

### **M43. COMORBID MEDICAL CONDITIONS IN INDIVIDUALS WITH MAJOR PSYCHIATRIC DISORDERS**

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**Background** People with major psychiatric disorders (MPD) (schizophrenia, bipolar disorder major, depressive disorder), particularly with mood disorders, have higher prevalence of comorbid medical conditions, such as obesity, diabetes and cardiovascular diseases. There are a limited number of cross-national studies on comorbid mental and medical conditions. Although, it is well documented that people with MPD have an excess mortality rates. About 60% of this excess mortality is due to medical conditions, being cardiovascular disease the primary cause. Comorbid mental and medical conditions are associated with substantial individual and societal economic cost.

The aim of this study is to examine the prevalence of medical conditions in people with MPD compare with a psychiatrically healthy control group.

**Methods** The sample is part of the PISMA-ep, a cross-sectional study of a representative sample of the Andalusian population (Spain). The sample included 1005 participants with diagnosis of a major psychiatric disorder and 3502 psychiatrically healthy controls. A standard medical disorders checklist, of the kind commonly used in national health surveys including 21 self reported specific medical conditions was given to all participants. In addition, self-reported weight and height were obtained to calculate their body mass index (BMI), defined as weight in kilograms divided by height in meters squared (kg/m<sup>2</sup>). We carried out contingency table analyses and binary logistic regressions to examine the prevalence of the 21 medical conditions both in individuals with MPD and controls. The regression analyses were adjusted by affected status, BMI, gender and age. The statistical analyses were performed with the SPSS 15.0 software.

**Results** There were no statistically significant differences in BMI in the MPD group compared to controls ( $t=1.20$ ,  $d.f=4492$ ,  $p=0.2306$ ).

In the MPD group, chronic pain, migraine, rhinitis and hypertension had the highest lifetime prevalence (24.3%, 14.7%, 13.7% and 13.2%, respectively) compare to controls. In controls, the highest lifetime prevalences were found for chronic pain, hypertension, rhinitis and hypercholesterolemia (12.5%, 11%, 8.3% and 7.5%, respectively). In contrast, embolism and epilepsy had the lowest lifetime prevalences in both groups.

Nineteen medical disorders were significantly more frequent in the MPD group. In particular, the highest significant differences were found for chronic pain, asthma, migraine, vertigo, rhinitis and arthritis ( $p<10^{-6}$ ). There were also differences between groups in cancer, chronic bronchitis, diabetes, stomach ulcer, chronic allergy, hypercholesterolemia, thyroid problems, renal and liver difficulties, embolism,

tinnitus, anemia and cancer ( $p<0.05$ ). In contrast, no significant differences were found for heart attack, epilepsy or hypertension.

**Discussion** Lifetime prevalence of medical disorders was significantly higher in the MPD group compare to psychiatrically healthy controls in the vast majority of the diseases. This study highlights the importance of address medical conditions in people with major psychiatric disorders.

**Disclosure:** Nothing to Disclose.