European Respiratory Society
Annual Congress 2013

Abstract Number: 610

Publication Number: P2170

Abstract Group: 1.1. Clinical Problems

Keyword 1: COPD - diagnosis **Keyword 2:** COPD - management **Keyword 3:** No keyword

Title: Peculiar properties of sleep structure and impact of antidepressive therapy in COPD patients with concomitant depressive episode

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Body: Aim of study: to study the influence of agomelatin on sleep stages in COPD patients with depressive episode (DE). Materials and methods: 11 COPD patients with clinically diagnosed by psychiatrist DE (PHQ-9 score > 15), 4 female and 7 male, mean age (66,9 ± 2,7) years received agomelatin 25 mg 1 hour before sleep OD during 3 month on the background of standard COPD therapy according severity. Patients were assessed with polysomnography (PSG) at baseline, 2 weeks and 3 month of studied treatment. Results: all patients initially had normal AHI (1,6 ± 0,3) per hour. REM stage was abnormal at baseline - increased (31,4 ± 3,2)% of total sleep time (TST) vs normal duration of REM stage in healthy population (NINDS). 3rd and 4th sleep stages were significantly decreased at baseline (4,6 ± 7,1)% TST. After 2 weeks of therapy improvement of deep sleep stages was noted – (9,2 ± 2,0)% TST ($p < 0,05$ vs baseline) and after 3 month - (9,6±1,4), $p < 0,05$ vs baseline. Tendency to the improvement of REM stage was noted also after 2 weeks of treatment– it decreased to (27,5 ± 3,0)%, and after 3 month - to (24,9±4,0) of TST, $p < 0,05$ vs baseline. Latency to REM stage (decreased at baseline - (51,5 ± 7,6) minutes vs normal duration of latency to REM stage, after 2 weeks increased to (67,5 ± 8,8) minutes with further improvement after 3 month to (79,0±9,6), $p < 0,05$ vs baseline. Sleep efficacy increased from (65,0 ± 6,1) to (78,2 ± 3,2), $p<0.01$. Conclusion: use of agomelatin in complex COPD therapy in patients with COPD and depressive episode improved sleep structure, that revealed in: tendency to the normalization of REM, deep sleep stages and sleep efficacy.