

doi: 10.13241/j.cnki.pmb.2014.07.042

产后与非产后抑郁症患者记忆功能的对比研究*

唐英¹ 陈玖^{2△} 黄平¹ 杨来启² 马文涛²

(1 成都市新都区妇幼保健院妇产科 四川 成都 610500; 2 解放军第三医院全军精神疾病防治中心 陕西 宝鸡 721004)

摘要 目的:探讨产后与非产后抑郁症患者记忆功能的差异,为产后抑郁患者的早期预防提供参考依据。**方法:**通过 17 项汉密尔顿抑郁量表和韦氏记忆评定解放军第三医院 2011 年 1 月至 2012 年 11 月收治的 40 例产后抑郁症患者(产后组)、42 例非产后抑郁症患者(非产后组)的记忆功能,并与 42 名健康志愿者(对照组)的结果进行比较。**结果:**(1)与对照组比较,产后组长时记忆评分与其比较差异不显著($P>0.05$),除触摸因子外,短时记忆各因子评分均显著降低($P<0.05$),瞬时记忆评分、记忆商均明显降低($P<0.05$);非产后组长时记忆评分显著降低($P<0.05$),除联想、理解因子外,短时记忆评分差异均不显著($P>0.05$),瞬时记忆、记忆商评分均显著降低($P<0.05$)。 (2)与产后组相比,非产后组长时记忆评分显著降低($P<0.05$),短时记忆图片、再认因子评分显著升高($P<0.05$),联想、触摸、理解因子差异不显著($P>0.05$),瞬时记忆、记忆商评分差异不明显($P>0.05$)。**结论:**产后与非产后抑郁症患者的记忆功能均下降,但受损成分不同,产后抑郁患者的记忆功能受损只是一种功能性受损。

关键词: 产后抑郁症;记忆功能;功能性受损

中图分类号: R749.4 文献标识码: A 文章编号: 1673-6273(2014)07-1365-03

Comparative Study on the Memory Function between Postpartum and Non Postpartum Depression*

TANG Ying¹, CHEN Jiu^{2△}, HUANG Ping¹, YANG Lai-qi², MA Wen-tao²

(1 Department of Obstetrics and Gynecology, Service Centre for Maternal and Child Care in the Xindu District of Chengdu, Chengdu, Sichuan, 610500, China; 2 Center for Mental Disease Control and Prevention, Third Hospital of PLA, Baoji, Shaanxi, 721004, China)

ABSTRACT Objective: To explore the difference of memory function between postpartum and non postpartum depression, and provide references for the early prevention of the postpartum depression. **Methods:** 40 cases of postpartum depression (postpartum depression group) and 42 cases of non postpartum depressions (non postpartum depression group) hospitalized in Third Hospital of PLA from January 2011 to November 2012 were assessed by 17-item Hamilton Depression Scale (HAMD) and Wechsler memory scale (WMS) and also compared with 42 cases of healthy subject (control group). **Results:** (1) Compared with the control group, the long-term memory, short-term memory, immediate memory increased significantly and MQ increased significantly after 12 weeks treatment in first-episode depressions given QSFK and fluoxetine ($P<0.05$). Compared with the control group, no difference was found on the long-term memory ($P>0.05$), the short-term memory were decreased significantly (except the touch factor, $P<0.05$), immediate memory and MQ were decreased significantly in the postpartum depression group ($P<0.05$). (2) Compared with the postpartum depression group, the long-term memory were decreased significantly ($P<0.05$), and pictures and recognition factor in the short-term memory increased significantly ($P<0.05$), and no difference was found on association, touch and understanding factor in the short-term memory ($P<0.05$), and no difference was found on immediate memory and MQ ($P<0.05$). **Conclusion:** Both postpartum and non postpartum depression presented a decline defect on the memory function, but the damaged components were different, the impaired memory function in the postpartum depressions was a kind of functional damage.

