Depression Risk in Young Adults with Childhood- and Adult-Onset Lupus: 12 Years of Follow-up.

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OBJECTIVE: To compare major depression risk among young adults with childhood-onset and adult-onset systemic lupus erythematosus (SLE), and to determine demographic and health-related predictors of depression.

METHODS: Young adults with SLE ages 18-45 years (n=546) in the Lupus Outcomes Study completed annual telephone surveys from 2002-2015, including assessment of depression using the Center for Epidemiological Studies Depression Scale (CES-D), and self-report measures of sociodemographics and health characteristics. Childhood-onset SLE (cSLE) was defined as age at diagnosis less than 18 years (N=115). Repeated measures analysis was performed to assess risk for major depression (CES-D?24) at any point in study, and logistic regression was used to assess for recurrent (present on ?2 assessments) major depression.

RESULTS: Major depression was experienced by 47% of the cohort at least once during the 12-year study period. In adjusted analysis, cSLE patients had an increased risk of major depressive episode (OR 1.7, 95% CI 1.0-2.7) and recurrent episodes (OR 2.2, 95% CI 1.2-4.3), compared to participants with adult-onset SLE. Older age, lower educational attainment and physical function, higher disease activity, and history of smoking were associated with an increased depression risk. cSLE patients had a higher risk of major depression across all educational groups.

CONCLUSION: Young adults with SLE, particularly those with childhood-onset disease, are at high risk for major depression, which is associated with increased disease activity, poorer physical functioning, and lower educational attainment. Early depression intervention in young adults with SLE has the potential to improve both medical and psychosocial outcomes.

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