

POST-STROKE DEPRESSION

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Stroke is defined as a sudden loss of blood supply to the brain resulting in permanent tissue damage caused by thrombotic, embolic or hemorrhagic events. Post-stroke depression (PSD) occurs in a significant number of patients and is a significant complication of stroke, leading to greater disability as well as increased mortality. However, the most clinically important advances are in the treatment and prevention of PSD. Recent meta-analyses of randomized controlled trials for the treatment of PSD have demonstrated the efficacy of antidepressants. Similarly, randomized controlled trials for the prevention of PSD have shown that antidepressants significantly decrease the incidence of PSD compared to placebo. Early antidepressant treatment of PSD appears to improve both physical and cognitive recovery after stroke and may increase survival up to 10 years after stroke. Progress has also been made in understanding the pathophysiology of PSD. Inflammatory processes could be associated with the appearance of at least some depressive symptoms. Additionally, genetic and epigenetic variations, white matter disease, cerebrovascular dysregulation, altered neuroplasticity, and changes in glutamate neurotransmission could be relevant etiologic factors. Further elucidation of the mechanism of PSD may ultimately lead to specific targeted treatments.

