Top Ten Things to Know
Poststroke Depression

1. Poststroke depression (PSD) affects about 1/3 of stroke survivors at any one time.

2. Stroke survivors with PSD are at a high risk for suboptimal recovery, recurrent vascular events, poor quality of life and higher mortality.

3. PSD is one the most common complications after stroke, but few guidelines exist regarding assessment, treatment and prevention of PSD.

4. This multispecialty statement provides a comprehensive review of the current evidence and gaps in current knowledge of the epidemiology, pathophysiology, outcomes, management, and prevention of PSD, and provides implications for clinical practice.

5. The pathophysiology of PSD is poorly understood, with proposed mechanisms including psychosocial factors such as psychological response to new disability and social isolation, and biological factors such as genetic susceptibility, inflammation, alterations in neurotrophic factors, disruption of neural networks, and alterations in serotonergic, noradrenergic, and dopaminergic pathways.

6. The most consistent predictors of PSD include: physical disability, stroke severity, depression before stroke and cognitive impairment.

7. Persons with PSD have higher healthcare use, poorer functional outcomes and quality of life, and higher mortality.

8. Clinical trials of antidepressants in individuals with PSD have shown a beneficial effect on depression remission and response, but trials were limited by small samples, variable criteria for PSD, and vague definitions for remission and response.

9. The high prevalence and poor prognosis of depression in patients with stroke supports a strategy of increased awareness, timely screening, and prompt evidence-based management; however, further studies are needed to determine the optimal timing and method for screening, and ideal treatment strategy.

10. Awareness and early treatment of depression should be addressed in all patients who have had a stroke.