

World Congress on ENDOCRINE AND DIABETES

August 05, 2021 | Webinar

Costs associated with depression and obesity among cardiovascular patients: medical expenditure panel survey analysis**Felipe S. Tapias***University of Medical Sciences of Santa Casa de São Paulo, Brazil*

Statement of the problem: The financial burden of depression accounted for \$ 210.5 billion in 2010 in the US alone. While depression-associated comorbidities contribute over 60% to this amount, the cost of cardiovascular disease treatment attributed to metabolic syndrome and depression are scarce in the literature. To fill this gap, we evaluated the interplay between depression and obesity on total expenses with cardiovascular conditions using data from the US Medical Expenditure Panel Survey (MEPS) database in the 1996-2017 period.

Methodology & Theoretical Orientation: We categorized adult cardiovascular subjects from the MEPS database using the International Classification of Diseases ICD-9-CM and ICD-10 codes and the Patient Health Questionnaire-2 (PHQ-2) depression screening tool. Our sample encompassed 96,697 cardiovascular patients aged 18 years and older, with a body mass index (BMI) between 18.5 and 60, from a weighted sample of 938,835,031 individuals. The total annual healthcare expenditures evaluated included dental, emergency room, hospital outpatient, hospital inpatient, office-based, prescription, and home health care expenses. The outcomes were correlated with four response categories: no depression, unrecognized depression, asymptomatic depression, and symptomatic depression.

Findings: Obese individuals were more affected by asymptomatic and symptomatic depression ($p < 0.001$). Total expenditure was highest among symptomatic depression individuals (17,536) and obese (9871) with cardiovascular disease. Expenditures were significantly higher among symptomatic depression individuals than those without depression ($p < 0.001$), except for dental costs ($p = 0.899$). All healthcare expenditures associated with obesity were higher compared to individuals with normal BMI with $p < 0.001$, except for emergency and home healthcare costs.

Conclusion & Significance: Obesity and depression raised expenses with cardiovascular disease. As we used a nationally representative sample, we conclude that investments in screening and management of depression and obesity can help reduce the economic burden with cardiovascular disease treatment in the US.

Biography

Felipe Saia Tapias is a medical doctor with a Master's degree in Health Sciences from the University of Medical Sciences of Santa Casa de São Paulo, Brazil. He is currently the Mental Health Coordinator of the municipality of Osasco, in the state of São Paulo.

felipetapias89@gmail.com