Depression in Primary Care

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http://prezi.com/ylvlomx8ui3/
Introduction

Objectives:
“Educational interventions directed at primary care providers about MDD, its detection, and treatment has not been found to improve recognition, treatment, or outcomes.”

Outline:
Glut of Antidepressants vs. Trap of Meaning
DSM5 Changes: No Bereavement
Rule out Cultural Syndromes
Rule out Bipolar Disorder
Choosing an Antidepressant
Antidepressant Update
Ketamine and Brain Stimulation

Update on Mood Disorders in Primary Care 2014
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Introduction
Why be interested in Depression?

Prevalence in the U.S.
1 year = 6.6%
Lifetime = 16.2%
52% Received any Treatment
22% were Adequately Treated

Bottom Line:
A lot of people are depressed
A lot of people don’t get adequate treatment
Depression is common in primary care

Disability Caused by Depression: Global Burden of Disease 2010

“The Half-Trillion-Dollar Depression”
1. Mental illness is costing us hundreds of billions in obvious ways.
2. And hundreds of billions in less obvious ones.
3. We may need to spend money to save money.

New York Times
July 2, 2013
http://nyti.ms/17QD1O1
Disability Caused by Depression: Global Burden of Disease 2010

Prevalence in the U.S.

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Lifetime = 16.2%

52% Received any Treatment
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Face-to-face household survey, n = 9090

Kessler, R.C et al. The Epidemiology of Major Depressive Disorder: Results From the National Comorbidity Survey Replication (NCS-R). JAMA. 2003;289:3095-3105.

Percentage of primary care patients who meet criteria for Major Depressive disorder:

about 10%

Highlights:
MDD → Chronic disease

Even when MDD is recognized, it is frequently not treated. Why?

Depression Kills

Percentage of primary care patients who meet criteria for Major Depressive disorder:

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Highlights:

MDD —— Chronic disease

Even when MDD is recognized, it is frequently not treated. Why?

Case Vignette#1

59-year-old man has been depressed, with almost daily crying spells for the past two weeks. Poor sleep, concentration, appetite, also anhedonia, but no suicidal ideation

His wife of 25 years died two weeks ago. Would you prescribe an antidepressant?

How much time should elapse before you would prescribe?

A Glut of Antidepressants?

Doctors need to improve their diagnostic skills, Dr. Mojtabai said, and must resist the temptation “to take out the prescription pad and write down an antidepressant and hand it to the patient.”

http://well.blogs.nytimes.com/2013/08/12/a-glut-of-antidepressants/?_php=true&_type=blogs&_r=0

The Trap of Meaning

Finding an explanation that seems meaningful and adopting it as causal.

assigning meaning:
- makes sense of human lives
- helps us cope and adapt
- through empathy, links us to others
- prevents demoralization, isolation, and despair

"meaning" and "cause" are not contradictory, but they are not synonymous

Confusion between them:
- delays mental health care for depression much more than care for diabetes, heart disease, stroke and cancer

Take Home Message
Rather than using psychological interpretations, focus on observations of what the patient is actually experiencing.

Even when confronted with an intuitively plausible set of reasons, continue to look for objective causes of depressive illness.

"In general, major depression can be diagnosed independently of the psychosocial context in which it arises."

John Updike, a Lyrical Writer of the Middle-Class Man, Dies at 76

John Updike, the kaleidoscopically gifted writer... died. ...The cause was cancer.

Facing Losses, Billionaire Takes His Own Life

Adolf Merckle, the German billionaire whose speculation in volatile Volkswagen stock had pushed his sprawling business empire to the edge of ruin, has committed suicide..."No longer being able to handle the situation...he ended his life," the family said.

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What are Validated Risk Factors for Depression?

| Neuroticism | childhood sexual abuse |
| h/o GAD | parental loss |
| h/o phobia | maternal h/o MD |
| h/o panic disorder | paternal h/o MD |
| age of onset of MDD | h/o MD in cotwin |
| parental warmth | prior episode of MD |
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Trap of Meaning references:


The Trap of Meaning

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DSM5 vs RDOCs

Are psychiatric disorders brain disorders?

positive feedback loop

Research Domain Criteria

What is a “cultural syndrome”?*

Case Vignette 1
This man must be depressed, right? He looks like he’s depressed. What is the reason?

Case Vignette 2
His depression is due to rural life, not because he is depressed. What is the reason?

