

Mind Matters ECHO

Module: Depression

Session 1: Barriers to Screening for
Depression: Effective Solutions for
Proactive Depression Care Management

May 19, 2021



**Mount
Sinai
Health
Partners**

Case Presentation



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City Care Family Practice



Patient Information

Demographic Information

- 44 year old cis-male
- Attorney, not presently employed (freelance attorney but few opportunities due to the pandemic)
- Lives alone
- Insurance: Medicaid

Medical History

Currently seeing multiple specialists:

- Orthopedics (neck pain)
- Hand surgery (tingling in hands)
- Physical therapy (neck pain)
- Neurology (2 neurologists) (tingling in hands)
- Rheumatology (the neurologists cannot find a problem to treat)

Current Medications

- Meloxicam 7.5 mg daily
- Cymbalta 30 mg daily
- Clonazepam 0.5 mg prn

Current Psychiatric Diagnoses

- Depression

Patient & Case Information

Current Symptoms of Depression

- Sleep
- Energy
- Anhedonia
- Difficulty concentrating
- Lack of motivation

He has had symptoms of depression for years. Previously seeing a psych nurse but changed his insurance and came to our office. Now due to the pandemic his mood, energy, sleep and ability to concentrate have worsened. His focus, however, in his visits with me is neck pain, headaches and a tingling sensation in his hands.

Current Symptoms of Anxiety/Panic

- Paresthesia

He has constant tingling in his hands.

Psychiatric History

- Has seen psychiatrists in the past and has been prescribed Lexapro, Wellbutrin, Prozac and Lamotrigine
- He is currently taking Clonazepam PRN (left over from his time seeing the psych NP)
- Unknown family psych history
- No known substance use past or present
- Unknown history of trauma
- No psychiatric hospitalizations
- No suicidality

Current Treatment Plan for Psychiatric Conditions

- I asked him to have all the specialists send me a report so I can help coordinate his care
- Had a long conversation with him about the possibility that his depression may be exacerbating his neck and hand pain
- Started Cymbalta 30 mg daily (indicated for depression and chronic pain)

Patient & Case Information

Areas of Support and Consultation Being Sought

- Diagnostic clarification
- Pharmacological consultation
- Psychotherapeutic consultation
- Identify appropriate behavioral health referrals
- Identify appropriate psychosocial referrals
- Strategies for engaging the patient and/or their caregivers/family

Main Question

This is a patient who is fixated on his physical symptoms and is seeing multiple specialists. My feeling is that depression and anxiety are playing a major role in his condition. I would like to hear how other providers would deal with this situation.

Depression Screenings in a Primary Care Setting

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Agenda

1. Depression Statistics Overview
2. Depression in Primary Care
3. Risk factors for Depression
4. Symptoms of Depression
5. Barriers to Screening
6. Types of Screenings
7. Strategies for Screening
8. General Resources

Depression Statistics

- ▶ Depression is a leading cause of disability worldwide and is a major contributor to the overall global burden of disease (WHO, 2021)
- ▶ According to the CDC (2019), about 1 one in 5 adults 18 & over experienced depressive symptoms
- ▶ During 8/20–2/21- the percentage of adults with recent symptoms of an anxiety or a depressive disorder increased from 36.4% to 41.5%



Depression in Primary Care

- ▶ Primary care physicians are often the first point of contact for individuals struggling with depression
- ▶ Primary care providers prescribe about 79% of antidepressant medication due to lower cost, easier access etc. (Barkil-Oteo, 2013)
- ▶ In primary care settings, depression goes unrecognized about half the time (APA, 2017)



Risk Factors for Depression

- ▶ Genetic predisposition (family history)
- ▶ Negative or Traumatic Life events
- ▶ Increased stress
- ▶ Limited social support
- ▶ Life transitions
- ▶ Certain medical conditions
- ▶ Hormonal changes/fluctuations

DSM 5 - Symptoms of Depression

- ▶ Low mood
- ▶ Feeling sad, empty, hopeless
- ▶ Decreased interest or pleasure in activities
- ▶ Weight loss or weight gain
- ▶ Hypersomnia or insomnia
- ▶ Psychomotor agitation or retardation
- ▶ Fatigue
- ▶ Difficulty concentrating
- ▶ Suicidal ideation



