

## 47 - NEUROPSYCHOLOGICAL AND PSYCHOMOTOR SYMPTOMS IN DEPRESSIVE PATIENT AT THE BEGINNING AND END TREATMENT

RACHE SCHLINDWEIN-ZANINI<sup>1</sup>  
 GECIELY ALMEIDA<sup>2</sup>  
 DANIELA LIPOSCKI<sup>3</sup>  
 LARA HELEGDA<sup>4</sup>  
 ELISANGELA BITENCOURT<sup>5</sup>  
 rachelsz@floripa.com.br

### INTRODUCTION

Major depressive disorders are a public health matter due to their high prevalence and decline on quality of life and laborative functioning outcomes (HAYS e cols., 1995). In a general way, according to Kendler et al. (2001), women are more sensible to the conflicts on social and familiar relations than men.

A research with men and women with intellective incapacities mentioned women have greater scores on depression than men; women with more visible depressive symptoms frequently have low social support and are more susceptible to abuse than those ones showing lower scores (Lunsky, 2003).

According to the World Health Association (1992), Depressive Disorders can promote sleep disorders, generally insomnia. Apathy is generally increased during the crisis, reducing physical and mental activities as chronic tiredness and fatigue, prejudicing thinking, concentration and decision making. Depressive patients can make a grievance of memory weakness and distraction. Occupational productiveness is prejudiced as well, more notable in people working on academic activities or professionals with intellectual demanding.

In psychomotricity of the depressive patient is very common a general inhibition as slowness, obtuseness, poor speech and movements, droopy shoulders and walking problems, reduction on physical activity practice and, in some cases, psychomotor paralysation; so, it is important to give orientation and make a directional physical activity, as on prevention as on depression treatment (MORAES et al, 2007).

Thus, considering the motor activity as fundamental on the process of global development of the subject, because it is an important tool in order to help people to develop self-awareness and awareness of external environment, helping in the conquest of their independence (ROSANETO, 2002), it is understood the value of the motor evaluation.

Depressive people use to have personal slovenliness, poor self-esteem and abandon of themselves. In more severe cases it is possible to have negativism showing immobile, rigid postures as catatonia (intense apathy).

During depressive episode, according to World Health Association (1992), the victim may think about suicide, and its duration is variable. Without treatment, the major depressive episode can take 6 months or more. In most of cases, there is the complete remission of the symptoms, almost to the normal level functioning, but not without severe suffering and/or experiential losses.

In some contexts, women show more symptomatic symptoms than men (Wenzel et al., 2005).

This way, the neuropsychological evaluation in adults is really important, because it prioritizes that age exposed to circumstances as: workload, chemical dependency, romantic relationships and others, in a distinct way from other ages (Schlindwein-Zanini, 2010). In this sense, a health Professional must consider psychological, neuropsychological, psychomotor, pharmacological and nutritional aspects in order to consider therapeutic monitoring.

The objective of this research was to relate the use of the Inventory of Neuropsychological Alterations for Adults – SZC (Schlindwein-Zanini e Cruz) as a tool for neuropsychological alteration detection on depressive disorder, as well analyzing the psychomotor disorders associated through Scale of Motor Development – SMD (Rosa Neto, 2002).

### METHODOLOGY

43-years-old patient, female, married, household, high school education, from Paraná state/Brazil, received diagnosis of major depressive episode, and she agreed to take part in this study. The psychological framework was triggered due to a "great disappointment" with her husband.

Neuropsychological Evaluation: It was applied the "Inventory of Neuropsychological Alterations for Adults – SZC" (Schlindwein-Zanini e Cruz) in 2009, when the patient was on the 10th Day of psychological treatment (psychotherapy) with the use of psychotropic. In 2010, with an interval of one year, the inventory was applied again for detecting neuropsychological alterations.

Motor Evaluation: It was applied the "Scale of Motor Development – EDM", described in Motor Evaluation Manual (ROSA NETO, 2002), evaluation the following areas: fine motor skills, gross motor skills, balance, body schema, and temporal and spatial organizations. Through EDM it is possible to obtain the gross motor quotient (GMQ) and the level of motor development of each subject, according to Table 1.

Table 1 – Classification of Motor Development (ROSA NETO, 2002)

GMQ	Motor Development
130 or more	Much higher
120 – 129	Higher
110 – 119	Normal high
90 – 109	Normal medium
80 – 89	Normal low
70 – 79	Lower
69 or less	Much lower

Patient was evaluated on January, 2009. During the treatment period, she received orientations related to the importance of physical activity and monitored by a physiotherapist (twice a week), and she was evaluated again one year after (on March, 2010).

After converting the punctuation obtained in SZC and EDM, it was made the data statistical treatment.

### RESULTS AND DISCUSSION

In relation to neuropsychological alterations, the patient showed unsatisfactory performance in 2009, in the most of inventory aspects (SZC, 2010); however, in 2010 after the treatment, she showed good results in the most of the researched matters, so confirming the importance of psychological and psychiatric interventions for patients in major depressive episode (Table 1). It is an evidence SZC can be used in those cases, helping to measure the patient's evolution during treatment.

