

# Depression Screening in Clinic Patients with a Cancer Diagnosis

Meghana Subramanian, MD; Rhia Dasgupta, MD; Nebojsa Markovic, MD; Benjamin Simmons, MD; Kathleen Pergament, DO; Aleksey Tentler, MD

## Background

Major Depressive Disorder (MDD) has an estimated prevalence of 5-6% in the general population, however, has an estimated increased prevalence of 11% amongst patients with cancer.<sup>1</sup> Depression, and more broadly 'Distress' screening has been identified as a crucial part of the physician assessment of a cancer patient. 'Distress' in cancer is defined as "a multifactorial unpleasant experience of a psychological (i.e. cognitive, behavioral, emotional,) social, spiritual and/or physical nature that may interfere with the ability to cope effectively..."<sup>2</sup> The NCCN guidelines Version 3.2019 describes the "standards of care for distress management." It is recommended that patients ideally 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.

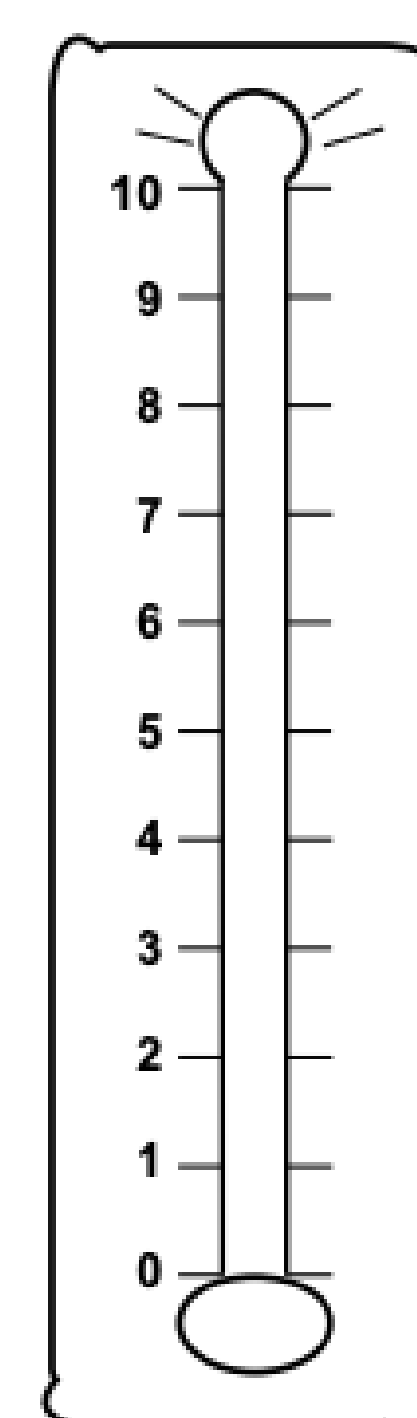
## NCCN Distress Screening Measures

**Problem List**

Please indicate if any of the following has been a problem for you in the past week including today. Be sure to check 'Yes or No' for each.

<p><b>Yes No</b></p> <p><b>Practical Problems</b></p> <p><input type="checkbox"/> Child care</p> <p><input type="checkbox"/> Food</p> <p><input type="checkbox"/> Housing</p> <p><input type="checkbox"/> Insurance/financial</p> <p><input type="checkbox"/> Transportation</p> <p><input type="checkbox"/> Work/school</p> <p><input type="checkbox"/> Treatment decisions</p> <p><b>Family Problems</b></p> <p><input type="checkbox"/> Dealing with children</p> <p><input type="checkbox"/> Dealing with partner</p> <p><input type="checkbox"/> Ability to have children</p> <p><input type="checkbox"/> Family health issues</p> <p><b>Emotional Problems</b></p> <p><input type="checkbox"/> Depression</p> <p><input type="checkbox"/> Fears</p> <p><input type="checkbox"/> Nervousness</p> <p><input type="checkbox"/> Sadness</p> <p><input type="checkbox"/> Worry</p> <p><input type="checkbox"/> Loss of interest in usual activities</p> <p><input type="checkbox"/> Spiritual/religious concerns</p> <p>Other Problems: _____</p>	<p><b>Yes No</b></p> <p><b>Physical Problems</b></p> <p><input type="checkbox"/> Appearance</p> <p><input type="checkbox"/> Bathing/dressing</p> <p><input type="checkbox"/> Breathing</p> <p><input type="checkbox"/> Changes in urination</p> <p><input type="checkbox"/> Constipation</p> <p><input type="checkbox"/> Diarrhea</p> <p><input type="checkbox"/> Eating</p> <p><input type="checkbox"/> Fatigue</p> <p><input type="checkbox"/> Feeling swollen</p> <p><input type="checkbox"/> Fevers</p> <p><input type="checkbox"/> Getting around</p> <p><input type="checkbox"/> Indigestion</p> <p><input type="checkbox"/> Memory/concentration</p> <p><input type="checkbox"/> Mouth sores</p> <p><input type="checkbox"/> Nausea</p> <p><input type="checkbox"/> Pain</p> <p><input type="checkbox"/> Nose dry/congested</p> <p><input type="checkbox"/> Pain</p> <p><input type="checkbox"/> Sexual</p> <p><input type="checkbox"/> Skin dry/itchy</p> <p><input type="checkbox"/> Sleep</p> <p><input type="checkbox"/> Substance use</p> <p><input type="checkbox"/> Tingling in hands/feet</p>
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Extreme distress



No distress

## Aim

The aim of this study is 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. We hope to propose a plan to streamline and increase the frequency of depression screening in this specific patient population. With increased screening, we may identify signs/symptoms of depression earlier and improve patient outcomes with appropriate management of depression with medication and/or mental health referrals.

