



Screening for Mental Illnesses at DOCS Health Fairs

Depression, Anxiety & Substance Abuse Screening

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MILLER SCHOOL
of MEDICINE



Mental Health

The World Health Organization defines mental health as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.



World Health
Organization



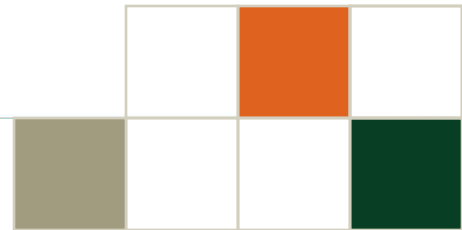
Mental Illness

Medical conditions that disrupt a person's thinking, feeling, mood, ability to relate to others and daily functioning



United States Preventive Services Task Force “USPSTF”

An independent group of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, or preventive medications.



Depression



Major Depressive Episode (DSM-IV)

Five (or more) of the following symptoms have been present during the same **2-week period** and represent a change from previous functioning; at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure

- Depressed mood
- Diminished interest & pleasure
- Change in appetite; weight loss or weight gain
- Insomnia or hypersomnia
- Psychomotor retardation or agitation
- Fatigue/loss of energy
- Feelings of worthlessness; inappropriate guilt
- Diminished ability to concentrate
- Recurrent thoughts of death and/or suicide



Depression Screening

The USPSTF recommends screening adults for depression when staff-assisted depression care supports are in place to assure accurate diagnosis, effective treatment, and follow-up.

Group B Recommendation

The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.



PHQ-9



Available online at www.sciencedirect.com



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Validity of the Brief Patient Health Questionnaire Mood Scale (PHQ-9) in the general population

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The PHQ-9 is a useful tool for recognizing not only major depression, but also subthreshold depressive disorder in the general population



PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

NAME: _____

DATE: _____

Over the last 2 weeks, how often have you been bothered by any of the following problems?
(use "✓" to indicate your answer)

| | Not at all | Several days | More than half the days | Nearly every day |
|--|------------|--------------|-------------------------|------------------|
| 1. Little interest or pleasure in doing things | 0 | 1 | 2 | 3 |
| 2. Feeling down, depressed, or hopeless | 0 | 1 | 2 | 3 |
| 3. Trouble falling or staying asleep, or sleeping too much | 0 | 1 | 2 | 3 |
| 4. Feeling tired or having little energy | 0 | 1 | 2 | 3 |
| 5. Poor appetite or overeating | 0 | 1 | 2 | 3 |
| 6. Feeling bad about yourself—or that you are a failure or have let yourself or your family down | 0 | 1 | 2 | 3 |

Interpretation of Total Score

| Total Score | Depression Severity |
|-------------|------------------------------|
| 1-4 | Minimal depression |
| 5-9 | Mild depression |
| 10-14 | Moderate depression |
| 15-19 | Moderately severe depression |
| 20-27 | Severe depression |

Substance Abuse



Substance Abuse (DSM-IV)

Substance abuse is defined as a maladaptive pattern of substance use leading to clinically significant impairment or distress as manifested by one (or more) of the following, occurring within a 12-month period:

- Failure to fulfill major role obligations at work, school, or home
- Recurrent substance use in situations in which it is physically hazardous
- Recurrent substance-related legal problems
- Continued substance use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of the substance

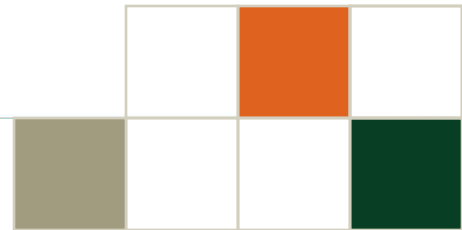


Alcohol Misuse Screening

The USPSTF recommends screening and behavioral counseling interventions to reduce alcohol misuse by adults, including pregnant women, in primary care settings.

Group B Recommendation

The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.



CAGE Questionnaire

JAMA CLASSICS

CELEBRATING 125 YEARS

The CAGE Questionnaire for Detection of Alcoholism

A Remarkably Useful but Simple Tool

SUMMARY OF THE ORIGINAL ARTICLE

Detecting Alcoholism
The CAGE Questionnaire

John A. Ewing, MD

JAMA. 1984;252(14):1905-1907.

