

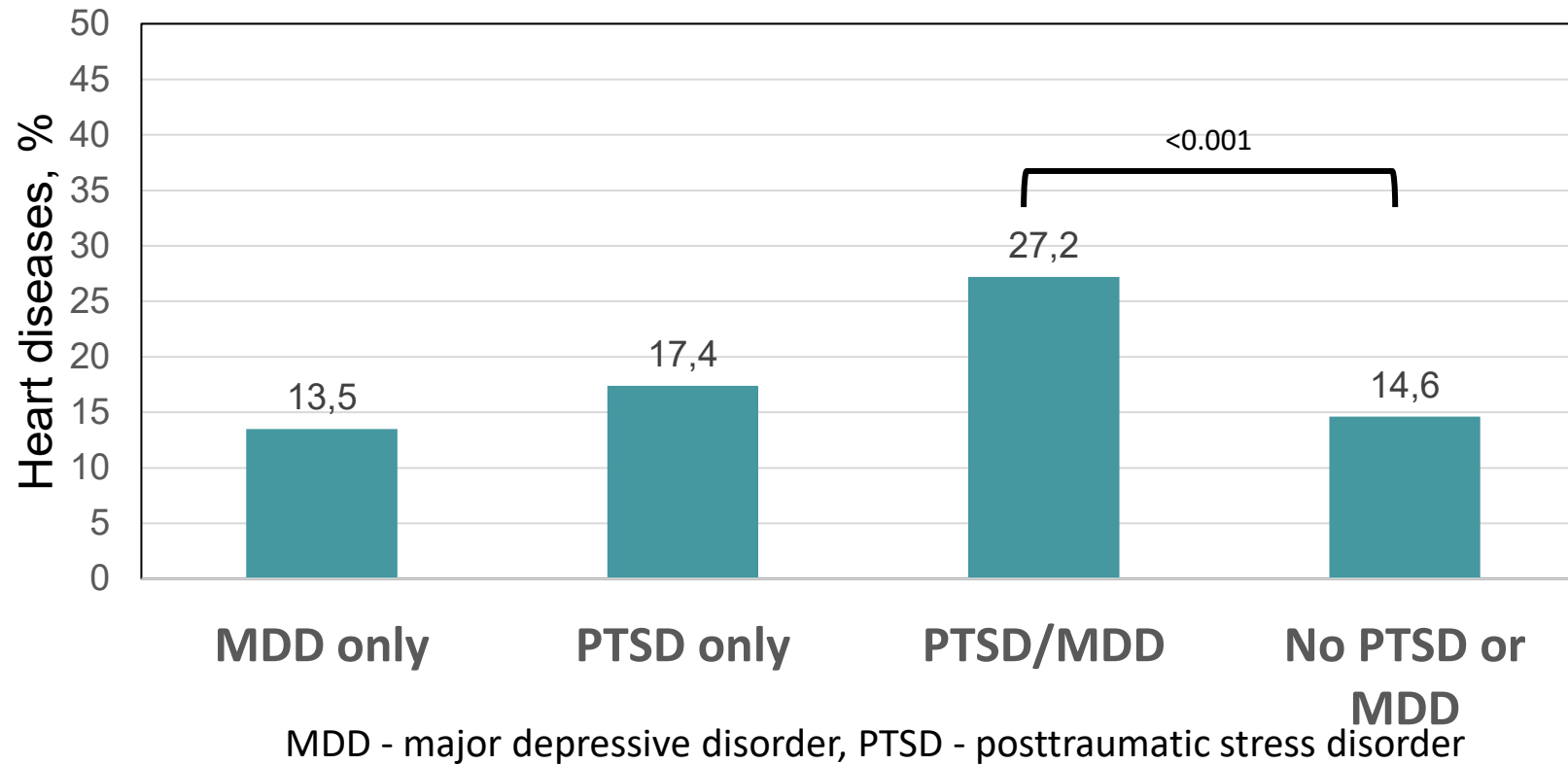


Farid Belialov, professor of the Department of Gerontology, Geriatrics,
and Clinical Pharmacology in the Russian Medical Academy of Continuous Professional Education,
Vice-president of the Baikalsk Psychosomatic Association (BPA), Russia

