

Proposal of Oral presentation:

“Depression beyond the symptoms: Its impact on functioning according to the biopsychosocial model of the ICF”

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Aims: Our main objective was to investigate the profile of disability and functioning across different domains in unipolar depression according to the biopsychosocial model of the WHO’s International Classification of Functioning, Disability and Health (ICF; WHO, 2001). Secondly, the association of social and clinical characteristics with levels of disability was investigated.

Background: Unipolar depression is one of the mayor contributors to burden of diseases world wide (Murray y López, 1996). Functional status is an outcome measure of relevance that may be independent of depressive symptomatology. Although there are several scales to assess functioning, an international and common framework to describe the functional profile of the individuals is needed. The new ICF framework and its related instruments (i.e. the ICF-Checklist and the WHODAS-II) may be useful tools to describe the interaction between health status patients’ and the environmental factors involved in their psychosocial functioning both in clinical and research settings. Nevertheless no studies to date have tested these issues.

Methods: The World Health Organization Disability Assessment Schedule II (WHODAS-II) was administered to 50 patients with a diagnosis of major depressive episode (ICD-10) attended in primary care settings. Data on sociodemographic characteristics, socio-economic status and clinical variables were gathered.

Results: Scores on the WHODAS-II were significantly and independently associated with the severity of the depressive symptoms, physical illness and worse work functioning. There was no association between level of disability and socio-demographic characteristics.

Conclusions: The WHODAS-II seems to be a useful instrument to assess levels of functioning and disability in depressive patients across different domains. Further research is required to explore potential predictors of disability in unipolar depression and its stability during remitted states of the illness in concordance with the ICF model.

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