Case Vignette 3
26 yo Caucasian woman with recurrent depression says she was diagnosed several years ago with bipolar disorder. Does she have bipolar disorder?
Important change to DSM5 for Major Depression: Elimination of Bereavement

When is it normal and when is it a mental illness?

Are psychiatric disorders brain disorders?

positive feedback loop
FAULTY CIRCUITS

Neuroscience is revealing the malfunctioning connections underlying psychological disorders and forcing psychiatrists to rethink the causes of mental illness

By Thomas R. Insel

Research Domain Criteria

Domains

- Types
- Constructs

Cut across DSM diagnostic categories
Attempts to classify psychopathology on observable behaviors and neurobiological measures
http://www.nimh.nih.gov/research-priorities/index.htm

Negative Valence Systems
- Acute Threat (Fear)
- Potential Threat (Anxiety)
- Sustained Threat
- Loss
- Frustration

Positive Valence Systems
- Approach motivation
- Initial responsiveness to reward
- Sustained responsiveness to reward
- Reward Learning
- Habit

Cognitive Systems
- Attention
- Perception
- Declarative memory
- Language behavior
- Cognitive (effortful) control
- Working memory

Systems for Social Processes
- Attachment and social communication
- Perception and understanding of self
- Perception and understanding of others

Arousal and Regulatory Systems
- Arousal
- Circadian rhythms
- Sleep and wakefulness

Case Vignette#2

32yo Japanese man
depressed mood, lives at home with parents
extremely socially isolative

Is this depression?
What is a “cultural syndrome”?

Formerly known as culture bound syndromes
Occur only in certain cultures (or subcultures)
Arise out of prevailing cultural beliefs
Recognized by individuals in the culture

Cultural syndromes are best understood from an emergent perspective.
That is, when cultural beliefs interact with individuals to generate illness.

Are there Culture Bound Syndromes in the U.S.?

This satisfies the Cultural linguistic component

**Asian Cultural Syndromes**

Shuo-yang or Koro (Chinese)
Shen-Kui (Chinese)
Shen-jing shuai-ruo -- neurasthenia
Hwa-byeung (Korean)
Taijin kyofusho (Japanese)
Hikikomori (Japanese)
Fan death (Korean)
What are Hikkomori?

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Are there Culture Bound Syndromes in the U.S.?

Eating disorders
Post-traumatic Stress Disorder
individuals to generate illness.

Are there Culture Bound Syndromes in the U.S.?

Eating disorders
Post-traumatic Stress Disorder
Dissociative disorders
Personality disorders
Body Dysmorphic Disorder
Substance Abuse

Mysterious Illness Strikes 12 New York Girls!
What Happened to the Girls in Le Roy?

*This satisfies the Cultural lit*

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Asian Cultural Syndromes
Shuo-yang or Koro (Chinese)
Sheen-Kul (Chinese)
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Hikkomori (Japanese)
Fan death (Korean)

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Are there Culture Bound Syndromes in the U.S.?

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Case Vignette#3

26yo Caucasian woman with recurrent depression says she was diagnosed several years ago with bipolar disorder.

Does she have bipolar disorder?
What is the risk of mood cycling with antidepressants in bipolar disorder?
How to rule out bipolar disorder

“Have you ever in your life ever felt unusually elevated or irritable?”

“Have you ever in your life ever felt unusually elevated or irritable?”
(Mis-)diagnosis of Bipolar Disorder

Mean number of clinicians seen before diagnosis: 4
Mean # of diagnoses before bipolar dx: 3.5
%respondents misdiagnosed: 69%
>1/3 a lapse of 10+years between first visit and then receiving appropriate treatment.


Bipolar Disorder in Primary Care

Of 1146 patients who were screened from a waiting room of a primary care clinic, 112 (9.8%) screened positive for bipolar disorder.

In these 112, primary care providers recognized:

some mental disorder/psychiatric symptoms in 67.7%
depression or depressive symptoms in 49.0%
bipolar disorder in 0%

Das AK et al. JAMA 2005; 293:956-963. Screening for Bipolar Disorder in a Primary Care Practice.
Is Bipolar Disorder Overdx’d?

In this study, less than half of the patients with self-report of bipolar disorder actually had bipolar disorder.

