical Interview for DSM-IV Axis I disorders, Patient Research Version (CB-SCID-I/P). The SLE disease activity was measured by the Systemic Lupus Erythematosus Disease Activity Index (SLEDAI). Depressive symptoms severity was measured by the Chinese version of the Hamilton Depressive Rating Scale (HAM-D). Socio-demographic and clinical data were collected. Patients were asked to complete the Chinese version of the Beck Depression Inventory (BDI), the Chinese Version of the Medical Outcomes Study Social Support Survey (MOS-SSS-C) and the Hong Kong Chinese Version the World

Health Organisation Quality of Life Measure-Abbreviated Version (WHOQOL-BREF, BREF(HK)).

Results: Twenty-seven patients (15.4%) were diagnosed with a current depressive disorders and 59 patients (41.7%) were found to have a lifetime diagnosis of depressive disorders. Independent predictors for a current depressive disorder were SLE disease activity, perceived poor social support and a past history of psychiatric disorders. Being separated/divorced, having more severe SLE disease activity, shorter disease duration and a past history of psychiatric disorders were independently associated with HAM-D scores. Depressive disorders and depressive symptoms severity were significantly associated with poor quality of life. The BDI at the cutoff of 14/15 with a sensitivity of 89% and a specificity of 83% provided good psychometric property in screening for depressive disorders.

Conclusion: Depressive disorders and depressive symptoms are common in the local Chinese population with SLE. SLE disease activity is one of the potential risk factors for the presence and severity of depression in patients with SLE. The identification of potential correlates and the optimal cut-off point of the BDI could help clinicians detect depression in patients with SLE. Future research should focus on the understanding of the underlying mechanisms involved in the relationship between depression and SLE disease activity.

Keywords: Depression, Prevalence, Chinese, Systemic lupus erythematosus, Disease activity