Main Points of Psychosomatic Medicine

23.08.2022

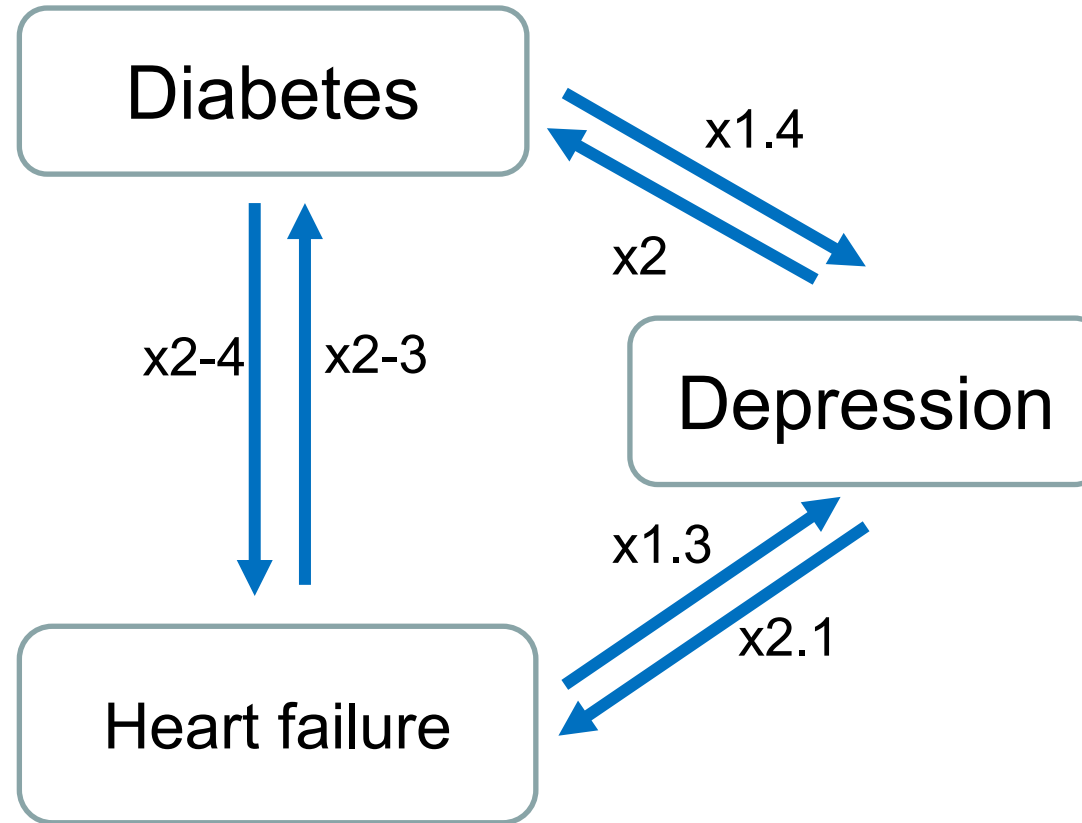
Point 1



Veterans with co-occurring posttraumatic stress disorder (PTSD) and major depressive disorder (MDD) represent a high-risk group for cardiovascular disease and other health problems

Comorbid somatic and mental diseases are often detected

Point 2



Bidirectional connections are manifested by an increased risk of somatic diseases in patients with mental disorders and on the contrary

Nichols G et al., Congestive heart failure in type 2 diabetes: prevalence, incidence, and risk factors. *Diabetes Care*. 2001;24(9):1614-9.

Preiss D, et al. Predictors of Development of Diabetes in Patients With Chronic Heart Failure in the CHARM Program. *Diabetes Care* 2009;32 (5):915-20.

Dunlay SM, et al. Type 2 Diabetes Mellitus and Heart Failure: A Scientific Statement From the American Heart Association and the Heart Failure Society of America. *Circulation*. 2019;140(7):e294–e324.

Bobo W, et al. Bi-directional association between depression and HF: An electronic health records-based cohort study. *J Comorb*. 2020;10:2235042X20984059.

Chen PC, et al. Population-Based Cohort Analyses of the Bidirectional Relationship Between Type 2 Diabetes and Depression. *Diabetes Care* 2013;36(2):376-82.

Mental disorder

Somatic factors

Autonomic nervous system
Hemostasis
Vessels
Inflammation
Oxidative stress
Hormones
Medicines

Mental factors and behavior

Adherence to treatment
Lifestyle (smoking, alcohol, physical activity, diet)
behavior strategies

Somatic factors

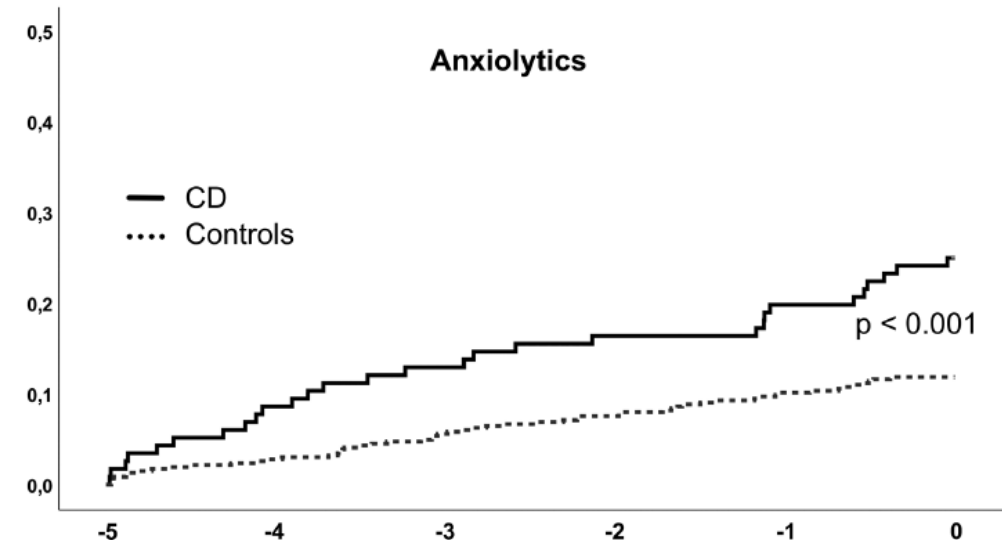
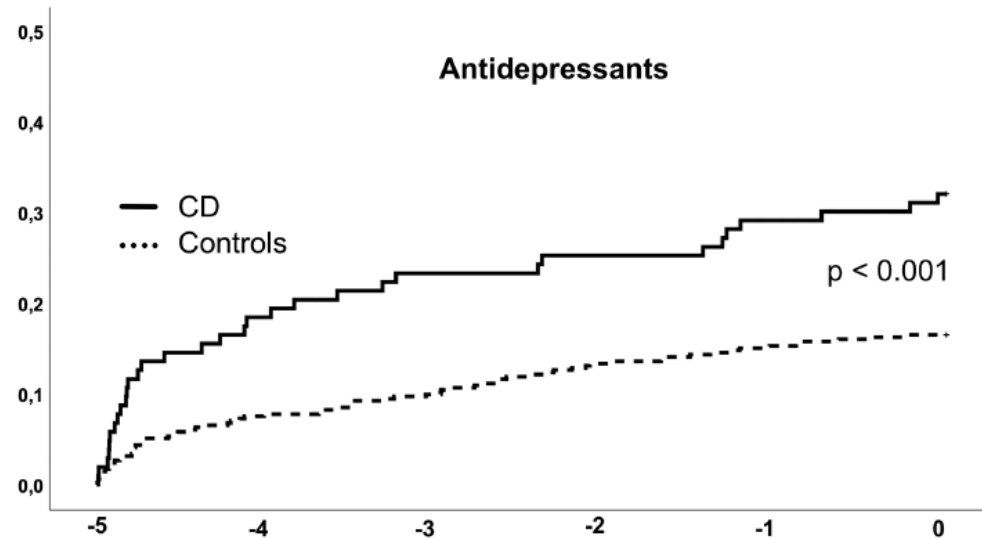
Brain structure
Oxygenation
Hemostasis
Vessels
Inflammation
Hormones
Medicines