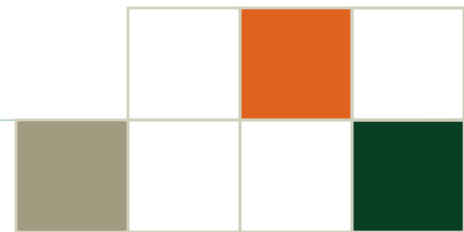
Four clinical interview questions, the CAGE questions, have proved useful in helping to make a diagnosis of alcoholism. The

questions focus on Cutting down, Annoyance by criticism, Guilty feeling, and Eye-openers. The acronym "CAGE" helps the physician to recall the questions.

How these questions were identified and their use in clinical and research studies are described.

See www.jama.com for full text of the original *JAMA* article.

Twenty-five years after the CAGE questions were published in *JAMA*, they have been validated in numerous studies as a good, quick primary indicator of the need for further investigation.



CAGE Questions

1. Have you ever felt you should cut down on your drinking?
2. Have people annoyed you by criticizing your drinking?
3. Have you ever felt bad or guilty about your drinking?
4. Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover (eye-opener)?

Scoring:

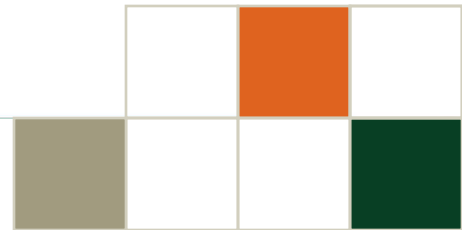
No = 0

Yes = 1

A score of 2 or greater is clinically significant

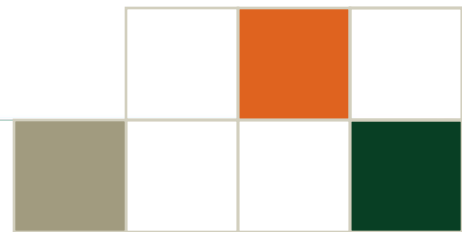


Anxiety



Generalized Anxiety Disorder (DSM-IV)

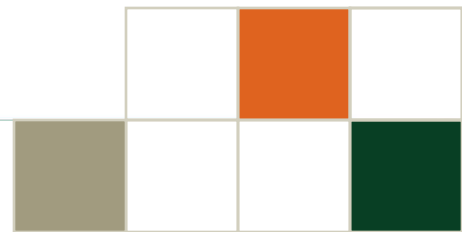
- Excessive anxiety and worry, occurring more days than not for at least 6 months, about a number of events or activities
- The person finds it difficult to control the worry.
- The anxiety and worry are associated with three (or more) of the following six symptoms (with at least some symptoms present for more days than not for the past 6 months)
 - restlessness
 - being easily fatigued
 - difficulty concentrating or mind going blank
 - Irritability
 - muscle tension
 - sleep disturbance



Validation and Standardization of the Generalized Anxiety Disorder Screener (GAD-7) in the General Population

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Dieter Schellberg, PhD,‡ Wolfgang Herzog, MD,‡ and Philipp Yorck Herzberg, PhD†*

Evidence supports reliability and validity of the GAD-7 as a measure of anxiety in the general population



Generalized Anxiety Disorder 7-item (GAD-7) scale

| Over the last 2 weeks, how often have you been bothered by the following problems? | Not at all sure | Several days | Over half the days | Nearly every day |
|--|-----------------|--------------|--------------------|------------------|
| 1. Feeling nervous, anxious, or on edge | 0 | 1 | 2 | 3 |
| 2. Not being able to stop or control worrying | 0 | 1 | 2 | 3 |
| 3. Worrying too much about different things | 0 | 1 | 2 | 3 |
| 4. Trouble relaxing | 0 | 1 | 2 | 3 |
| 5. Being so restless that it's hard to sit still | 0 | 1 | 2 | 3 |
| 6. Becoming easily annoyed or irritable | 0 | 1 | 2 | 3 |
| 7. Feeling afraid as if something awful might happen | 0 | 1 | 2 | 3 |
| <i>Add the score for each column</i> | + | + | + | |
| Total Score (add your column scores) = | | | | |

| GAD-7 Score | Provisional Diagnosis |
|-------------|---------------------------|
| 0-7 | None |
| 8+ | Probable anxiety disorder |



Questions?