Key words: Postpartum depression (PPD); Memory function; Functional damage

Chinese Library Classification(CLC): R749.4 **Document code:** A

Article ID: 1673-6273(2014)07-1365-03

前言

产后抑郁症(postpartum depression, PPD)是指产妇在产褥期内出现抑郁症状,具有一定的认知功能障碍,对产妇及患儿身心健康均可产生不良影响^[1]。国内外研究均报道抑郁症患者

记忆功能严重受损^[2-4]。目前,关于产后抑郁患者的记忆功能受损情况及与非产后抑郁患者的记忆减退的机制是否一致尚不清楚。本研究通过修订韦氏记忆量表(Wechsler Memory Scale, WMS)对产后与非产后抑郁症患者的记忆功能进行对比研究,以期对产后抑郁患者的早期预防、治疗及康复提供参考依据。

* 基金项目:军队中医药科研专项课题(10ZYX108)

作者简介:唐英(1985-),女,本科,护士长,主要研究方向:产后抑郁患者的预防、治疗、康复研究

△ 通讯作者:陈玖,电话:0917-8957435, E-mail: academicchen@163.com

(收稿日期:2013-07-10 接受日期:2013-08-04)

1 对象与方法

1.1 研究对象

选自解放军第三医院 2011 年 1 月至 2012 年 11 月住院确诊的产后和非产后抑郁症患者。本研究经医院伦理委员会批准。入组标准:(1)符合《精神疾病诊断与统计手册》(第四版)(DSM-IV)抑郁发作标准;(2)治疗前 2 周末进行抗抑郁治疗或服用其他精神类药物;(3)裸视或矫正视力达到正常;(4)患者合作;(5)受试者和(或)监护人知情同意并签署同意书。排除标准:(1)有脑血管病、其他脑部疾病及重大躯体疾病;(2)有严重的自杀倾向;(3)有酒或其他物质依赖或滥用。符合入组标准的患者,产后组共 40 例,年龄 22~35 岁,平均年龄(25.8 ± 5.1)岁;平均受教育达(14.8 ± 4.1)年,病程 2~24(11 ± 4)周,17 汉密尔顿抑郁量表(Hamilton Depression Rating Scale, HAMD)总分 25~38(29 ± 6)分。非产后组共 42 例,女性,年龄 20 岁~35 岁,平均(26.4 ± 6.1)岁;平均受教育达(15.4 ± 5.0)年。病程 2~24(12 ± 5)周;HAMD 评分总分 24~39(29 ± 5)分。对照组:为本单位工作人员、临床进修人员,无精神病和精神病家族史,其他标准同患者组。共 42 名,女性,年龄 21~40 岁,平均年龄(26.8 ± 5.3)岁,平均受教育达(16.1 ± 5.1)年。三组年龄、教育程度比较无显著性差异($P>0.05$),具有可比性。

1.2 方法

1.2.1 量表评定 ① 抑郁症患者用 17 项汉密尔顿抑郁量表评定。② 对照组用《DSM-IV-TR 轴 I 障碍临床定式检查》筛查。

1.2.2 记忆功能评定 记忆功能采用龚耀先修订韦氏记忆量表(WMS-R)作为评价记忆功能的指标。该量表包括 10 个分测验。1~3 分测验为长时记忆,4~9 分测验为短时记忆,第 10 分测验为瞬时记忆。根据全量表分,查得相应的记忆商(MQ)。

1.3 统计学分析

所有统计计算均在 SPSS17.0 统计软件包中进行,方差分析比较组间年龄、教育程度及记忆功能评分的差异,两两之间用 LSD-t 检验比较,检验水准为双侧 $\alpha=0.05$ 。

2 结果

2.1 三组韦氏记忆量表评分的比较

与对照组比较,产后组长时记忆评分差异不显著($P>0.05$),短时记忆各因子评分除触摸因子外均显著降低($P<0.05$),瞬时记忆、记忆商评分均明显降低($P<0.05$);非产后组长时记忆评分显著降低($P<0.05$),短时记忆评分除联想、理解因子外差异不显著($P>0.05$),瞬时记忆、记忆商评分降低($P<0.05$)。与产后组相比,非产后组长时记忆评分显著降低($P<0.05$),短时记忆图片、再认因子评分显著偏高($P<0.05$),联想、触摸、理解因子差异不显著($P>0.05$),瞬时记忆、记忆商评分差异不显著($P>0.05$)。见表 1。

表 1 产后与非产后抑郁症患者与对照组韦氏记忆量表的测试结果比较(分, $\bar{x} \pm s$)

Tabel 1 Comparison of the Wechsler Memory Scale test between the two patient groups and control group (score, $\bar{x} \pm s$)

