

For the Patient

The full report is titled: “Anxiety and depression in adults with primary immunodeficiency: How much do these patients experience and how much do they attribute to their primary immunodeficiency?” It is in the September–October 2016 issue of *Allergy Asthma Proceedings* (volume 37, pages 409 to 415). The authors are Heath J, Lehman E, Saunders E, and Craig T.

For the Patient is provided to physicians so that the patients can better understand the language of modern medicine.

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Anxiety and depression in adults with primary immunodeficiencies

Primary immunodeficiencies (PID) represent a heterogeneous group of rare inherited disorders of the immune system in which affected patients present with recurrent infections, autoimmune diseases, and allergic diseases, and an increased propensity for malignancy. In the United States, the overall prevalence of the PIDs is estimated to be 1 in 1200 persons, and >200 different PIDs have been described. Some affected patients are treated with immunoglobulin therapy administered either with intravenous immunoglobulin or with subcutaneous immunoglobulin therapy. There is evidence that the mental health of patients is negatively impacted by the PIDs and affected children have been shown to have an increased risk of anxiety and depressive symptoms. In a recent study, Dr. Heath and colleagues, from the Penn State University College of Medicine, Hershey, PA, assessed factors that can influence depression and anxiety in a group of adult patients with PIDs.

Who or What Was Proposed to be Studied?

The study population consisted of 33 patients with several types of PIDs (8 men and 25 women), with a mean age of 55 years. Of these 18 (54.55%) were receiving intravenous immunoglobulin and 15 (45.45%) were receiving subcutaneous immunoglobulin therapy.

How Was the Study Done?

Depressive and anxiety symptoms were measured by using validated study instruments and were correlated with disease activity or with either form of immunoglobulin therapy.

What Are the Limitations of the Proposed Study?

Because this was a retrospective pilot study, the results were subject to recall bias and small sample size.

What Are the Implications of the Study?

The results of the study confirm previous reports that individuals who receive self-administered subcutaneous immunoglobulin home therapy have higher mental health scores than those who receive intravenous immunoglobulin therapy administered by a nurse, which suggests that self-administration may confer greater disease control and patient self-confidence. Because many factors influence depression and anxiety, and may add to the disease burden, patients with PIDs should be assessed for factors that contribute to depression and anxiety. Appropriate treatment or referrals should be initiated. In this way, it is hoped that this study improves the quality of life and outcomes of patients afflicted with the PIDs. □