

# „Male Depression“? – first results of a study to a gender-specific expression of depressive symptoms and factors of influence

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## 1. Introduction

Although depression is one of the most prevalent disorders, our understanding of potentially gender-specific expressions of depressive symptoms is still limited. The concept of *male depression (MD)* constitutes that women express more so called typical depressive symptoms while men also offer so called atypical depressive symptoms like aggressiveness, irritability, alcohol misuse. Current findings of studies on this topic are heterogeneous. Moreover the effect of factors like psychiatric comorbidities, gender-related norms & characteristics or personality-related aspects to the expression of depressive symptoms is still unclear.

## 2. Objective

- do any *sex-specific differences* exist in the *atypical expression of symptoms* between male & female patients with a unipolar depressive disorder?
- do factors like *gender-related norms & characteristics* or *personality-related aspects* effect the expression of atypical depressive symptoms?

## 3. Methods

### Inclusion criteria:

- male & female patients with main diagnosis of F32.- or F33.- (ICD-10), treated in in-patient or day clinical setting of a psychiatric hospital (Wahrendorff Clinic)
- treating duration:  $\geq 3$  days
- period: September 2017 – February 2018
- no limitations to: further diagnosis or age or other socio-demographic factors

**Analysis:** self-rating questionnaires

- Gotland Scale of Male Depression (symptom)
- German Extended Personal Attributes Questionnaire (gender-related norms)
- Freiburger Personality Inventory (personality-related aspects )

## 4. Results

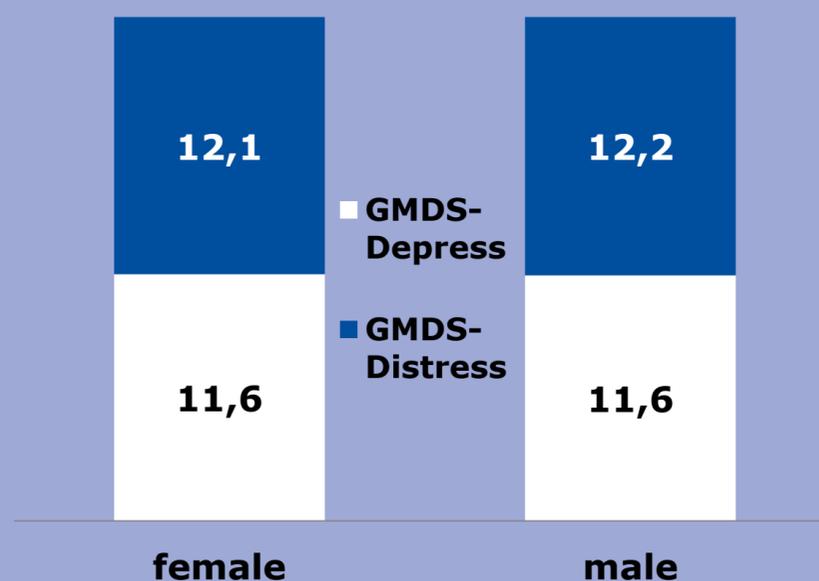
table 1: sample characteristics

| variables           |                |       | female<br>(N = 60) | male<br>(N = 50) | sign.<br>(p)             |
|---------------------|----------------|-------|--------------------|------------------|--------------------------|
| age                 | mean           |       | 40,3               | 37,7             | 0,354 <sup>1</sup>       |
| setting             | in-patient     | n (%) | 49 (67,1)          | 24 (32,9)        | <b>0,000<sup>2</sup></b> |
|                     | day clinical   | n (%) | 11 (29,7)          | 26 (70,3)        |                          |
| diagnosis<br>(main) | F32.- (ICD-10) | n (%) | 20 (51,3)          | 19 (48,7)        | 0,610 <sup>2</sup>       |
|                     | F33.- (ICD-10) | n (%) | 40 (56,3)          | 31 (43,7)        |                          |

statistical significance based on: <sup>1</sup> t-test, <sup>2</sup> Chi<sup>2</sup>-test  
admission: N = 508; drop-out: N = 398; patients to analyse: N = 110

## Result to objective 2a)

bar chart 1: distribution of the Gotland Scale of Male Depression (GMDS) between female & male patients



results based on: ANOVA; N(female) = 60, N(male) = 50  
statistical significance: p = 0.963

**Both sexes with a unipolar depressive disorder show atypical symptoms due to no significant differences regarding GMDS between male & female patients.**

On the basis of the current data, it would appear that atypical symptoms are not primarily dependent on the factor sex. Because of this, the hypotheses of the concept MD has to be considered as critical.

## Results to objective 2b)

Because of the high drop-out rate the current database does not allow any detailed analyses. The effect of the factors *gender-related norms & personality-related aspects* to the expression of atypical depressive symptoms will be analysed in a further study. This study is currently being executed by the authors.