Group	Case	长时记忆 Long-term memory					短时记忆 Short-term memory				瞬时记忆 Immediate memory	记忆商 MQ
		1 → 100	100 → 1	积累 (Accumulation)	图片 (Picture)	再认 (Recognition)	联想 (Association)	触摸 (Touch)	理解 (Understand)	背数 (Recite number)		
CG	42	11.3±2.3	11.5±2.1	11.0±2.6	10.4±2.6	11.5±2.3	10.6±2.6	10.9±2.3	10.3±2.5	10.7±3.0	108.9±16.8	
PPDG	40	10.8±3.2	10.9±2.4	11.2±2.4	8.2±2.2 ^a	8.3±2.4 ^a	7.1±2.1 ^a	9.9±2.2	7.6±2.2 ^a	7.0±3.1 ^a	79.2±13.7 ^a	
NPPDG	42	7.7±2.6 ^{ab}	7.9±2.6 ^{ab}	8.6±2.2 ^a	9.8±3.2	10.6±3.3	7.8±2.6 ^a	9.8±2.7	7.9±2.2 ^a	7.9±2.4 ^a	82.6±14.6 ^a	

* 注:产后组:PPDG;非产后组:NPPDG;对照组:CG;与对照组相比,^a $P<0.05$;与产后组相比,^b $P<0.05$ 。

*Note: postpartum depression group: PPDG; non postpartum depression group: NPPDG; Control group: CG; Compared with CG, ^a $P<0.05$; Compared with PPDG, ^b $P<0.05$ 。

3 讨论

本组研究结果表明,产后和非产后抑郁患者记忆商评分均低于正常健康对照人群,与国内外研究结果一致^[8-9],说明产后与非产后抑郁患者记忆功能均受损。非产后抑郁患者除了短时记忆中图片、再认、触摸因子评分差异不显著外,其他记忆因子均下降,说明非产后抑郁患者各种记忆功能均有受损,与国外研究结论一致^[9,10]。而产后抑郁患者长时记忆没有差异,短时记忆(除触摸因子)、瞬时记忆评分均下降,提示产后与非产后抑郁患者记忆功能受损的性质有差异,受损机制也不同,即非产后抑郁患者记忆受损程度波及范围广(可能是一种弥漫性受损),持续时间长^[11,12]。此外,产后与非产后抑郁患者相比,除长时记

忆评分差异外,短时记忆评分中因子也存在差异,产后侧重图片、再认因子评分下降,可能是因为不同的记忆因子代表不同的记忆功能^[13],不同的记忆功能对认知资源的多少要求有差异^[14],从而导致产后与非产后抑郁患者的受损差异,说明产后与非产后抑郁患者的认知资源的分配机制不同,产后抑郁患者在记忆需认知资源少的成分上容易出现受损。

记忆系统是一种序列加工系统,首先是瞬时记忆,然后进一步转换、编码加工为短时记忆,最后存储在长时记忆系统中^[15]。产后抑郁患者可能只是在记忆系统的前期加工中出现障碍,即记忆系统的一种动态转化过程出现紊乱,导致对外界的刺激信息不能顺利被长期存储在相应的大脑功能区,其记忆功能下降是一种状态性的,而非产后抑郁患者影响的是长时记忆系统,

即已经在脑中存储的记忆的提取障碍,而非记忆动态转化过程受损,所以其记忆功能受损是可能一种素质性的指标^[16]。有研究表明,记忆脑加工机制是位于内侧颞叶的两个记忆系统:杏仁核和海马^[17,18]。杏仁核是记忆最重要的脑结构,被认为是整个记忆神经网络的核心^[19,20]。非产后抑郁患者的记忆系统障碍可能是储存和管理记忆的大脑功能区的杏仁核和海马的功能性紊乱;而产后抑郁患者则可能只是的记忆神经网络的神经环路只是短暂的出现紊乱导致的记忆系统的动态转化发生了障碍,记忆功能的受损指标可能是产后与非产后抑郁患者的特异性客观指标。具体与患者临床症状间的相关性有待于下一步深入研究。本研究样本量较少,未能排除药物、患者严重程度、首发与复发患者的比例差异可能会影响其认知功能。本研究组下一步将扩大样量对其进行前瞻性研究,以便深入揭示产后抑郁患者的发病机制。

参考文献(References)

