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Probir serumskog testosterona u muških psihijatrijskih bolesnika

/ *Serum Testosterone Screening in Male Psychiatric Patients*

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Ciljevi istraživanja: Ispitati povezanost serumskih testosteronskih parametara s težinom akutne psihičke bolesti i duljinom hospitalizacije u muških bolesnika te utvrditi odnos testosterona s dobi, pušenjem i indeksom tjelesne mase. Materijali i metode: U istraživanje su uključena 253 muška bolesnika hospitalizirana na Zavodu za biologijsku psihijatriju KBC-a „Sestre milosrdnice" u Zagrebu. Određivani su ukupni testosteron, slobodni testosteron i indeks slobodnog testosterona, a težina bolesti procijenjena je ljestvicom CGI-S pri prijemu. Podaci su analizirani prema dijagnozama, duljini hospitalizacije, dobi, pušenju i BMI-ju. Statistička obrada: Primijenjena je deskriptivna i inferencijalna statistika, uz analizu korelacija

Objectives: To examine the association of serum testosterone parameters with the severity of acute mental illness and length of hospitalization in male patients, and to determine the relationship of testosterone with age, smoking, and body mass index. Materials and methods: The study included 253 male patients hospitalized at the Department of Biological Psychiatry, Sisters of Charity University Hospital in Zagreb. Total testosterone, free testosterone, and the free testosterone index were measured, and illness severity at admission was assessed using the CGI-S scale. Data were analyzed according to diagnoses, length of hospitalization, age, smoking status, and BMI. Statistical analysis: Descriptive and inferential statistics were applied, including correlation analyses between hormonal and clinical vari-

između hormonskih i kliničkih varijabli. Rezultati: Najčešće dijagnoze bile su poremećaji uzrokovani alkoholom, shizofrenija i depresivni poremećaji. Shizofrenija je bila povezana s najvećom kliničkom težinom pri prijemu i najduljim boravkom u bolnici, dok su bolesnici s poremećajima uzrokovanima alkoholom imali blažu kliničku sliku i kraći boravak. Nije utvrđena značajna povezanost ukupnog ni slobodnog testosterona s težinom bolesti prema ljestvici CGI-S niti s duljinom hospitalizacije, dok je indeks slobodnog testosterona pokazao slabu negativnu povezanost s težinom bolesti. Dob je bila negativno povezana sa svim testosteronskim pokazateljima, pušenje s višim ukupnim testosteronom, a BMI negativno s ukupnim i pozitivno sa slobodnim testosteronom. Zaključak: U ovoj akutnoj psihijatrijskoj kohorti testosteron nije bio glavni prediktor kliničke težine ni trajanja liječenja, dok su dob i tjelesna masa imali izraženiji utjecaj na hormonski status.

ables. Results: The most common diagnoses were alcohol-related disorders, schizophrenia, and depressive disorders. Schizophrenia was associated with the greatest clinical severity at admission and the longest hospital stay, whereas patients with alcohol-related disorders had a milder clinical presentation and shorter hospitalization. No significant association was found between total or free testosterone and illness severity according to the CGI-S scale or with length of hospitalization, while the free testosterone index showed a weak negative association with illness severity. Age was negatively associated with all testosterone measures, smoking was associated with higher total testosterone, and BMI was negatively associated with total and positively with free testosterone. Conclusion: In this acute psychiatric cohort, testosterone was not a major predictor of clinical severity or treatment duration, whereas age and body weight had a more pronounced influence on hormonal status.