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Workshop

“Health and well-being”

Title

Depressive mood trajectories following the onset of a physical chronic health condition

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Abstract

Background: Due to a global population aging, the prevalence of physical Chronic Health Conditions (CHC) is increasing. The onset of a CHC can have a severe impact on individuals’ life and affect well-being and mental health. The goal of this study was to investigate depressive mood trajectories from one year before to four years after onset of CHC. Its specific objectives are to identify the number and shape of longitudinal depressive mood trajectories and to test biopsychosocial factors predicting these trajectories.

Method: Two samples were drawn from the Swiss Household Panel dataset (SHP): (1) a CHC sample of 361 people from the 2013 wave who indicated the onset of a CHC between 2009 and 2011 and (2) a 1 to 1 matched comparison sample of individuals from the 2013 wave who never indicated any CHC, illness, or accident. Latent growth mixture modelling was used to identify trajectories of self-reported depressive mood over six years: from one year before to four years after the CHC onset (SHP waves 2007-2015). Biopsychosocial factors predicting trajectories were then tested using multinomial logistic regression.

Results: Four heterogeneous trajectories of depressive mood have been identified in the CHC sample. The resilience trajectory (53.9%) is characterized by stable low depressive mood before and following the onset. The chronic trajectory (22.2%) describes a pattern of persistently high depressive mood irrespective of CHC onset. The delayed trajectory (15.0%) shows a pattern of low depressive mood at baseline followed by a progressive increase of depressive mood starting one year after the onset. The recovery trajectory (8.9%) displays an increase of depressive mood around the onset followed by a gradual decline. In the comparison sample, two trajectories were identified: a stable low depressive mood (90%) and a chronic elevated depressive mood (10%). Multinomial logistic regression shows that the protective factors increasing the probability to belong to the resilient trajectory in the CHC sample are: higher emotional stability, higher relationship satisfaction, and being male.

Discussion: The study shows that almost the half of the CHC sample (46.1%) follows more vulnerable trajectories showing elevated levels of depressive mood at least over two years following CHC. These findings highlight that vulnerable trajectories are more common than expected, based on past literature. Analysis of the comparison sample trajectories indicate that only 10% of individuals show elevated level of depressive mood in a relatively healthy population. Furthermore, this study identified, protective factors increasing the probability to show a resilient trajectory after the onset of a CHC. Among them, relationship satisfaction is an avenues for targeted interventions to alleviate the psychological impact of a CHC.