

# Preliminary study of emotional blunting in patients suffering from major depressive disorder

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## INTRODUCTION

Emotional blunting is a condition of reduced emotional reactivity in an individual. It manifests as a failure to express feelings either verbally or non-verbally, especially when talking about issues that would normally be expected to engage the emotions. Depression has been consistently associated with changes in emotion perception and emotion processing deficits [1],[2]. However, these symptoms are more commonly associated to a side-effect of treatment with antidepressants [3]. There are currently very few studies exploring emotional blunting [4], highlighting a positive correlation between OQuESA and HAD (Hospital Anxiety and Depression) scores. To the best of our knowledge, this is the first study developed in depressed outpatients attending a private psychiatrist consultation.

## METHODS

**Participants:** Participants were patients aged  $\geq 18$  years old diagnosed with a major depressive disorder according to DSM-5 criteria and attending private psychiatric consultations.

**Evaluations:** The Oxford Questionnaire on the Emotional Side-effects of Antidepressants (OQuESA) was used as a self-report measure of the symptoms of emotional blunting in patients with depression (5). The full questionnaire comprises three sections: section 1 explores the current experience of emotional blunting; section 2 relates the current experience of emotional blunting with the patient's recollection of their normal emotional state prior to their depression; and section 3 assesses the patient's perception of a link between the antidepressant treatment and the experience of emotional blunting, and whether this has affected compliance with treatment. The 9-item Patient Health Questionnaire (PHQ-9) was used as a self-administered assessment to monitor severity of symptoms.

**Statistical Analysis:** Descriptive statistics using mean $\pm$ SD were provided for quantitative variables, and numbers and percentages of participants for qualitative variables. Correlations were based on Pearson correlation coefficient (r) with a type I error  $\alpha$  at 5% (bilateral situation). All analyses were performed using SPSS v.20 Software.

## RESULTS

This is a preliminary study including 26 patients diagnosed with major depressive disorder. Mean OQuESA score was 53,88 (SD 13,75) and mean PHQ-9 score was 10,88 (SD 5,37), corresponding to moderate intensity of depressive symptoms. There was no difference in emotional blunting symptoms according to antidepressant prescribed ( $r=-0,132$ ,  $p>0,05$ ). There was a statistically significant positive correlation between total blunting score and severity of depression according to the PHQ-9, although the correlation coefficient showed a weak association ( $r=0,367$ ;  $p<0,036$ ). Among patients with emotional blunting, reduction in positive emotions was the only sub-scale statistically associated to the severity of depressive symptoms ( $r=0,498$ ;  $p<0,011$ ). Section 3, corresponding to the extent to which participants attribute their emotional difficulties to their antidepressant, was negative in most of the patients in our sample (mean 9,48; SD 6,69).

Figure 1: Pearson Correlation between PHQ-9 and ODQ Total score

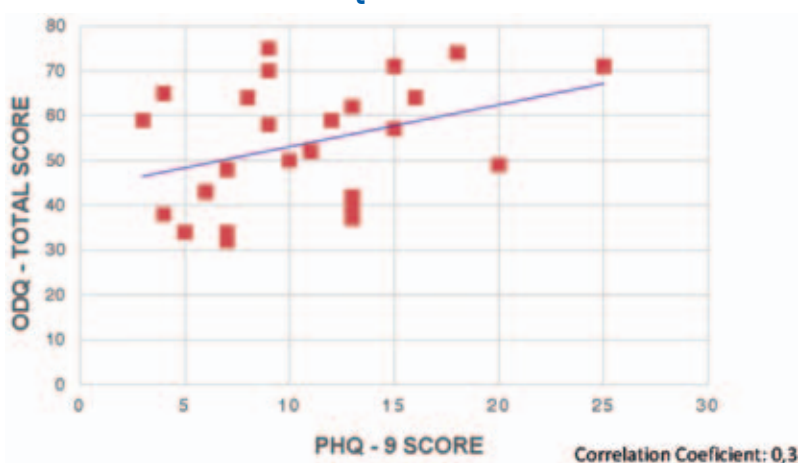


Table 1: ODQ subscales' Pearson correlation coefficients to severity of depression

|    | Correlation coefficient | p-value |
|----|-------------------------|---------|
| GR | 0,132                   | 0,53    |
| RP | 0,498                   | 0,01    |
| ED | -0,059                  | 0,78    |
| NC | 0,376                   | 0,06    |

\* GR: General Reduction in emotions; RP: Reduction in Positive emotions; ED: Emotional Detachment from others; NC: Not Caring

## CONCLUSIONS

Emotional blunting is reported by nearly all depressed patients in our sample and can not only be attributed to a side-effect of antidepressant treatment, but also as a symptom of depression and a measure of severity. There are no differences among different antidepressants prescribed, although the modest size of the sample may have limited us in the detection of differences between antidepressants.

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