

CHRONIC PROSTATITIS AND DEPRESSIVE DISORDER: A THREE-YEAR POPULATION-BASED STUDY

Hypothesis / aims of study

Previous small cohort studies demonstrated chronic prostatitis (CP) was associated with reduced quality of life, impaired social or sexual activity, and depression. However, no nation-wide, prospective, population-based follow-up study to date has evaluated the relation between CP and the subsequent risk of depressive disorders.

This nationwide, population-based study aimed to prospectively examine the relationship between a history of CP and the risk of developing depressive disorders.

Study design, materials and methods

A total of 18,306 adult patients newly diagnosed as CP from 2001 to 2005 were recruited, together with 15,255 matched enrollee without a history of CP as a comparison cohort.

All patients were tracked for a three-year period from their index healthcare encounter to identify those who had a subsequent depressive disorder. The Cox proportional hazards models were carried out to compute the risk of depressive disorders between study and comparison cohorts, following adjustment for socio-demographic characteristics.

Results

Of a total of 18,306 patients, 163 (5.34 %) from the CP group and 494 (3.24 %) from the comparison group had a subsequent diagnosis of depressive disorder during the follow-up period. The stratified Cox proportional analysis shows that after adjusting after adjusting for, monthly income, geographic region and urbanization level of the community in which the patient resided, the increased depressive disorder risk of patients with CP persisted at about the same level as in the unadjusted analysis (hazard ratio, 1.68; 95% CI, 1.39 to 2.01; $p < 0.001$). Furthermore, we found that the difference is most significant in the younger group aged less than 30 years (hazard ratio, 2.60; 95% CI, 1.36 to 4.95; $p < 0.001$).

Limitation

Potentially confounding variables are not captured in claims data such as CP symptom severity, history of treatment procedure and physical inactivity, body weight, family history, cigarette smoking, alcohol consumption, and medications.

Concluding message

Our results suggest that an increased risk of depressive disorders at three-year follow-up in CP patients.

<i>Specify source of funding or grant</i>	none
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	NONE