Table 1 – Deficits showed in SZC aspects

SZC DOMAINS	2009	2010
Concentration	X	X
Irritability	X	X
Attention	X	
Decision making	X	
Short-term memory	X	
Sleep	X	
Planning	X	
Mood swing	X	
Independence/ autonomy	X	X
Verbal comprehension	X	
Speech production	X	
Writing production	X	

In relation to psychomotor alterations, the patient showed low performance in 2009 in the following areas (EDM, 2002): gross motor skills, balance, body schema and temporal organization. However, after treatment in 2010, she showed low result just in balance, so confirming the existence of psychomotor disorders associated to depressive disorders (Table 2).

Table 2 – Performance in EDM areas

EDM AREAS	2009	2010
Fine motor skills	Normal medium	Normal medium
Gross motor skills	lower	Normal low
Balance	lower	lower
Body Schema	lower	Normal low
Spatial organization	Normal medium	Normal medium
Temporal organization	lower	Normal low

Those data are in agreement with Cruz et al (2004) research, which related alterations on the dynamic equilibrium with negative emotional states, as depression, in 14,2% (n-109) of the evaluated subjects.

### CONCLUSION

In this research is possible to find that:

"Inventory of Neuropsychological Alterations for Adults – SZC" is useful on detecting neuropsychological symptoms in depressive disorder as well a comparison tool in different treatment phases.

Depressive disorders are associated to psychomotor disorders, especially on balance area.

Psychological, psychiatric and psychomotor interventions are essential in treating patients with major depressive episode.

### REFERENCES

- [CRUZ, I.B.M. da et al. Equilíbrio dinâmico, estilo de vida e estados emocionais em adultos jovens. Braz. j. otorhinolaryngol. \[online\]. Vol.76, n.3, p. 392-398, 2010.](#)
- HAYS, R. D.; WELLS, K. B.; SHERBOURNE, D. et al. Functioning and well-being outcomes of patients with depression compared with chronic general medical illnesses. Arch Gen Psychiatry, 52:11-19, 1995.
- LUNSKY, Y. - Depressive symptoms in intellectual disability: does gender play a role? J Intellect Disabil Res 47(6):417-27, 2003. KENDLER, K.S.; THORNTON, L.M.; PRESCOTT, C.A. - Gender differences in rates of exposure to stressful life events and sensitivity to their depressogenic effects. Am J Psychiatry 158:587-93, 2001.
- [MORAES, H. et al. O Exercício Físico no tratamento da depressão em idosos: revisão sistemática. Rev. psiquiatr. Rio Gd. Sul. \[online\]. Vol.29, n.1, p. 70-79, 2007.](#)
- ROSANETO, F. Manual de Avaliação Motora. Porto Alegre: Artmed, 2002.
- SCHLINDWEIN-ZANINI, R. Avaliação neuropsicológica do adulto. In: MALLOY-DINIZ, L.; FUENTES, D.; ABREU, N.; MATTOS, P. et al. (org). Avaliação Neuropsicológica. Porto Alegre: Artmed. 2010.
- WENZEL, A.; STEER, R.A.; BECK, A.T. - Are there any differences in frequency of self reported somatic symptoms of depression? J Affect Disord 89(1-3):177-81, 2005.
- WORLD HEALTH ASSOCIATION. The ICD-10 Clasification of Mental and Behavioural Disorders. Clinical descriptions and diagnostic guidelines. Geneva: World Health Organization; 1992.
- 1 - Neuropsicóloga, especialista pelo Conselho Federal de Psicologia, Doutora em Ciências da Saúde/Medicina (área: Neurociências), pela Faculdade de Medicina da PUCRS, Pós-doutorado em Psicologia pela Universidade Federal de Santa Catarina (UFSC), Psicóloga/Neuropsicóloga do Hospital Universitário da UFSC.
- 2 - Fisioterapeutas. Mestres em Ciências do Movimento pela Universidade do Estado de Santa Catarina (UDESC). Professoras do Curso de Fisioterapia do Centro Universitário Catarinense (UNIVESC).
- 3 - Fisioterapeuta e Educadora Física. Mestre em Engenharia Elétrica pela Pontifícia Universidade Católica do Rio Grande do Sul (PUCRS). Professora do Curso de Fisioterapia e Educação Física do Centro Universitário Catarinense (UNIVESC).
- 4-Acadêmica da 10ª fase do Curso de Fisioterapia do Centro Universitário Catarinense (UNIVESC). Lages/SC.

