

ABSTRACTS

Literature review

CM11 Original research - COVID 19 pandemic impact on newly discovered cancer in family medicine practice: a five-year comparisonEva Pleško^a, Mladen Pospišil^a, Marina Nađ^b^a Krapina-Zagorje County Community Health Center, Gornja Stubica, Croatia^b School of Medicine, University of Zagreb, Zagreb, CroatiaDOI: <https://doi.org/10.26800/LV-145-supl2-CM11> Eva Pleško 0000-0003-2925-359, Mladen Pospišil 0000-0002-9462-2593, Marina Nađ 0000-0003-1356-7551

KEYWORDS: cancer; COVID-19; neoplasm


INTRODUCTION: The COVID 19 pandemic has significantly changed our lives. Fear of virus infection during 2020 caused the postponement of numerous examinations and diagnostic procedures.

AIM: The aim of the research is to show the change in the number of newly discovered cancers in two family medicine offices (FMO) during the years 2018-2022.

MATERIALS AND METHODS: This research was conducted in two FMOs of the County Community Health Center of the Krapina-Zagorje in the municipality of Gornja Stubica, which have (2234) persons of a similar age structure in their care. Data on the total number of newly opened cases under diagnosis of C-neoplasm (MKB classification) were collected and analyzed through the IN-CON system. Differences between the number of newly discovered cases are expressed as absolute values and their percentage change between years.

RESULTS: During 2018- 2019, no significant differences were found in the number of patients with newly discovered cancers (19 vs. 21), while in 2020, only 10 cancers were newly discovered, which is 52.38% less than in 2019. An increase in the number of newly discovered cancers was recorded in 2021, when 18 newly discovered cancers were recorded, and in 2022, when 18 newly discovered cancers were also recorded. At that time, the number of diagnosed cancer patients reached 85.7% compared to 2019.

CONCLUSION: During 2020, a significant decrease in the number of newly discovered cancers was recorded. With the easing of epidemiological measures, these values stabilized in 2021 and 2022 and almost reached the values from 2019.

LR01 HIV and depressionMirta Peček^a, Ante Orbanic^b, Lea Tomašić^c^a School of Medicine, University of Zagreb, Zagreb, Croatia^b City Pharmacy Zagreb, Zagreb, Croatia^c University Psychiatric Hospital Vrapče, Zagreb, CroatiaDOI: <https://doi.org/10.26800/LV-145-supl2-LR01> Mirta Peček 0000-0003-4350-4025, Ante Orbanic 0000-0003-4333-1646, Lea Tomašić 0000-0001-7546-5361

KEYWORDS: depressive disorders; HIV; suicide

INTRODUCTION/OBJECTIVES: The most prevalent neuropsychiatric comorbidity of the human immunodeficiency virus (HIV) is a major depressive disorder. The rate of depression among people living with HIV (PLHIV) is three times higher than in the general population and is associated with lower quality of life, additional somatic comorbidities, reduced medication adherence, worse disease progression, and a higher risk of transmission to others. This review aims to raise awareness of depression and its consequences among PLHIV.

MATERIALS AND METHODS: The PubMed database was searched using the keywords: HIV and depression. 8325 papers were found.

RESULTS: Prevalence rates of depression in PLHIV range from 0 to 80%. The increased incidence of depression among PLHIV is a result of dysfunction in immunometabolism, inflammation, and neurotransmitter cascades. Female gender, older age, food insecurity, exposure to abuse, and internalized stigma are risk factors for depression, while disclosure of HIV status, satisfaction with relationships, and social support are protective. Women with HIV exhibit a significantly higher risk of antenatal (36% vs 26%) and postnatal (21% vs 16%) depressive symptoms compared with controls. PLHIV suffering from depression were found to have high suicidal ideation (22,3%), attempted suicide (9,6%), and deaths by suicide (1,7%).

CONCLUSION: Depressive disorders deserve more attention from HIV healthcare providers for improved detection and overall proper management. The findings indicate the need for targeted interventions specific to PLHIV that address the psychological challenges, stigma, and discrimination these people and their families face, which would ultimately lead to reducing psychological consequences and improving the quality of life in PLHIV.