Mental factors and behavior

Stress
Lifestyle (physical activity) behavior strategies

Somatic disease

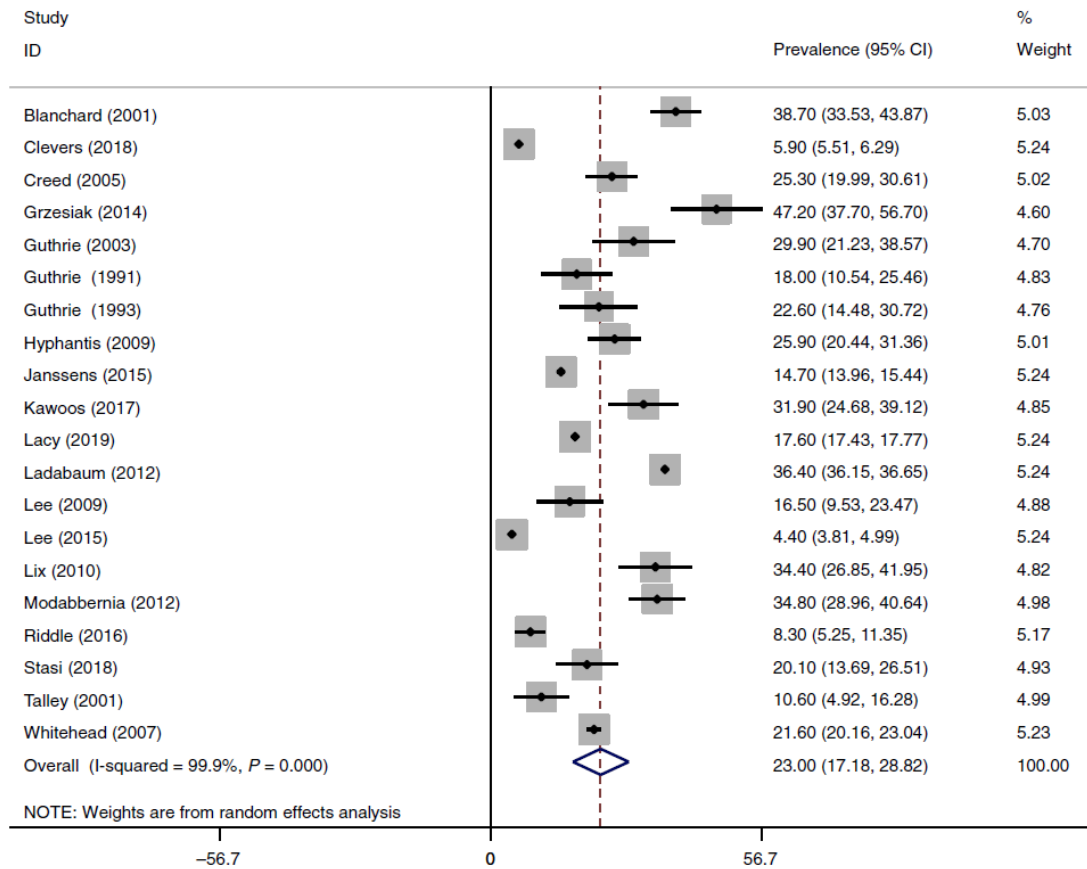
Point 3



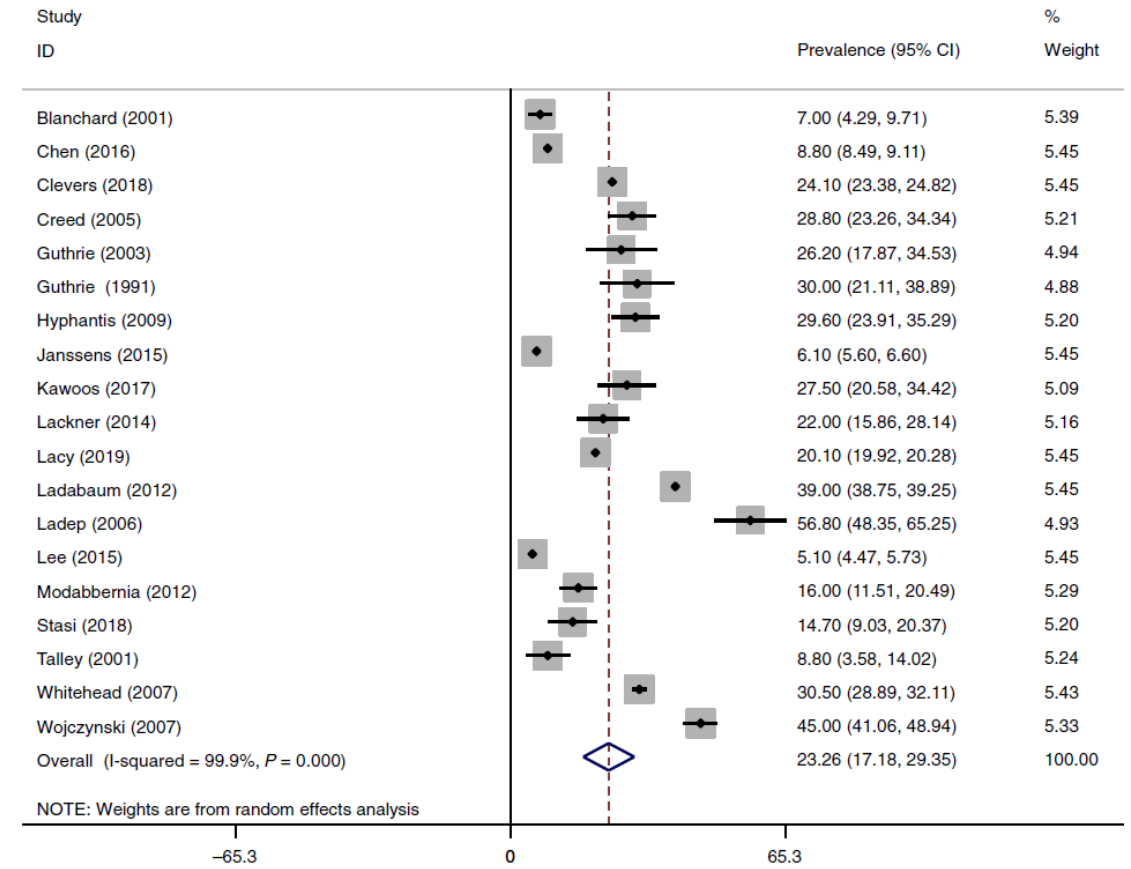
Psychotropic Drugs in Patients with Cushing's Disease Before Diagnosis