- [1] Field T. Postpartum depression effects on early interactions, parenting, and safety practices: a review [J]. *Infant Behav Dev*, 2010, 33(1): 1-6
- [2] 任力杰,陆兵勋,吴明祥,等. 抑郁症患者工作记忆损害与磁共振扩散张量成像部分各向异性值相关性的研究 [J]. *中华行为医学与脑科学杂志*, 2010, 19(4): 325-327
Ren Li-jie, Lu Bing-xun, Wu Ming-xiang, et al. Correlation between fractional anisotropy values of diffusion tensor imaging and working memory impairment in patients with depression [J]. *Chin J Behav Med & Brain*, 2010, 19(4): 325-327
- [3] Mannie ZN, Barnes J, Bristow GC, et al. Memory impairment in young women at increased risk of depression: influence of cortisol and 5-HTT genotype [J]. *Psychol Med*, 2009, 39(5): 757-762
- [4] Elderkin-Thompson V, Irwin MR, Helleman G, et al. Interleukin-6 and memory functions of encoding and recall in healthy and depressed elderly adults[J]. *Am J Geriatr Psychiatry*, 2012, 20(9): 753-763
- [5] 王俊珺,施燕红,袁肖征,等. 抑郁症患者基于事件和时间的前瞻性记忆损害研究[J]. *中华全科医学*, 2009, 18(8): 832-833
Wang Jun-jun, Shi Yan-hong, Yuan Xiao-zheng, et al. Analysis of Event-and time-based Prospective Memory Impairment in Depression Patients[J]. *Chinese Journal of General Practice*, 2009, 18(8): 832-833
- [6] 刘衍华,姚树桥,肖晶,等. 抑郁症患者的自传体记忆特征及其应用自传体记忆测验的元分析[J]. *心理科学进展*, 2010, 18(4): 578-589
Liu Xian-hua, Yao Shu-qiao, Xiao Jing, et al. The autobiographical memory characteristics of patients with depressive disorder and the appliance of the autobiographical memory Test: a meta-analysis [J]. *Advances in Psychological Science*, 2010, 18(4): 578-589
- [7] Tam CW, Lam LC. Cognitive and functional impairment in Chinese elderly with late-onset depression [J]. *East Asian Arch Psychiatry*, 2012, 22(1): 25-30
- [8] Gonalves DC, Albuquerque PB, Paul C. Life review with older women: an intervention to reduce depression and improve autobiographical memory[J]. *Aging Clin Exp Res*, 2009, 21(4-5): 369-371
- [9] Crane C, Barnhofer T, Mark J, et al. Cue self-relevance affects autobiographical memory specificity in individuals with a history of major depression[J]. *Memory*, 2007, 15(3): 312-323
- [10] Lyche P, Jonassen R, Stiles TC, et al. Verbal memory functions in unipolar major depression with and without co-morbid anxiety [J]. *Clin Neuropsychol*, 2011, 25(3): 359-375
- [11] Joormann J, Gotlib IH. Updating the contents of working memory in depression: interference from irrelevant negative material [J]. *J Abnorm Psychol*, 2008, 117(1): 182-192
- [12] Ramponi C, Murphy FC, Calder AJ, et al. Recognition memory for pictorial material in subclinical depression [J]. *Acta Psychol*, 2010, 135(3): 293-301
- [13] Miskowiak KW, Vinberg M, Harmer CJ, et al. Erythropoietin: a candidate treatment for mood symptoms and memory dysfunction in depression[J]. *Psychopharmacology (Berl)*, 2012, 219(3): 687-698
- [14] Theodore WH, Wiggs EA, Martinez AR, et al. Serotonin 1A receptors, depression, and memory in temporal lobe epilepsy[J]. *Epilepsia*, 2012, 53(1): 129-133
- [15] Mesholam-Gately RI, Giuliano AJ, Zillmer EA, et al. Verbal learning and memory in older adults with minor and major depression [J]. *Arch Clin Neuropsychol*, 2012, 27(2): 196-207
- [16] 杨来启,陈玖,杨喜民,等. 芪参复康胶囊、氟西汀对首发抑郁症患者事件相关电位的影响[J]. *中国医师杂志*, 2012, 14(6): 742-745
Yang Lai-qi, Chen Jiu, Yang Xi-min, et al. Effects of Qishen Fukang capsules and Fluoxetine treatments on event-related potentials in first-episode depressions [J]. *Journal of Chinese Physician*, 2012, 14(6): 742-745
- [17] Elderkin-Thompson V, Mintz J, Haroon E, et al. Executive dysfunction and memory in older patients with major and minor depression[J]. *Arch Clin Neuropsychol*, 2007, 22(2): 261-270
- [18] Hugo D, Critchley. Psychophysiology of neural, cognitive and affective integration: fMRI and autonomic indicators [J]. *Int J Psychophysiol*, 2009, 73(2): 88-94
- [19] Dolcos F, LaBar KS, Cabeza R. Interaction between the amygdala and the medial temporal lobe memory system predicts better Memory for emotional events[J]. *Neuron*, 2004, 42(5): 855-863
- [20] Whalen PJ, Shin LM, Somerville LH, et al. Functional neuroimaging studies of the amygdala in depression[J]. *Semin Clin Neuropsychiatry*, 2002, 7(4): 234-242