Rua Lauro Linhares, 2123, torre 1, sala 612. Bairro Trindade.  
 Florianópolis/SC-Brasil. CEP: 88.036-002  
 E-mail: [rachelsz@floripa.com.br](mailto:rachelsz@floripa.com.br)

## **NEUROPSYCHOLOGICAL AND PSYCHOMOTOR SYMPTOMS IN DEPRESSIVE PATIENT AT THE BEGINNING AND END TREATMENT**

### **ABSTRACT**

**Introduction:** Major depressive disorder is characterized by symptoms which interfere within the normal activities of the patient, impairing their social, occupational, relational, and psychomotor performance, and it has a high prevalence in the world population. **Objective and methodology:** This paper aims to report the use of the "Catalogue of Neuropsychological impairments for adults – SZC" (Schlindwein-Zanini and Cruz) as a tool to detect neuropsychological disturbances in major depressive disorder in a 43-year-old female patient in early psychological treatment associated with the evaluation by Motor Development Scale (Rosa Neto, 2002). **Conclusion:** The SZC has proved to be useful in the detection of neuropsychological deficits in depressive disorders at different stages of the treatment. Through MDS (Motor Development Scale) psychomotor changes with depressive disorder have also been evident, especially in the area of balance.

**KEYWORDS:** depression, neuropsychology, psychomotricity

## **SYMPTOMES NEUROPSYCHOLOGIQUES ET PSYCHOMOTEURS DANS LES PATIENTS AVEC ÉPISODE DÉPRESSIF AU DÉBUT ET À LA FIN DU TRAITEMENT**

### **RÉSUMÉ**

**Introduction:** Le tourment dépressif est caractérisé pour des symptômes qui interfèrent dans les activités normales du patient, préjudicant son fonctionnement social, occupationnel, relationnel, et psychomoteur, ayant haute prévalence dans la population mondiale. **But et méthodologie:** le présent article vise rapporter l'utilisation de " l'Inventaire des Altérations neuropsychologiques pour les adultes- SZC" (Schlindwein-Zanini et Cruz) comme instrument de détection des altérations neuropsychologiques dans les tourments dépressifs dans une patiente de 43 ans, sexe féminin, dans le début du traitement psychologique associé à des médicaments, et un an après, en analysant aussi les tourments psychomoteurs associés, à travers d'une évaluation pour L' Échelle du Développement Moteur (Rosa Neto, 2002). **Conclusion:** Le SZC s'est montré utile dans la détection des altérations neuropsychologiques en tourment dépressif en différentes phases du traitement. À travers de la EDM, se sont évidentes aussi les altérations psychomotrices associées au tourment dépressif, spécialement dans le domaine de l'équilibre.

**MOTS-CLÉS:**dépression, neuropsychologie, psycomotricité.

## **NEUROPSICOLÓGICOS Y PSICOMOTRIZ SÍNTOMAS EN PACIENTES CON EPISODIO DEPRESIVO EN EL COMIENZO Y FINAL DEL TRATAMIENTO**

### **RESUMEN**

**Introducción:** El trastorno depresivo es caracterizada por síntomas que interfieren en las actividades normales del paciente, alterando su funcionamiento social, laboral, relaciones y psicomotriz, habiendo alta prevalencia en la población mundial. **Objetivo y metodología:** este artículo tiende a informar el uso de "Inventário de lás alteraciones neuropsicológicas para el adultos - SZC" (Schlindwein-Zanini y Cruz) como instrumento para la detección de alteraciones neuropsicológicas en enfermedad depresiva en un paciente 43 años, género femenino, en el comienzo del tratamiento psicológico con medicamentos, y un año después, analizar también los trastornos asociados psicomotriz, evaluando la Escala de Desarrollo Motor (Rosa Neto, 2002). **Conclusión:** El SZC se muestra útil en la detección de las alteraciones neuropsicológicas en trastorno depresivo en en distintas fases del tratamiento. A través de la EDM, se son evidentes también las alteraciones psicomotoras asociadas al enfermedad depresiva, especialmente en el ámbito de l' equilibrio.

**PALABRAS CLAVE:** depresión, neuropsicología, psicomotricidad.

## **SINTOMAS NEUROPSICOLÓGICOS E PSICOMOTORES EM PACIENTE COM EPISÓDIO DEPRESSIVO EM INÍCIO E TÉRMINO DE TRATAMENTO**

### **RESUMO**

**Introdução:** O transtorno depressivo é caracterizado por sintomas que interferem nas atividades normais do paciente, prejudicando seu funcionamento social, ocupacional, relacional e psicomotor, tendo alta prevalência na população mundial. **Objetivo e metodologia:** O presente artigo visa relatar o uso do "Inventário de Alterações neuropsicológicas para adultos – SZC" (Schlindwein-Zanini e Cruz) como instrumento de detecção de alterações neuropsicológicas em transtorno depressivo em uma paciente de 43 anos, sexo feminino, no início do tratamento psicológico associado a psicofármaco, e um ano depois, analisando também os transtornos psicomotores associados, através da avaliação pela Escala de Desenvolvimento Motor (Rosa Neto, 2002). **Conclusão:** O SZC mostrou-se útil na detecção de alterações neuropsicológicas em transtorno depressivo em diferentes fases de tratamento. Através da EDM, ficaram evidentes também as alterações psicomotoras associadas ao transtorno depressivo, especialmente na área do equilíbrio.

**PALAVRAS CHAVE:** depressão, neuropsicologia, psicomotricidade.