QUALITY OF CARE for DEPRESSION and ANXIETY DISORDERS

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BACKGROUND:
Depressive and anxiety disorders are common, and cause substantial disability. Medications and psychotherapies have empirically demonstrated efficacy, but many patients do not receive adequate treatment.

AIM:
To estimate the rate of appropriate treatment of anxiety and depressive disorders in the U.S. population, and the effects of insurance, provider type, and demographics.

METHODS:
Data from the National Comorbidity Survey (1997-98).

MAIN FINDINGS:
During a one year period, 83% of adults with a depressive or anxiety disorder saw a health care provider (95% CI, 81-85%), and 30% received some appropriate treatment (95% CI, 28-33%). Most only saw PCP’s, with 19% of them receiving appropriate care (95% CI, 16-23%). Ninety percent of those visiting mental health professionals received appropriate care (95% CI, 85-94%). Insurance status affected whether the individual saw a provider, but had no effect on whether appropriate care was received. Appropriate treatment was less likely
for men, blacks, the less educated, and those <30 or >59 years old. When a psychiatric medication was used, it was used at an appropriate dose and duration in about 75% of the individuals. For patients seeing PCPs, those who received poor quality care were less likely to report that their mental health problems were evaluated (35.6% vs. 65.3%, p<.0001), that psychiatric drugs were recommended (11.4% vs. 55.7%, p<.0001), or that referral to a mental health specialist was made (4.1% vs. 23.5%, p<.0001) compared to those who received appropriate care. All patients who received poor quality care were less likely to view themselves as needing mental health care (31.4% vs. 70%, p<.0001).

**CONCLUSIONS:**
Most adults in the community with depressive or anxiety disorders do not receive appropriate treatment, especially in certain subgroups, even though the great majority did see health care providers.

**LIMITATIONS:**
Self-report data, response rates

**IMPACT ON INTERNAL MEDICINE:**
In the past, most patients with depressive disorders treated in primary care settings did not receive adequate doses of medication for an adequate duration. This more recent study showed that once prescribed, psychiatric medications were usually given at appropriate dosage and duration. Thus, the current barriers to appropriate treatment of depression and anxiety disorders lie in recognition, diagnosis, referral, and acceptance by patients.