<table>
<thead>
<tr>
<th></th>
<th>SCID dx of bipolar</th>
<th>SCID dx of bipolar</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-reported dx</td>
<td>YES 63</td>
<td>NO 82</td>
<td>145</td>
</tr>
<tr>
<td>Self-reported dx</td>
<td>YES 27</td>
<td>NO 528</td>
<td>555</td>
</tr>
<tr>
<td>Total</td>
<td>90</td>
<td>610</td>
<td>700</td>
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Table: Switch Rates

<table>
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<tr>
<th></th>
<th>Bipolar disorder</th>
<th>Unipolar</th>
</tr>
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<tbody>
<tr>
<td>Without AD</td>
<td>7.5%</td>
<td>1.2%</td>
</tr>
<tr>
<td>With AD</td>
<td>12.5%</td>
<td>6.0%</td>
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Strategies

Collateral information
Get the story
Anticipate patient reactions
Practice!

Obtain Collateral information

Anticipate patient reactions to the interview
Be empathic
But sometimes it helps just to keep the interview moving forward

Get the story

Practice!

“Is it ignorance or is it apathy?”

Obtain Collateral information
Get the story

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“Is it ignorance or is it apathy?”

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“Is it ignorance or is it apathy?”
Techniques
Focus on Prodrome
Behavior Over Mood
Screen high yield periods
Summarize multiple episodes
Quote the patient

Behavior over mood changes

Screen “high yield” periods
Depressive episodes
Geographic moves
Financial stressors
Relationship changes

Summarize multiple episodes
Obtain only as much information as you need.
If multiple episodes, obtain:
Overall number
Frequency
Typical course
Most recent episode
Keep interview smooth, don’t get bogged down!

Write patient’s words in quotes
Everyone’s a skeptic.
“Patient reports a manic episode in February of 2003”

Versus:
“For two months, I felt like a god. Thought I could do anything. I didn’t need to sleep... I got involved in 8-12 different projects at work... people were telling me to slow down...”
Focus on Prodrome

Behavior over mood changes

Behavioral changes, such as increased risky pleasurable behaviors or pressured speech, are often better markers for manic/hypomanic episodes than patient recall of mood elevations.
Screen “high yield” periods

depressive episodes
geographic moves
financial stressors
relationships changes

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Strategies

- Differential diagnosis
- Get the story
- Recognize pattern reactions
- History

Techniques

- Focus on Prodromal Behaviors
- Screen high-risk periods
- Increase medication exposure
- Quit the patient

Case Vignette #4

49yo Caucasian man with depression

Which antidepressant do you choose?
Treatment

How to choose an antidepressant

Antidepressant Controversies

GI Bleeding

QTc and Citalopram

Hyponatremia

SSRIs and osteoporosis

Suicide Risk

http://prezi.com/tgpl6do5pi8i/2014-how-to-choose-an-antidepressant/
Case Vignette #5

58yo Caucasian woman on citalopram 60mg a day on anticoagulants for atrial fibrillation, osteoporosis, depression with prior suicide attempt

What are the risks of SSRIs?

Antidepressant Controversies

GI Bleeding

 QTc and Citalopram

Hyponatremia

SSRIs and osteoporosis

Suicide Risk
Case Vignette #6

36yo woman with recurrent treatment-resistant depression

What do you know about ketamine or transcranial magnetic stimulation?

Ketamine

Primary indication is anesthesia
Case series in chronic pain in terminally ill
NMDA receptor antagonist

Zarate et al. A Randomized Trial of an N-methyl-D-aspartate Antagonist in Treatment-Resistant Major Depression. Arch Gen Psychiatry. 2006;63:856-864

http://healthland.time.com/2013/05/22/club-drug-ketamine-lifts-depression-in-hours/
Brain Stimulation

deep brain stimulation
transcranial magnetic stimulation
electroconvulsive therapy

Deep Brain Stimulation (DBS)

Transcranial Magnetic Stimulation (TMS)

Electroconvulsive Therapy (ECT)
Electroconvulsive Therapy (ECT)

Transcranial Magnetic Stimulation (TMS)
Deep Brain Stimulation (DBS)


Brodman Area 25
(subcallosal cingulate gyrus, SCG)

Brain Stimulation

deep brain stimulation
transcranial magnetic stimulation
electroconvulsive therapy

Deep Brain Stimulation (DBS)

Transcranial Magnetic Stimulation (TMS)

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