Mental disorders do not cause organic diseases, at the same time, the latter can be the causes of mental disorders

Point 4



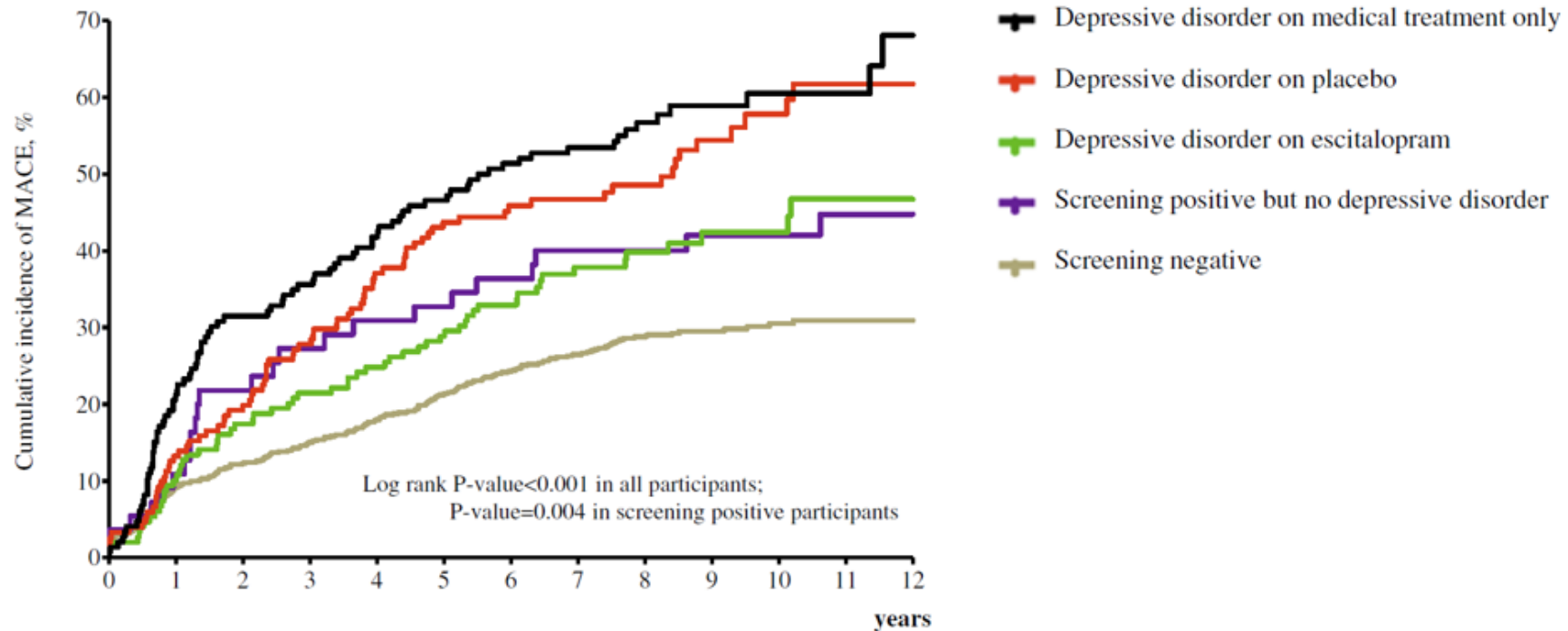
Prevalence of anxiety disorders in patients with the irritable bowel syndrome is 23% (HR 2.5)



