

Personality Moderates the Improvement of Depressive Symptoms After Retirement: Evidence from the GAZEL Cohort

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Objective: Previous studies have suggested a positive effect of retirement on depressive symptoms. The present study took advantage of the large-scale, prospective Gaz et Electricité (GAZEL) cohort to examine whether personality could influence this effect.

Methods: Depressive symptoms were assessed in 1993, 1996, 1999, 2002, 2005, and 2008 with the Center for Epidemiologic Studies Depression Scale (CES-D). Among the participants for which changes in depressive symptoms after retirement could be computed, 9,755 had completed the Buss and Durkee Hostility Inventory and the Bortner Type A Rating Scale in 1993. Covariates included age, gender, occupational grade, history of sickness absences for depression, and alcohol consumption. The effect of hostility and type A personality on changes in depressive symptoms after retirement were assessed with general linear models. **Results:** Adjusting for all covariates, higher scores of total ($p < 0.001$; $\eta^2 = 0.017$), cognitive ($p < 0.001$; $\eta^2 = 0.021$), and behavioral hostility ($p < 0.001$; $\eta^2 = 0.004$) as well as type A personality ($p < 0.001$; $\eta^2 = 0.002$) were each associated with a smaller improvement of depressive symptoms after retirement. Regarding hostility subscales, only the association with cognitive hostility remained significant ($p < 0.001$; $\eta^2 = 0.018$) when both were simultaneously entered in the model. Among participants meeting the CES-D threshold of clinical depression before retirement, those in the lowest quartile of cognitive hostility were two times more likely than those in the highest to fall short of this threshold after retirement (odds ratio: 1.99; 95% confidence interval: 1.54–2.58).

Conclusion: Individuals with high levels of cognitive hostility display less improvement of depressive symptoms after retirement. (Am J Geriatr Psychiatry 2015; ■■■—■)

Key Words: Depression, retirement, hostility, personality

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Supplemental digital content is available for this article in the HTML and PDF versions of this article on the journal's Web site (www.ajgponline.org).

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<http://dx.doi.org/10.1016/j.jagp.2014.12.004>

INTRODUCTION

About 200 million people worldwide suffered from depression in 2010.¹ Major depression is the leading cause of morbidity in the world and is related to a major alteration of quality of life and huge medicoeconomic costs,² with even poorer outcomes among the elderly.^{3,4} Stressful life events are a well-known risk factor for depression.⁵ However, according to the stress diathesis model, a given event may not result in similar outcomes. For example, personality could influence the effect of stressful life events on the emergence of depressive symptoms.^{5–7} Among stressful life events, retirement is a huge life change and has an impact on health behaviors. Previous studies have suggested a positive effect of retirement on quality of life and depressive symptoms,^{8,9} but null findings have also been reported.¹⁰ To our knowledge, however, the potential moderating role of personality on the association between retirement and subsequent changes in depressive symptoms has never been examined. The present study took advantage of the large-scale prospective French Gaz et Electricité (GAZEL) cohort to address this question.

In the GAZEL cohort, retirement was associated with a decrease of depressive symptoms assessed with the Center for Epidemiologic Studies Depression Scale (CES-D).¹¹ Other studies have highlighted a positive effect of retirement on sleep disturbances,¹² headaches,¹³ weight, and physical activity.¹⁴ This latter improvement was influenced by job strain, as captured by the Karasek's model, so that only subjects with ideal working conditions did not improve.¹⁵ Negative effects of retirement have also been described, such as an increase in alcohol consumption¹⁶ or a trend for a better perceived health status in elderly patients continuing to be gainfully employed.¹⁷ The increase in alcohol consumption may seem to be at odds with findings regarding depressive symptoms because alcohol consumption is likely to be causally involved in depression.¹⁸

Our primary aim was to examine the role of hostility on the association between retirement and subsequent changes in depressive symptoms in the GAZEL cohort. Hostility is a multidimensional construct that encompasses both cognitive hostility (i.e., hostile thoughts such as resentment and suspicion) and behavioral hostility (e.g., aggressiveness). High levels

of hostility, particularly of cognitive hostility, are associated with a greater vulnerability for depressive disorders possibly explained by more frequent interpersonal conflicts, lower social support, more stressful life events, and a more negative perception of them.^{19,20} Therefore, we hypothesized that hostility would be associated with a lower decrease of depressive symptoms after retirement. If this hypothesis was confirmed, we planned to explore whether this association would be driven by cognitive hostility, behavioral hostility, or both. As a secondary aim, we conducted exploratory analyses regarding type A personality. Type A personality combines competitiveness, sense of time urgency, and irritability²¹ and is characterized by high levels of job commitment.²² On one hand, excessive job commitment could cause psychological distress such as burn-out or depression.²² On the other hand, Type A individuals may experience more depressive symptoms after retirement because their goals and lifestyle were excessively focused on work.²³ Outcomes of this study could be helpful for health professionals and public health decision-makers to better understand medical and psychological benefits expected from the retirement.

METHODS

Participants

Details of the GAZEL cohort study are available elsewhere.²⁴ The target population consisted of 44,922 employees of the French national gas and electricity company, Electricité de France-Gaz de France: 31,411 men aged 40–50 and 13,511 women aged 35–50. The study protocol was approved by the French authority for data confidentiality (Commission Nationale Informatique et Liberté) and by the Ethics Evaluation Committee of the Institut National de la Santé et de la Recherche Médicale, or INSERM (IRB0000388 and FWA00005831).

In 1989, 20,625 employees (45.8%) (15,011 men and 5,614 women) agreed to participate in the GAZEL cohort study. Since 1989, participants have been followed by means of an annual mailed questionnaire as well as through administrative databases. The 1993 questionnaire, which was mailed to the 20,488 still-living cohort members, included an assessment of depressive symptoms with the CES-D and measures of hostility

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