

# Report says cardiologists need guidelines for diagnosing, treating depression

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*Source:* <http://sci.tech-archive.net/Archive/sci.med.cardiology/2006-09/msg00290.html>

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  - *Date:* Fri, 22 Sep 2006 06:20:00 -0400
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<http://www.eurekaalert.org/>

Public release date: 22-Sep-2006

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Report says cardiologists need guidelines for diagnosing, treating depression

NHLBI Working Group calls for more research on link between depression, cardiovascular problems

NEW YORK, September 22, 2006 -- Cardiologists know that treating depression likely will benefit patients complaining of cardiovascular problems, but lack the guidance to properly diagnose or recommend treatment for depression, according to a report out today from a National Heart, Lung and Blood Institute (NHLBI) Working Group, according to a report out today from a National Heart, Lung and Blood Institute (NHLBI) Working Group. The paper was published simultaneously in "Annals of Behavioral Medicine" and "Psychosomatic Medicine." According to the report, up to 20 percent of patients with heart disease meet the American Psychiatric Association's criteria for major depression, and identifying better treatments for depression in this population could lead to improved medical, financial and psychosocial outcomes.

"One major aspect of the problem is that cardiologists don't have a standard assessment to diagnose depression," said Karina Davidson, Ph.D., chair of the NHLBI Working Group and co-director of the Behavioral Cardiovascular Health and Hypertension Center at Columbia University Medical Center. "It's important that research in this area move forward so cardiologists can confidently address the issue of depression, knowing that their patients are getting the most appropriate and effective therapy."

Dr. Davidson pointed out that antidepressant prescription use in heart attack patients is steadily rising, but in the absence of a large

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clinical trial that would clearly indicate the best way to treat depression in these cases.

There are a number of ways treating depression may impact cardiovascular health. Antidepressants may normalize platelet reactivity, which is implicated in leading to heart attacks. Also, depressed patients tend not to follow medical recommendations, so treating depression may influence them to take prescribed medications or follow other guidance from doctors.

Although depressed patients might be more likely to have cardiovascular risk factors such as increased weight and a sedentary lifestyle, many studies reviewed by the NHLBI Working Group controlled for those factors and still found a relationship between depression and cardiovascular health, meaning the link is independent of those risk factors.

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The NHLBI Working Group included an interdisciplinary team of cardiologists, psychiatrists, epidemiologists and clinical researchers from Columbia University Medical Center, Mount Sinai School of Medicine, University of Pittsburgh School of Medicine, Duke University Medical Center, University of Pennsylvania School of Medicine, University of California San Francisco, Harvard University, and many other major institutions.

Columbia University Medical Center provides international leadership in pre-clinical and clinical research, in medical and health sciences education, and in patient care. The medical center trains future leaders and includes the dedicated work of many physicians, scientists, nurses, dentists, and public health professionals at the College of Physicians & Surgeons, the College of Dental Medicine, the School of Nursing, the Mailman School of Public Health, the biomedical departments of the Graduate School of Arts and Sciences, and allied research centers and institutions.

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