Depressive disorders and Quality of Life disorders in Progressive Supranuclear Palsy

Streszczenie w języku angielskim

Introduction:

Progressive supranuclear palsy (PSP), along with corticobasal syndrome (CBS) and multiple system atrophy (MSA), constitutes a heterogeneous group of disorders collectively known as atypical parkinsonisms (APS) or Parkinsonism-Plus syndromes (PPS). The phenotypes of these disorders overlap, which poses diagnostic challenges. However, a definitive diagnosis is made only based on post-mortem neuropathological examination. Ante-mortem, only a probable diagnosis of APS is made, which can lead to a relatively high risk of error. The aim of this series of publications is to present the importance of inflammation and its association with depressive disorders in the pathophysiology of PSP.

Methodology:

In preparing this review, a detailed search of the current literature was conducted, using sources available in the PubMed database. Studies selected for their scientific merit were evaluated and analyzed for their potential usefulness in assessing the quality of life (QoL) of patients diagnosed with PSP. The first study examined patients with PSP (some of whom also had comorbid depression, as assessed, among other tools, using the Beck Depression Inventory (BDI); basic biochemical tests of peripheral blood were used. The study allowed for the assessment of the association between inflammatory markers and major depressive disorder in PSP. The third study assessed the profile of certain inflammatory parameters in individuals with progressive supranuclear palsy compared to a methodologically appropriately matched control group. The study achieved its primary objectives of providing preliminary verification of the significance of inflammation in the context of depressive disorders and quality of life in PSP.

Results:

The first review paper emphasized the importance of precise assessment of quality of life in PSP and presented tools enabling such evaluation. Research evaluating laboratory markers of inflammation in PSP and depression identified a parameter that correlates with the presence and severity of depression. Furthermore, a correlation was found between this marker and other morphological parameters. These studies are consistent with previous reports on the inflammatory profile in similar conditions. Research comparing the profiles of certain inflammatory and neurotrophic markers in patients with PSP and a control group highlights some similarities and differences between them.

Summary:

The presented publications suggest the potential usefulness of inflammatory marker studies and their importance in the pathophysiology of PSP. This series highlights the merits of further studies in larger patient groups, using more detailed panels of inflammatory parameters, which may contribute to a better understanding of the disease mechanisms and the identification of potential therapeutic targets for these disorders in the future.