

Depressive symptoms tied to doubled risk for Crohn's

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Depressive symptoms are associated with a two-fold increase in risk of Crohn's disease but not ulcerative colitis, according to research published in the January issue of *Clinical Gastroenterology and Hepatology*.

(HealthDay)—Depressive symptoms are associated with a two-fold increase in risk of Crohn's disease (CD) but not ulcerative colitis (UC), according to research published in the January issue of *Clinical Gastroenterology and Hepatology*.

Ashwin N. Ananthakrishnan, M.B.B.S., M.P.H., of Massachusetts General Hospital and Harvard Medical School in Boston, and colleagues prospectively collected data from 152,461 women who participated in either the Nurses' Health Study I or II. The authors sought to determine whether there is a link between depressive symptoms and the incidence of CD and UC.

A total of 170 cases of CD and 203 cases of UC were reported while following this patient population. The researchers found that women with recent depressive symptoms, defined as within the past four years, were 2.39-fold more likely to be diagnosed with CD. Women with depressive symptoms at baseline were 1.62-fold (95 percent confidence interval, 0.94 to 2.77) more likely to have CD. However, no association was found between either baseline or recent depressive symptoms and an increased risk of UC.

"We observed that depressive symptoms are associated with a two-fold increase in risk of CD but not UC. Although both recent (within four years) and remote (baseline) assessments of depression appear to influence disease risk, the association with recent depressive symptoms appeared more prominent," the authors write. "Our findings support the potential importance of a biopsychosocial model in the pathogenesis of CD and suggest the need for further studies on the effect of depression and stress on immune function and regulation."

Two authors disclosed <u>financial ties</u> to pharmaceutical and health policy companies.

More information: Abstract

Full Text

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