



# Quality of Life and Mood Disorders in Mild to Moderate Stroke Survivors: A Cross-Sectional Study

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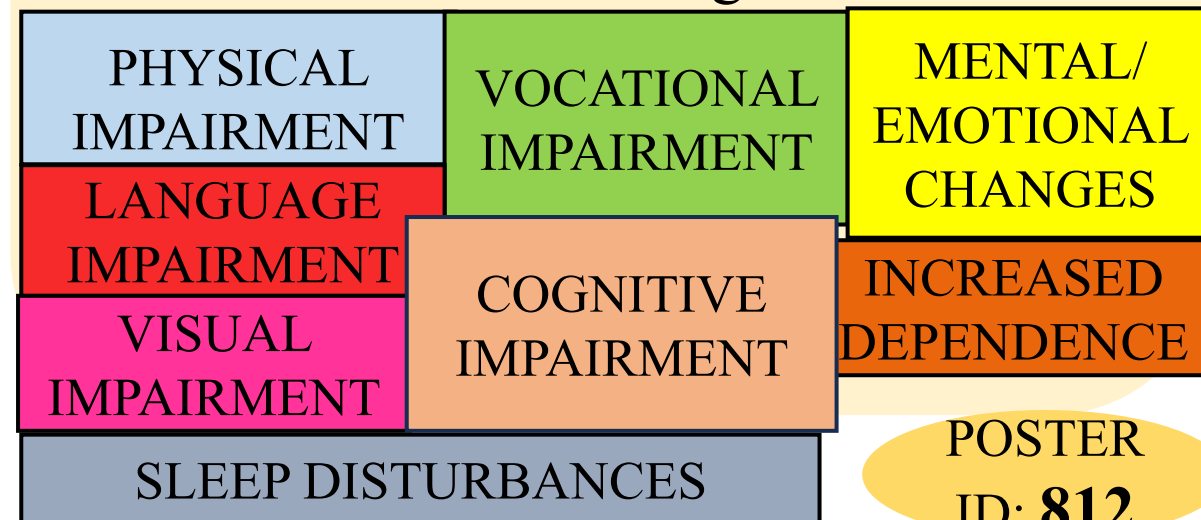
## INTRODUCTION

- **INCIDENCE** of Stroke **119 to 145** per lakh population annually.
- According to Global Burden of Disease (1990-2019), stroke remains **LEADING CAUSE OF DEATH AND DALYs** in India.
- **46** strokes per 100,000 people in **19-49 age group** (>60% were employed and earning members).
- Rates of young stroke are way **HIGHER** compared to the Western Population.
- Co-occurring stroke and mood disorders have been **associated with stroke recurrence and mortality**.



DISABILITY  $\neq$  PHYSICAL IMPAIRMENT

Assessment of the **Quality of Life** is as important to fully analyse the Post stroke level of Disability. There is a lack of adequate literature about QoL and mood disorders in Indian setting.



POSTER  
ID: **812**

## DESIGN AND METHODS

In this **Prospective, Cross-Sectional Study**, 127 patients of mild-moderate stroke within 7 days of onset were subjected to the:

- Stroke Specific-Quality of Life (SS-QOL)
- Generalized Anxiety Disorder (GAD7)
- Hospital Anxiety and Depression (HADS)
- Sleep Quality Scale (SQS)
- Barthel Index
- NIHSS Scale
- mRS score

## RESULTS

	MEAN
SS-QOL (5-245)	<b>119.59</b>
Sleep Quality(0-84)	<b>29.86</b>
Barthel Index(0-100)	<b>15.9</b>

**43%**(n=55) patients had **moderate-severe anxiety** 😞

**78%** (n=99) patients had **depression** (GAD>10) 😞

- Patients with higher **NIHSS** had **poorer QoL**( $p<0.001$ ), **depression** ( $p=0.34$ ) and **poor sleep** ( $p=0.032$ ).
- **More disabled** patients( $BI<20$ ) had higher chances to develop **depression** ( $p<0.001$ ), **poor QoL** ( $p<0.001$ ) and **sleep problems** ( $p=0.045$ ).
- **Frontal lobe** involvement **increased risk** ( $RR=2.014$ ) of **poor QoL**.
- **Males** reported **higher risk**( $RR=1.226$ ) of developing **depression** compared to females.

## RESULTS AND DISCUSSION

- Patients with **left-sided involvement** had **1.7 times higher risk** of developing **poor QoL**.
- **Speech disturbance increased risk** of developing **poor QoL**(RR=2.986), **depression**(RR=1.364) and **poor sleep**(RR=1.481).
- **ICH score > 2**(p=0.014) and haemorrhage **volume > 19mL**(p=0.002) was also associated with **poor QoL**.
- Higher levels of **anxiety** were seen in **overweight/obese** patients(p=0.016), **supratentorial involvement**(p=0.046), **cortical involvement**(p=0.002) and in **40-60 years of age**(p=0.043).
- Patients with the **dominant participation** reported **more depression**(p=0.001) and had **poor QoL**(p=0.002).

## CONCLUSIONS

- Present results shows that a large number of stroke patients suffer from mood disorders.
- The **overall QoL is mostly neglected** while treating stroke patients, especially in low to middle-income countries.
- It is **imperative to address treatment** of these conditions along with the standard treatment and rehabilitation for stroke to ensure optimal recovery of our patients.
- Further **long-term studies** are required to look for QoL of patients.

Thank you for your precious time; For any query/ discussions you can mail on : [sahrizlko@gmail.com](mailto:sahrizlko@gmail.com)

