**What are the most commonly reported symptoms of depression amongst Haemodialysis patients? A descriptive comparison of patients from two ethnic backgrounds**

**Objective**: Depression is common amongst patients being treated with haemodialysis (HD) and is typically screened for using self-report measures completed in the English language. This poses practical barriers to providing psychological care for patients from Black and Asian Minority Ethnic (BAME) groups where both language skills and cultural beliefs may impact on willingness to engage with screening instruments. Consequently, there is lack of knowledge on whether depression is experienced in the same way across different cultural and ethnic groups. In this research we draw on data gathered in a larger NIHR funded study into the validation of depression screening tools in South Asian languages for use with HD patients in order to compare and contrast the endorsement of specific symptoms of depression between South Asian and White European patient groups.

**Method**: Two groups of HD patients were recruited from across 9 NHS Trusts in the UK. The first group included patients who identified as being of South Asian origin, and with language skills in Punjabi, Gujarati, Bengali or Urdu. The second group comprised patients from White-European backgrounds who completed study measures in English. Bilingual project workers facilitated recruitment of South Asian patients and supported those who had little or no written language of origin skills to participate. All patients completed a battery of self-report depression screening questionnaires. This descriptive analysis relates specifically to the Beck Depression Inventory (BDI-II), one of the most widely used measures in HD patients.

**Results:** Three-hundred and fifty-five HD patients participated (235 patients of South Asian origin and 120 White-European patients). The three most highly endorsed symptoms of depression across both groups were tiredness, changes in sleep, and loss of energy. Larger percentages of South Asian patients reported sadness, feelings of punishment and loss of interest as common depressive symptoms as compared to the White-European patients. White European patients endorsed irritability more when compared to the South Asian cohort.

**Conclusion:** Our descriptive analysis of the symptoms of depression tapped by the BDI-II suggests that there is considerable overlap in the experiences of HD patients across different ethnic groups, although the extent to which this relates to true depressive experience versus the impact of dialysis itself is questionable as the most common symptoms were all somatic in nature. Nonetheless, patients from both groups appear to be forthcoming in also disclosing cognitive aspects of depressive syndrome, which suggests that regardless of cultural and ethnic factors, exploration of common features of depression measurement tools would form a sound basis from which to facilitate discussions around mood on dialysis. We discuss the findings in the context of other research of a qualitative nature previously funded by the BRS/BKPA in order to inform further the provision of ethnically tailored psychological care for patients from BAME backgrounds.

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