Prevalence of depressive disorders in patients with the irritable bowel syndrome is 23% (HR 2.7)

Mental disorders and symptoms are common in patients with functional symptoms and diseases

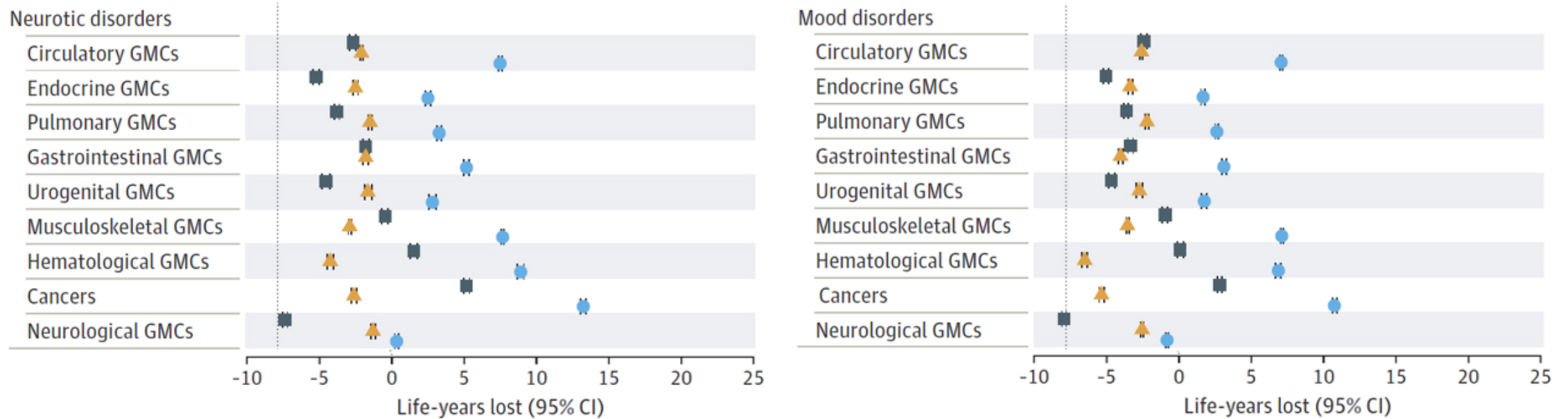
Point 5



Routine depression screening in patients with recent acute coronary syndrome and subsequent appropriate treatment of depression could improve long-term cardiac outcomes.

Mental disorders worsen the prognosis of comorbid somatic diseases, increase disability, reduce quality of life often to a greater extent than somatic diseases

