

Title: Depression Screening in Clinic Patients with a Cancer Diagnosis

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Background

Major Depressive Disorder (MDD) has an estimated prevalence of 5-6% in the general population, but an estimated increased prevalence amongst cancer patients (11%). Depression, and more broadly 'Distress' screening has been identified as crucial to the physician assessment of cancer patients. The NCCN guidelines v3.2019 recommends that patients be screened for distress at every medical visit, with appropriate management being treatment and referral to social work, counseling, and mental health services as indicated. This study aims to identify the incidence of primary care encounters in which clinic patients with a cancer diagnosis are screened for depression as compared to the national guidelines.

Methods

A retrospective chart review of a random sample of primary care encounters for patients with a cancer diagnosis seen in the Medicine and Med-Peds Clinics between July 2019 and July 2020. Chart review was used to determine if the patient was screened for depression using a standardized questionnaire such as the PHQ-2 or PHQ-9, and if depression screening was addressed in the assessment/plan.

Results

Of 1142 clinic encounters, 100 patient encounters were randomly selected using a randomization tool and reviewed. The PHQ-2 was administered in 53 of 100 encounters (53%) - 37 of 70 (52.85%) AIMC encounters, 14 of 22 (63.64%) IMMC encounters, and 2 of 8 (25%) Med-Peds encounters. No PHQ-2 questionnaires were positive. The PHQ-9 was administered in 2 of 100 encounters, both resulting in positive screens, but with a negative initial PHQ-2. Referrals to Mental Health were provided in both positive encounters, and medication management initiated in 1 of 2 encounters.

Conclusion

The results demonstrated that depression screening in patients with a cancer diagnosis is underperformed in Medicine and Med-Peds primary care clinic encounters. Incorporation of Depression or 'Distress' Screening as a part of Healthcare Maintenance may allow for earlier diagnosis and treatment of depression.