Severity of Depression

▶ **Mild**

5-6 symptoms but minor impairment in social/occupational functioning

▶ **Moderate**

7-8 symptoms with moderate functional impairment

▶ **Severe**

Almost all symptoms with severe impairment, not able to complete daily tasks, and/or has active suicidal ideation



Barriers to Screening for Depression

- ▶ Stigma associated with mental health diagnoses
- ▶ Physician discomfort in discussing mental health challenges
- ▶ Patient guardedness/lack of understanding re: depression
- ▶ Lack of systematic guidance for integrating mental health screenings into primary care
- ▶ Time limitations
- ▶ Feeling unsure of next steps if screen is positive
- ▶ Lack of referral resources
- ▶ Variation in presentation of symptoms
- ▶ Complicated diagnostic picture/various comorbidities

Screeners for Depression

PHQ-2: Patient Health Questionnaire -2

► *Over the last 2 weeks how often have you felt bothered by the following problems:*

- (a) Little interest or pleasure in doing things
- (b) Feeling down, depressed or hopeless

Response choices:

Not at all - 0

Several days - 1

More than half the days - 2

Nearly every day - 3

****A score of 3 or more is considered clinically significant****



Screeners for Depression

PHQ-9: Patient Health Questionnaire -9

Over the last 2 weeks how often have you felt bothered by the following problems:

- (a) Little interest or pleasure in doing things
- (b) Feeling down, depressed or hopeless
- (c) Trouble falling asleep, staying asleep or sleeping too much
- (d) Feeling tired or having little energy
- (e) Poor appetite or overeating
- (f) Feeling bad about yourself/that you're a failure/let yourself or your family down
- (g) Trouble concentrating i.e. when reading the newspaper or watching television
- (h) Moving/speaking so slowly that other people could have noticed. Or - being so fidgety/restless that you have been moving around a lot more than usual
- (i) Thoughts that you would be better off dead or of hurting yourself in some way

Total scores of 5, 10, 15, and 20 represent mild, moderate, moderately severe and severe depression**

Response choices:

Not at all - 0

Several days - 1

More than half the days - 2

Nearly every day - 3



Strategies for Screening

1. Explain holistic perspective on wellness
2. Ask for consent to ask questions - use open ended questions
3. Assess stress levels and provide psychoeducation on the impact of stress
4. Reflect back what you heard re: patient's stressors
5. Assess for symptoms without naming with diagnosis
6. Validate and normalize patient's experience
7. Assess patient's support system and current coping mechanisms
8. Ask for consent to offer resources
9. Use non-clinical language to introduce various sources of support – doesn't have to be therapy



General Resources ****For patients AND physicians****

1. NY Project Hope Hotline (1-844-863-9314)
2. NYC WELL–Mental health support (1-888-NYC-WELL)
3. Free digital mental health resources through NYC WELL
<https://nycwell.cityofnewyork.us/en/covid-19-digital-mental-health-resources/>
4. Zencare
5. Psychology Today
6. Mount Sinai Outpatient Mental Health Clinics
7. Physicians Support Line (1-888-409-0141)
<https://www.physiciansupportline.com/>
8. COVID Coach App



Behavioral Health at MSHP

Your go-to source for behavioral health information, treatment practices, and resources for you and your patients

Behavioral Health Treatment & Practice Resources

MSHP is here to support you in your care of patients with behavioral health conditions. Find resources for managing your patients and practice, such as our [suicidality video tip series](#), [MSHP Behavioral Health Workgroup](#) information, and our newest initiative: [Mind Matters ECHO](#), a learning collaborative and CME series designed to help primary care providers feel confident in managing behavioral health conditions.



Connect with me!

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New! Behavioral Health at MSHP webpage

Blog & Multimedia



Special Tip Series: Suicidality – Know the Risks

Suicidality is the tenth leading cause of death in the United States. Knowing which patients to have a deeper conversation with can save lives. Watch these videos to know the risk factors and warning signs.

[Suicide Prevention with Dr. Anitha Iyer](#)

[Risk Factors for Suicide with Dr. Anitha Iyer](#)

[Suicide Warning Signs with Dr. Anitha Iyer](#)

<https://mshp.mountsinai.org/web/mshp/behavioral-health>