

How dimensional rating scales can help

... and not just to satisfy charting requirements

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Screening Measures- Why do we ask?

- Can help normalize/de-stigmatize mental health problems, because “we ask everyone.”
- Focus on specific symptoms rather than a way to make a quick diagnosis
- Matter of fact, annual, screening usually administered by MAs

Depressive symptoms

- Estimated that **50%** of patients who come in for primary care visits have some dimension of depression:
 - from adjustment reactions due to life circumstances
 - persistent depressive disorder (dysthymia)
 - to personality disorders
 - to substance abuse
 - to major depression

Patient Health Questionnaire

PHQ 9

- Validity was established in studies involving 8 primary care and 7 obstetrical clinics
- PHQ scores > 10 have a sensitivity of 88% and specificity for major depression
- PHQ9 scores should be viewed as a range of mood. The cut off scores themselves are less important than the specific symptoms endorsed

PHQ 9

- Very useful and *rarely* given 10th question:

10. If you checked off any problems, how difficult have those problems made it for you to do your work, take care of things at home or get along with other people?

- Not difficult
- somewhat difficult
- very difficult
- extremely difficult

PHQ 9

- Primarily a screening instrument-not an automatic diagnosis tool
- *Can* be used to make a tentative diagnosis, but only with additional query and specific analysis of the questions with all answers in the
 - 2 column=more than $\frac{1}{2}$ the days or
 - 3 column= nearly every day responses
- Must rule out physical causes of depression, normal bereavements and a history of a manic or hypomanic episode;

PHQ 9

Over the past 2 weeks, how often have you been bothered by any of the following problems? 0=not at all, 1=several days, 2=more than ½, 3- nearly every day

1. Little interest or pleasure in doing things
2. Feeling down, depressed or hopeless
3. Trouble falling asleep, staying asleep, or sleeping too much
4. Feeling tired or having little energy
5. Poor appetite or overeating
6. Feeling bad about yourself - or that you're a failure or have let yourself or your family down
7. Trouble concentrating on things, such as reading the newspaper or watching television
8. Moving or speaking so slowly that other people could have noticed. Or, the opposite - being so fidgety or restless that you have been moving around a lot more than usual
9. Thoughts that you would be better off dead or of hurting yourself in some way

PHQ 9

- Ask more about questions #3
- Trouble falling asleep or staying asleep or sleeping too much- must ask for more detail
- Hypersomnia or hyposomnia?
- Pregnant, especially 3rd trimester
- Menopausal

PHQ 9

- Ask more about question #4
- Feeling tired or having little energy?
- Likely will match answers in question #3 so rule out physical causes of fatigue

- Question #5 Poor appetite or overeating?
- Many patients respond positively to this question, but clarification is needed
- Questions 3-4-5 are often not sx's of depression

PHQ 9

- Question #9
- Thoughts of suicide more than half of the days in the past 2 weeks? Thoughts of suicide nearly every day?
- Very obviously this question needs further inquiry
- Always consider calling for a behavioral health clinician consultation/warm handoff for actual risk assessment

Anxiety disorders in Primary Care- Why Screen?

- GAD present in 3% of primary care patients
- OCD in 3% of primary care patients
- Social phobia in 7% of primary care patients
- Panic disorder in 4% Rates are higher among certain patient populations, such as those with cardiac (20% to 50%) or gastrointestinal presentations (28% to 40%).
- PTSD up to 17%

GAD 7

- A screening tool in primary care, often used with patients who present often with minor or somatic complaints.
- GAD 2 can start with very brief questions:
 1. Feeling nervous, anxious or on edge?
 2. Not being able to stop or control worrying?
 - ❖ If positive ask the additional 5 questions for the complete GAD 7 score

When used as a screening tool, further evaluation is recommended when the score is 10 or greater. Using the threshold **score of 10**, the GAD-7 has a sensitivity of **89%** and a specificity of **82%** for GAD.

GAD 7

- Validity was established in studies within primary care clinics
- Scores > 9 correlate moderately with number of visits to primary care and specialty clinics
- Correlates highly with disability states, and patients tend to demand more health care attention with a higher the GAD score

GAD 7

- Although screening tool is called “generalized anxiety disorder scale, it is not recommended that high scores automatically make a diagnosis of either generalized anxiety disorder, panic disorder, OCD or social phobia.
- A more in-depth diagnostic interview is required for a diagnosis
- It is good for detecting nervous, anxious or “on edge” patients who may or may not have other underlying disorders

GAD 7

- In past 2 weeks. . . 0=never 1=several days 2=more than ½ 3= 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
- If you checked off any problems, how difficult have these made it for you to do your work, take care of things at home, or get along with other people?
-
- Not difficult at all _____
- Somewhat difficult _____
- Very difficult _____
- Extremely difficult _____

Source: Spitzer RL, Kroenke K, Williams JBW, Lowe B. A brief measure for assessing generalized anxiety disorder. *Arch Intern Med.* 2006;166:1092-1097.

Social Anxiety Disorder screen

- ❖ 7% of patients you see have it, and it often presents as depression, but ask these 3 Q's!

- ❖ MINI-SPIN - great validity and reliability
 1. Fear of embarrassment causes me to avoid doing things or speaking to people.
 2. I avoid activities in which I am the center of attention.
 3. Being embarrassed or looking stupid are among my worst fears.