

Depressive symptoms in the early phase post-stroke: neuro-anatomical and neuropsychological correlates.
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Background and purpose. Information about the association between post-stroke depression (PSD) and characteristics of the stroke lesion is controversial. Also, information about specific neuropsychological deficits and PSD is lacking. The aim of the present study was to examine neuro-anatomical and neuropsychological correlates of depressive symptoms in the early phase after stroke.

Methods. We studied 126 out of 183 consecutive patients within three weeks after a first-ever symptomatic stroke. Severity of depression was assessed with the Montgomery Åsberg depression rating scale. Lesion location, lesion volume, extent of white matter lesions and silent infarcts were determined on CT or MRI. Functional outcome was measured with the Barthel index and the modified Rankin scale. Neuropsychological functioning was examined by means of a detailed neuropsychological examination covering six cognitive domains. **Results.** Of the included patients, 40% demonstrated mild and 12% moderate to severe depressive symptoms. Severity of depression was related to lesion volume ($p=0.008$), functional impairment (all $p<0.004$) and cognitive impairment ($p=0.005$). Memory, visuo-perception, and language were specifically impaired (all $p<0.05$), independent of lesion size. No relation was found between PSD and lesion location, white matter lesions, silent infarcts, age, education or gender.

Conclusions. Depressive symptoms in the early phase of stroke are common and are associated with lesion size, functional impairment and specific cognitive disorders.

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