Point 6

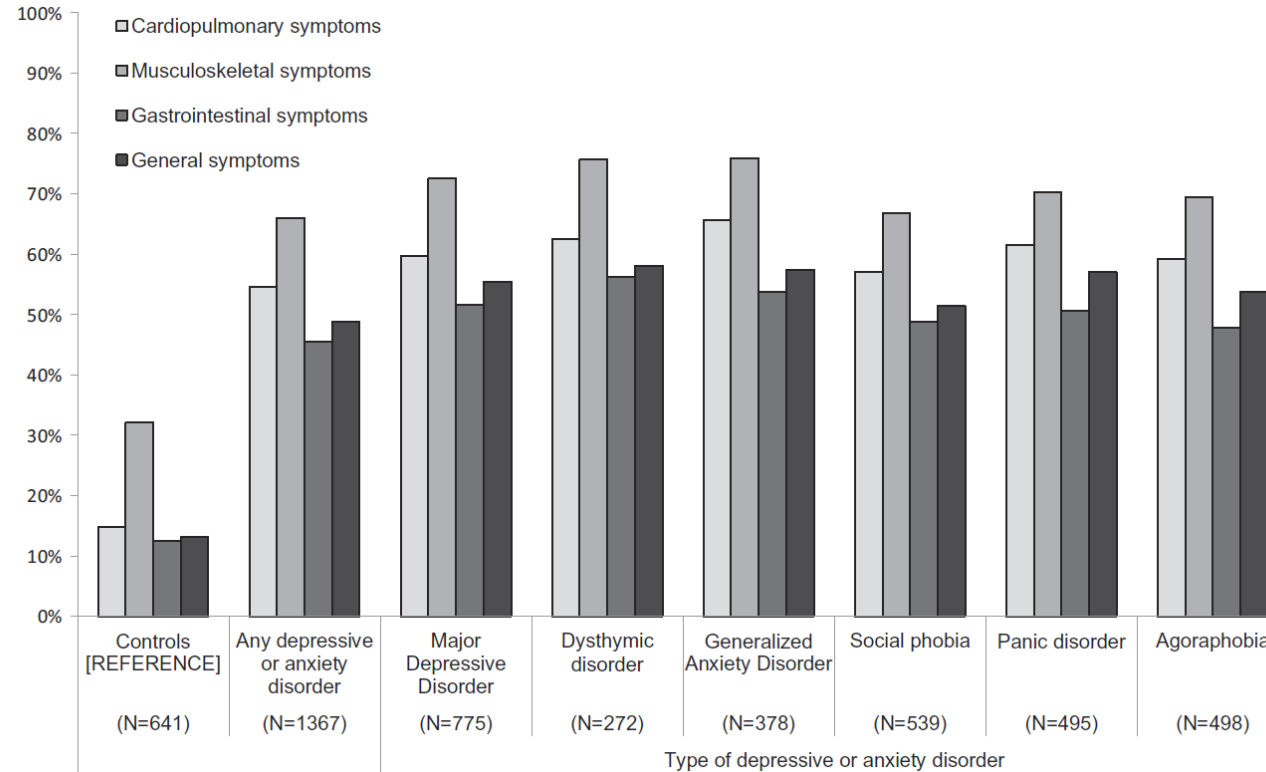


MRRs for patients with each MD-GMC pair compared with those who have: ■ MD only ▲ GMC only ● No MD or GMC

Shorter life expectancy was associated with comorbid mental disorders and general medical conditions compared with the entire population and also when compared with patients who had either mental disorders only or general medical conditions only

Mental disorders are associated with increased overall and cardiovascular mortality

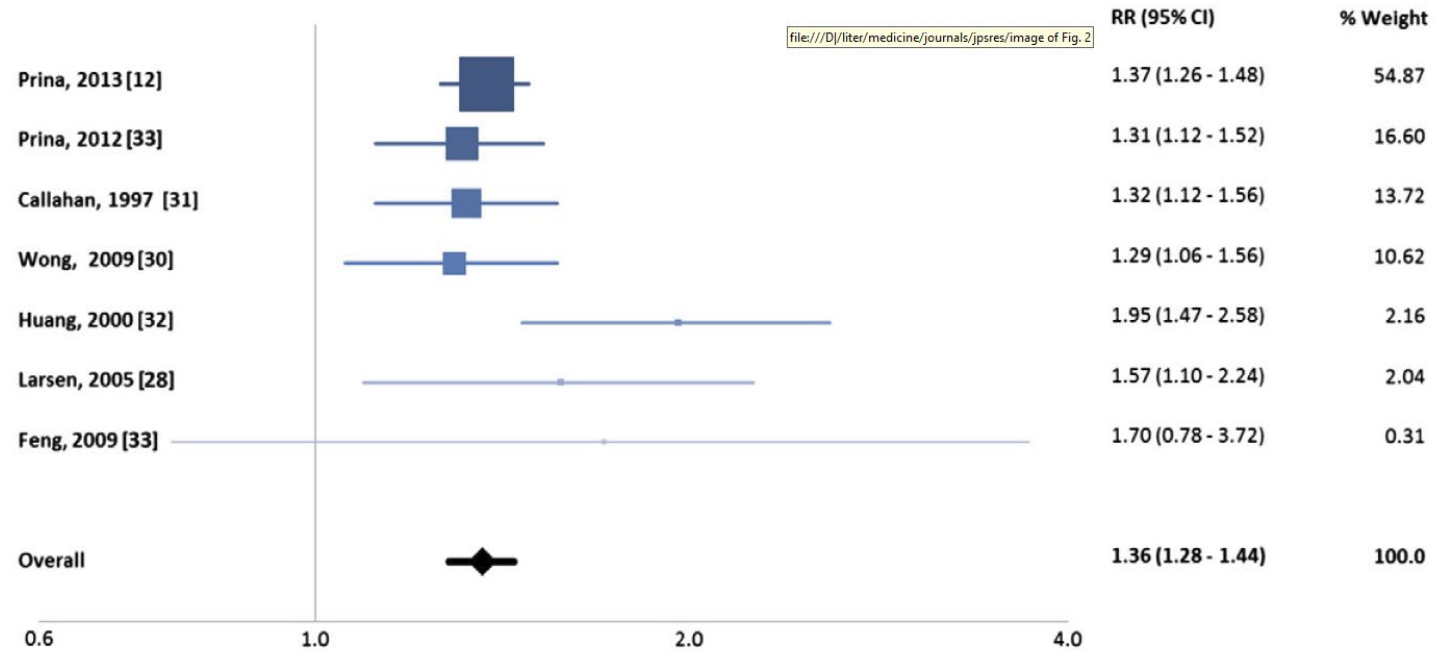
Point 7



Depressive and anxiety disorders show strong associations with somatic symptoms.

