## Effects of depressive symptoms on clinical outcomes, inflammatory markers and quality of life after a significant weight loss in a bariatric surgery sample. Carla Francés, Joana Nicolau, Luisa Ayala, Javier Julián, Aleksandra Speranskaya, Ivana Zubillaga, Rosmeri Rivera, Regina Fortuny, Lluís Masmiquel. Hospital Son Llatzer, Palma De Mallorca, Spain.

## **Background and aims**

Obesity is linked to a low-grade and chronic systemic inflammation that improves after a significant weight loss. In the same way, depressive disorder has been suggested to be associated with systemic inflammation up regulation. We aimed to explore whether, after a significant weight loss, the presence of depressive symptoms was associated with differences in terms of inflammatory markers and quality of life compared with individuals without significant depressive symptoms.

## **Material and methods**

Results

Sixty patients (78.3%<sup>2</sup>, age 46.35±9.89 and months since BS 46.28±18.1) who underwent BS, with a minimum follow up of 18 months, were evaluated cross-sectionally. Initial and current BMI, comorbidity, sociodemographic and biochemical parameters were recorded. For the screening of depression, the Beck Depression Inventory (BDI) was administered. A score in BDI ≥16 was considered as positive for significant depression.

	Screening negative for	Screening positive for	р		
	depression	depression	٣	Platelets (x10^9/L)	
	(n= 50)	(n=10)		Eythrocyte sedimentation rate	
Gender (male/female) (n)	12/38	1/9	NS	(mm)	
				Fibrinogen (mg/dL)	
Age (years)	45.5±9.4	50.7±11.5	NS	Ultrasensitive CRP (mg/dl)	
Time since BS (months)	45.1±18.9	53.4±14.1	NS	Ferritin (ng/ml)	
Initial BMI (kg/m <sup>2</sup> )	48.4±7.6	48.1±7.2	NS	Plasma glucose (mg/dl)	
Current BMI (kg/m <sup>2</sup> )	33.5±5.4	34.6±9.5	NS	HbA1c (%)	
Desired weight (kg)	79.51±12.2	62.5±22.91	p=0.001	Prealbumin(mg/dl)	
Weight regain (%)	32	70	p=0.024	Total cholesterol (mg/dl)	
Total kilocalories per day	1350±322	1273±311	NS	LDL-cholesterol (mg/dl)	
				HDL-cholesterol (mg/dl)	
% daily carbohydrates	42.7±9.2	39.3±14.5	NS	Triglycerides (mg/dl)	
% daily lipids	37.5±7.5	42.8±10.8	NS	Calcium (mg/dl)	
% daily proteins	19.2±17.3	17.3±4.2	NS	250DVitD (ng/ml)	
Alcohol intake (%)	0.42±1.4	0.41±2.6	NS	Iron (ug/dl)	
Dumping syndrome (%)	20	40	NS	Folate (ng/ml)	
Steatorrhea (%)	6	30	p= 0.021	Cianocobalamin(pg/ml)	
Minutes used for MAIN	19.5±11.7	13±7.9	NS	Leptin (ng/ml)	Γ
meals intake				TSH (mcU/mL)	
Exercise (%)	38	70	p=0.038	Cortisol (mcg/dL)	

	Screening negative for depression (n= 50)	Screening positive for depression (n= 10)	р
Platelets (x10^9/L)	231,700±46,794	319,300±15,212	p= 0.001
ythrocyte sedimentation rate	16.64±10.29	24.7±11.28	p=0.03
(mm)			
Fibrinogen (mg/dL)	406±66	486±107	p=0.003
Ultrasensitive CRP (mg/dl)	0.24±0.26	0.96±1.84	p=0.008
Ferritin (ng/ml)	33.74±44.12	105.5±179.7	p=0.014
Plasma glucose (mg/dl)	89±17.4	111.6±43.3	p=0.007
HbA1c (%)	5.6±0.9	5.7±0.9	NS
Prealbumin(mg/dl)	22.5±4.9	18.2±4.7	NS
Total cholesterol (mg/dl)	172±30.2	183±41.3	NS
LDL-cholesterol (mg/dl)	95.7±26.6	105.3±35.5	NS
HDL-cholesterol (mg/dl)	57±12.5	54.2±17.5	NS
Triglycerides (mg/dl)	99.5±48.5	117.6±37.2	NS
Calcium (mg/dl)	9.1±0.45	9.1±0.35	NS
250DVitD (ng/ml)	25.74±9.5	17.76±12	p=0.024
Iron (ug/dl)	73.9±31.8	73.6±49.7	NS
Folate (ng/ml)	32.5±76.8	11.5±8.1	NS
Cianocobalamin(pg/ml)	292.8±187.4	280.6±130.9	NS
Leptin (ng/ml)	38.9±21	47.2±32.7	NS
TSH (mcU/mL)	2.4±1.4	2.5±1.6	NS
Cortisol (mcg/dL)	17±6.3	16.7±4.8	NS

р

	(n= 50)	(n= 10)	
Pre-surgical psychiatric comorbidities (%)	54	90	p=0.034
% subjects with non adherence to protocol	25	70	p= 0.009
General Health	73.23±20.1	45.9±23.86	p<0.0001
Physical functioning	91.44±10.9	70.5±30.4	p<0.0001
Role-physical	88.7±28.59	61±44.9	p=0.014
Role-emotional	85.83±24.19	38.33±45.85	p<0.0001
Social functioning	87.95±17.49	39.75±25.72	p<0.0001
Mental health	63.92±20.34	26.8±14.61	p<0.0001
Bodily pain	70.1±23.9	64.4±26.9	NS
Vitality	69±18.62	37±28.59	p<0.0001
Perception of health	7.41±1.44	4.5±2.37	p<0.0001

## **Conclusions**

Despite a significant weight loss, inflammatory markers are greater and quality of life lower when associated with depressive symptoms.

