Abstract Group: 1.5. Diffuse Parenchymal Lung Disease

Keyword 1: Quality of life Keyword 2: Chronic disease Keyword 3: Interstitial lung disease

Title: A longitudinal study of anxiety and depression in idiopathic pulmonary fibrosis (IPF)

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Body: Background Anxiety and depression are prevalent in IPF. The longitudinal relationships between anxiety and depression and disease severity, progression and symptom burden are unknown. Aims To identify if the prevalence and severity of anxiety and depression in IPF is associated with disease severity and progression. Also, to observe whether changes in cough and breathlessness symptom severity are associated with changes in mental health. Methods A retrospective review of patients with IPF attending the Cardiff clinic between 2010 and 2012. Data was collected from two outpatient visits 12 months apart and included demographics, lung function parameters (FVC and TLco), hospital anxiety and depression score, Denver ILD breathlessness score and Leicester cough questionnaire. Results 37 patients were included (24 male, mean 12.1 months between appointments). The prevalence of depression increased from 24.3% at baseline to 43.6% at 12 months. The prevalence of anxiety fell from 40.5% to 35.1%. 12 patients (32%) had severe disease and 14 patients (38%) had progressive disease. Patients with severe or progressive disease were more likely to have an increase in anxiety (severe p=0.018, progressive p=0.008) and depression scores (severe p=0.008, progressive p=0.035) compared with those with mild or stable disease. An association was identified between worsening depression and increasing cough severity (p=0.008). Patients with worsening breathlessness had an increase in depression (p=0.012) and anxiety scores (p=0.034). Conclusions Anxiety and depression are highly prevalent in IPF and are associated with severe and progressive disease. Increasing symptom burden is associated with worsening mental health.