Mental disorders can manifest symptoms similar to the symptoms of somatic diseases, and exacerbate somatic symptoms

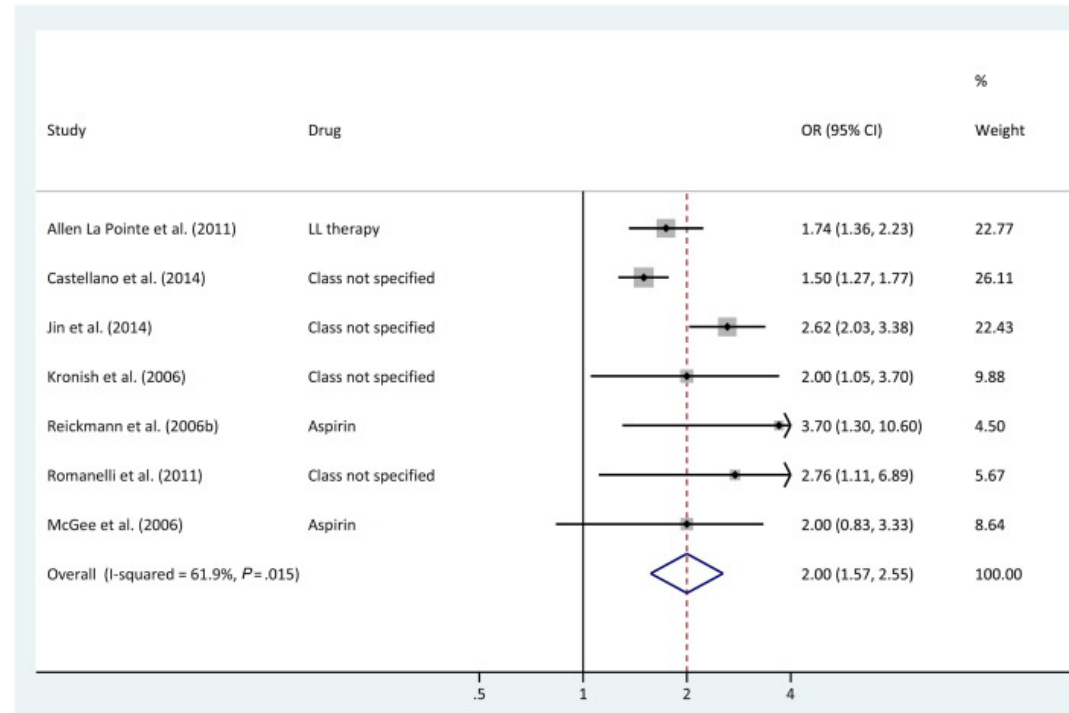
Point 8



Depression is associated with a higher risk of hospitalisation, longer length of stay and a higher re-admission risk.

Patients with mental disorders reported more medical visits to GP, hospitalization with somatic diseases, and used more medical resources

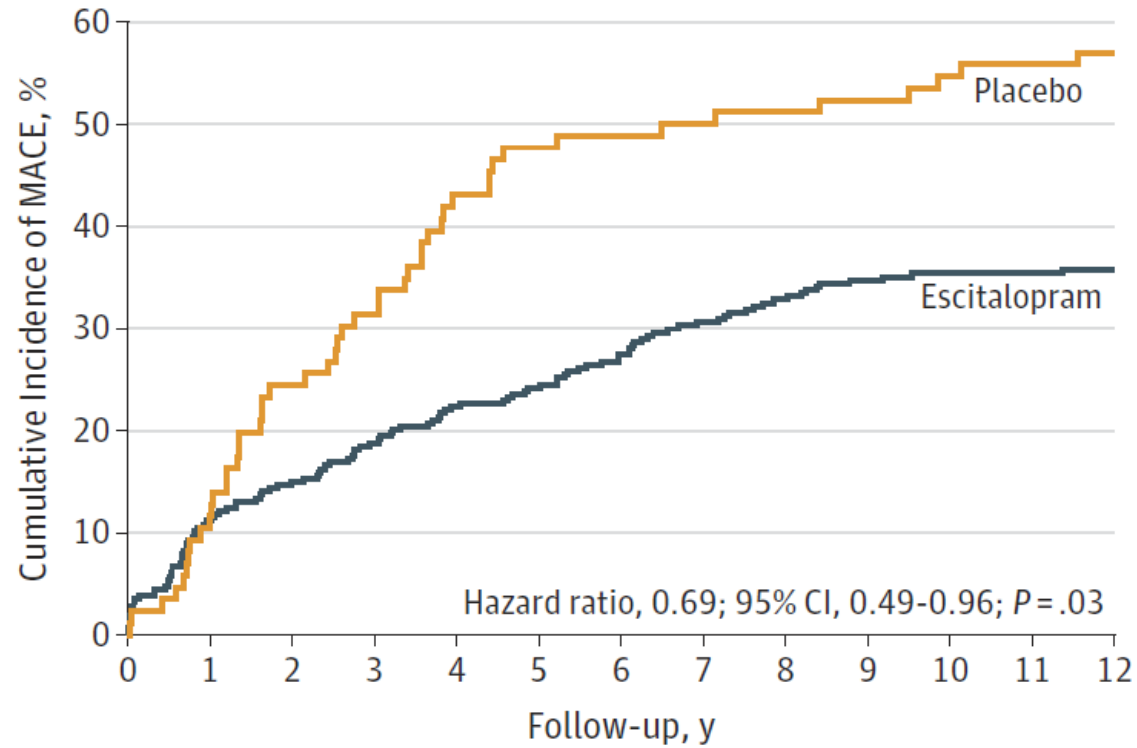
Point 9



Depression is associated with medication adherence following acute coronary syndrome.

