Depression among adults with diabetes in Jordan: risk factors and relationship to blood sugar control☆

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Objectives: The aims of this study were to estimate the prevalence of undiagnosed depression among adults with diabetes mellitus in Jordan and to determine the factors that may indicate the presence of depression with diabetes.

Methods: A systemic random sample of 649 type 1 and type 2 diabetic patients aged 18–75 years was selected during the period from July 2009 to January 2010. A prestructured questionnaire was used for collecting the information about sociodemographic data and clinical characteristics. Depression was evaluated using the Patients' Health Questionnaire-8 (PHQ-8). A PHQ-8 score≥ 10 has been recommended as a cutoff point for depression. Self-care management behaviors and barrier to adherence were collected. Weights and heights were measured. Glycated hemoglobin

was abstracted from each patient directly after the interview.

Result: Of the 649, 128 (19.7) have depression according to the PHQ-8 scores. According to the multivariate analysis, females are more likely to develop depression than males with (odds ratio OR, 1.91; P= 0.001) and low-educated people versus educated people (OR, 3.09;P≤.002). Being on insulin treatment also has a significant association with depression (OR, 3.31;P=.001). Not following eating plans as recommended by dietitians, lacking self-monitoring blood glucose and increased barriers to adherence scale scores were also associated with depression among the subjects with diabetes.

  Conclusion: The prevalence of depression among Jordanian subjects with type 1 and type 2 diabetes is high compared with some developed countries. This was associated with gender, educational level, insulin treatment, low self-management behaviors and increased barriers to adherence. This result shows the urgent early detection and management of depression.