



**Service Priorities and Programmes**  
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**Association between Depression and Functional Impairment in the Chinese Elderly Patients with Stroke in General Outpatient Clinics of Kowloon Central Cluster: a cross-sectional study**

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**Introduction**

Post-stroke depression (PSD) is not uncommon. However, they are usually under-recognized in primary care. Locally, there is a paucity of study examining the post-stroke depression and its associated factors in general outpatient clinics (GOPC).

**Objectives**

It is to explore the prevalence of PSD and the association between depression and functional impairment in patients with stroke in GOPC. It also attempts to identify other possible associated factors.

**Methodology**

A cross-sectional design with consecutive sampling was used. The study was conducted in the GOPC of Kowloon Central Cluster (KCC) from 1st December 2011 to 31st March 2012. The inclusion criteria included: 1.Chinese elderly patients at age of 65 or above 2.known diagnosis of stroke 3.followed up in GOPC in KCC 4.able to understand and communicate with Cantonese. The patients were excluded from the study if they had: 1.history of pre-stroke depression 2.significant cognitive impairment, and unstable mental or physical condition 3.communication problem due to severely hearing impairment, dysphasia or other causes. Data were collected through face-to-face interviews using a standardized structured questionnaire and the validated instruments (Geriatric Depression Scale and Barthel Index). The demographic, psychological and physical variables were measured. The Chinese version of the Geriatric Depression Scale-15 item version (GDS) was used to measure depression. The Barthel Index (BI) was used to measure the severity of functional impairment. Chi-square test was used to evaluate their association.

## **Result**

150 post-stroke elderly participants were recruited with 66 males (50.7%) and 74 females (49.3%). The age ranged from 65 to 96 with the mean 76.8 (SD=6.2). The prevalence of PSD in this study was 27.3%. This study found that the PSD in this setting was associated with functional impairment ( $p<0.001$ ). Other associated factors included age ( $p=0.004$ ), financial status ( $p<0.001$ ), living condition ( $p<0.001$ ), community support service in use ( $p=0.045$ ), hobby or interest ( $p<0.001$ ), satisfaction level on financial status ( $p<0.001$ ), family support ( $p<0.001$ ) and health ( $p<0.001$ ), mobility ( $p<0.001$ ), comorbidities ( $p=0.015$ ) and use of concomitant drugs ( $p=0.013$ ). With understanding the associated factors, alertness to the associated factors especially the functional impairment enhances early recognition and management of PSD in the primary setting.