Mental disorders reduce patients' satisfaction with treatment and adherence to treatment

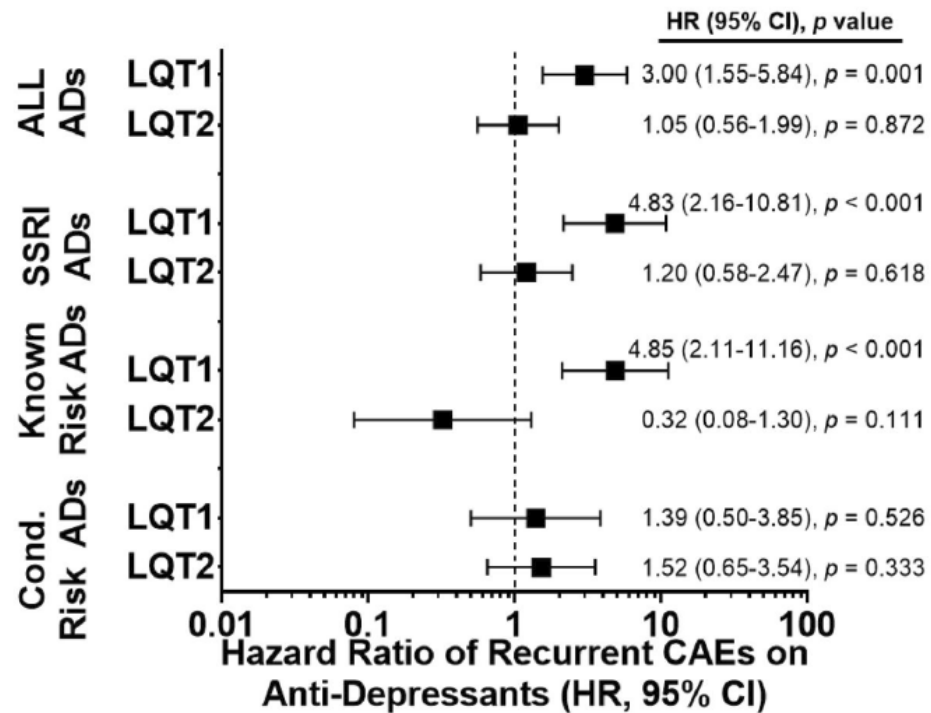
Point 10



Among patients with depression following recent acute coronary syndrome, treatment with escitalopram compared with placebo resulted in a lower risk of major adverse cardiac events (EsDEPACS)

Treatment of depression can reduce the frequency of somatic events and hospitalizations

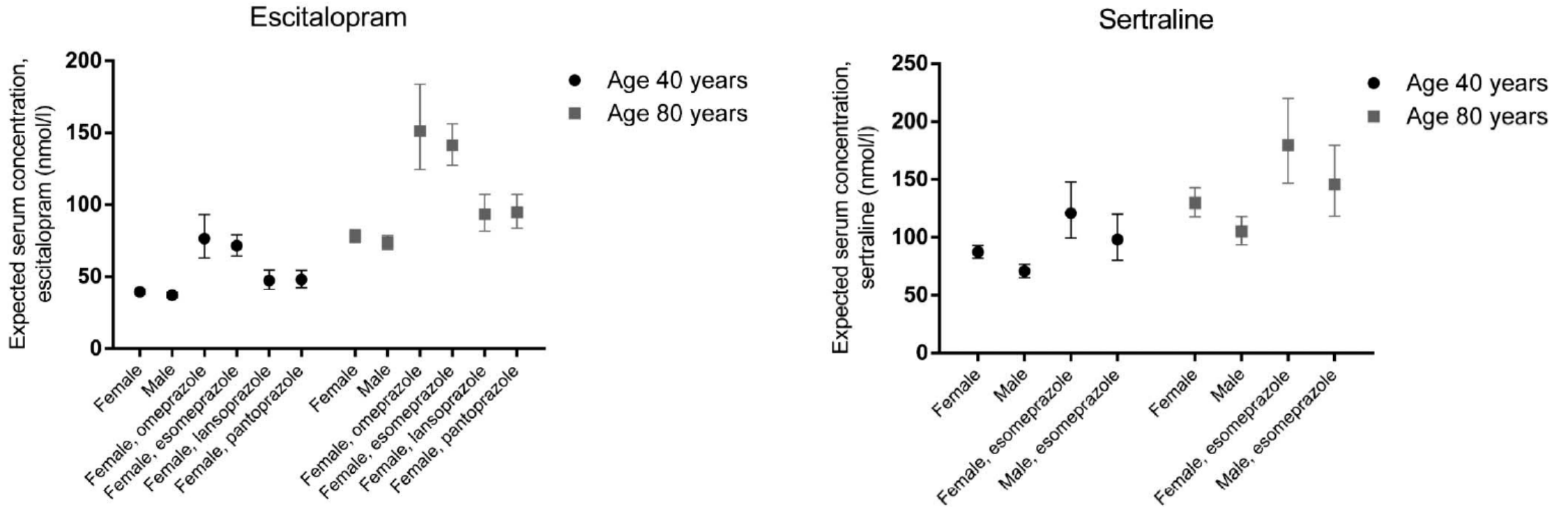
Point 11



The risk of recurrent cardiac arrhythmic events associated with time-dependent antidepressant drugs is higher in patients with long QT syndrome type 1

Psychotropic drugs can affect on severity of somatic diseases

Point 12



The effect of comedication with proton pump inhibitors on the serum concentration of Selective serotonin reuptake inhibitors is more pronounced for omeprazole and esomeprazole than for lansoprazole and pantoprazole, and escitalopram is affected to a greater extent than sertraline.

Physical diseases can reduce the effect of mental illness treatment, and treatment of somatic diseases can affect mental state and psychotropic therapy

**Asian College of
Psychosomatic Medicine**

**Baikal Psychosomatic
Association**

