Real world versus Virtual world. Economical crisis and Recovery

P. Flores*, S. Rosado*, A. Mané*, O. Orejas*, A. Roquer**, A. Merino*, C. Masferrer*
*Institut de Neuropsiquiatria I Addiccions. Parc de Salud Mar, ** Associació EMILIA. Barcelona

Introduction

The economical crisis in Spain and Europe has led to decrease in support with the reduction of social services (housing, labour, education, social networks) negatively affecting health and well-being of citizens. In this work of the Outpatient and Subacute Unit of the Hospital del Mar in Barcelona, we show a new tendency in the profile of our patients with depression. These patients sought care and were referred to our services.

Aims

- To study the female population with the diagnosis of depression referred to the partial stay unit of the Centre Forum in the last 8 years.
- To describe the differential characteristics of the group in the last two years.

Methods

The following variables were registered: age, evolution of the symptoms lasting for more than a year, working status, social help, level of education and professional career.

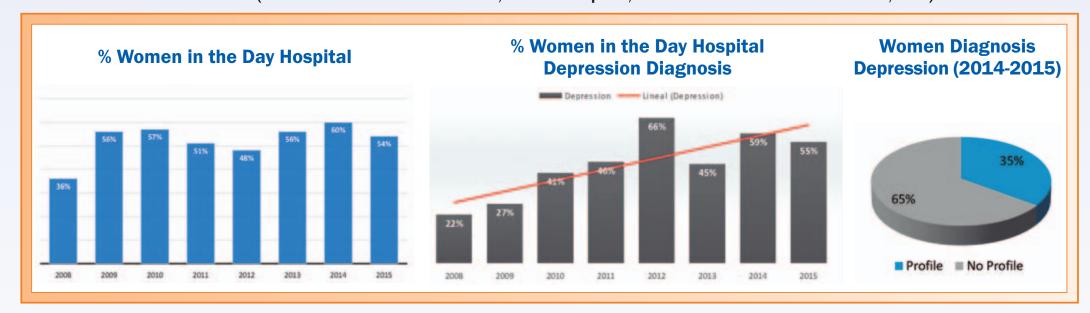
Results

In 2008, 22% of users were women with the diagnosis of depression. In 2012 it was 66%, and in 2015, 55%.

Of the total amount of female users with this diagnosis, 35% were women older than fifty, suffering pain and organic concurrent processes, with the main diagnosis of recurrent depression.

These users have a past record of dysthymic disorder, adaptative dirsorder and anxiety periods, and mostly fall into a type B personality cluster. At the moment, these users who are resistant or are less respondent to conventional pharmacologic treatment and psychotherapies, ad hoc, visit our unit for intensive treatment.

Alongside the clinical profile, we encounter population with socio-economic instability, long periods of sick leave, and less education and labour skills (women that are care-takers, housekeepers, subcontractors in call centres, etc.).



Conclusions

- Health care providers must not solely focus on the physical or psychopathologic symptoms, but also extend their attention to other extenuating factors that may hamper and negatively affect health and recovery.
- The recovery and improvement of the status of many women depends on the anticipation of being monetary awarded and hardship support.
- It is important to open a debate about what we are treating in our Health Care Centres. It has been widely documented that poverty is a mental health risk factor and hampers the recovery process.