## Methods

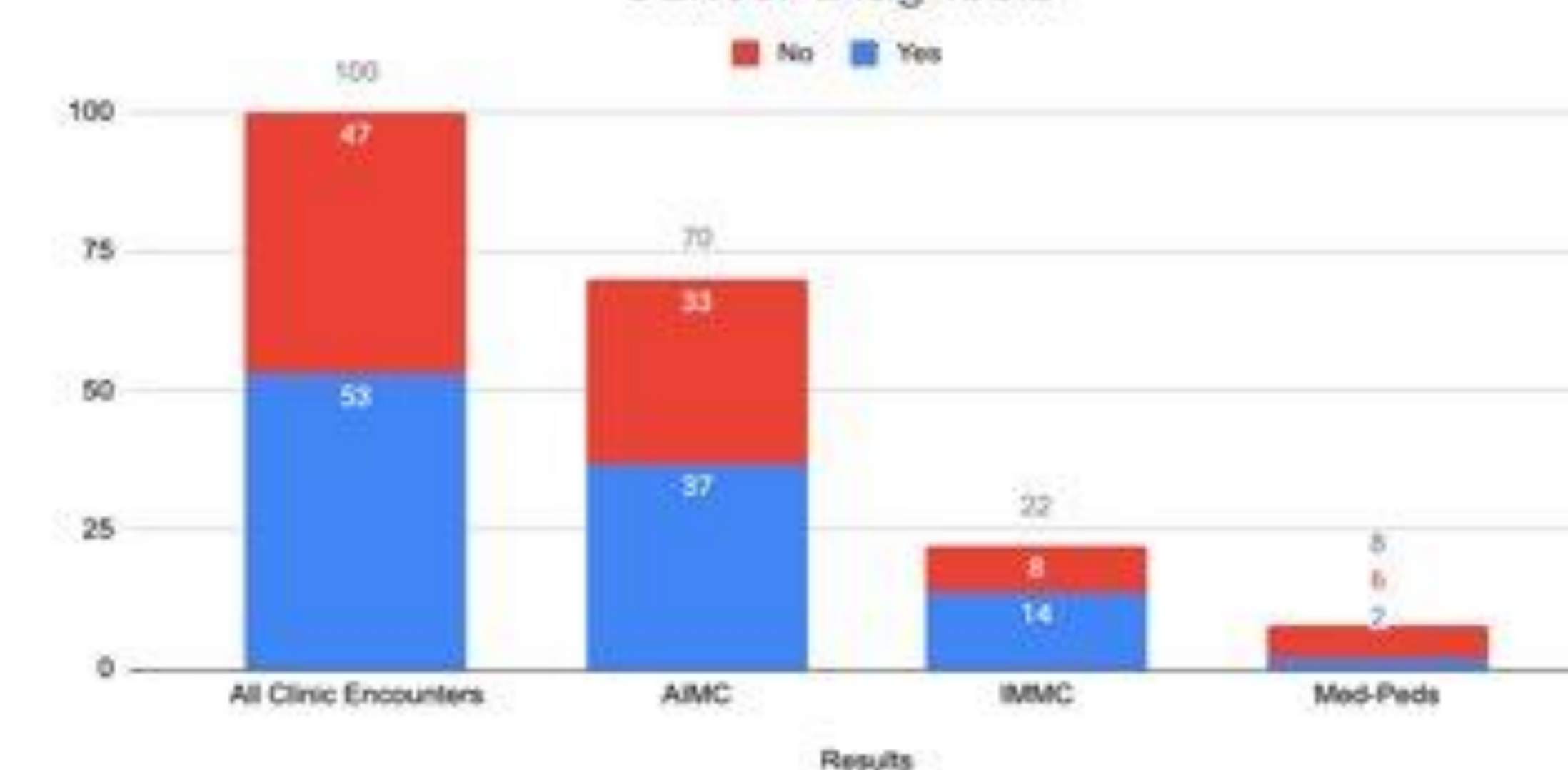
- Retrospective Study
- Chart review using EPIC EMR: Review of encounter intake screening and encounter notes
- A randomized sample of 100 patients from the Internal Medicine and Med-Peds Clinic that fit inclusion criteria from July 2019 – July 2020
- Inclusion Criteria: patients with a current or prior diagnosis of cancer, primary care encounter
- Exclusion Criteria: no cancer diagnosis (i.e. pre-cancerous lesion), cancer screening without cancer diagnosis, encounters for COVID screening or INR check

## Results

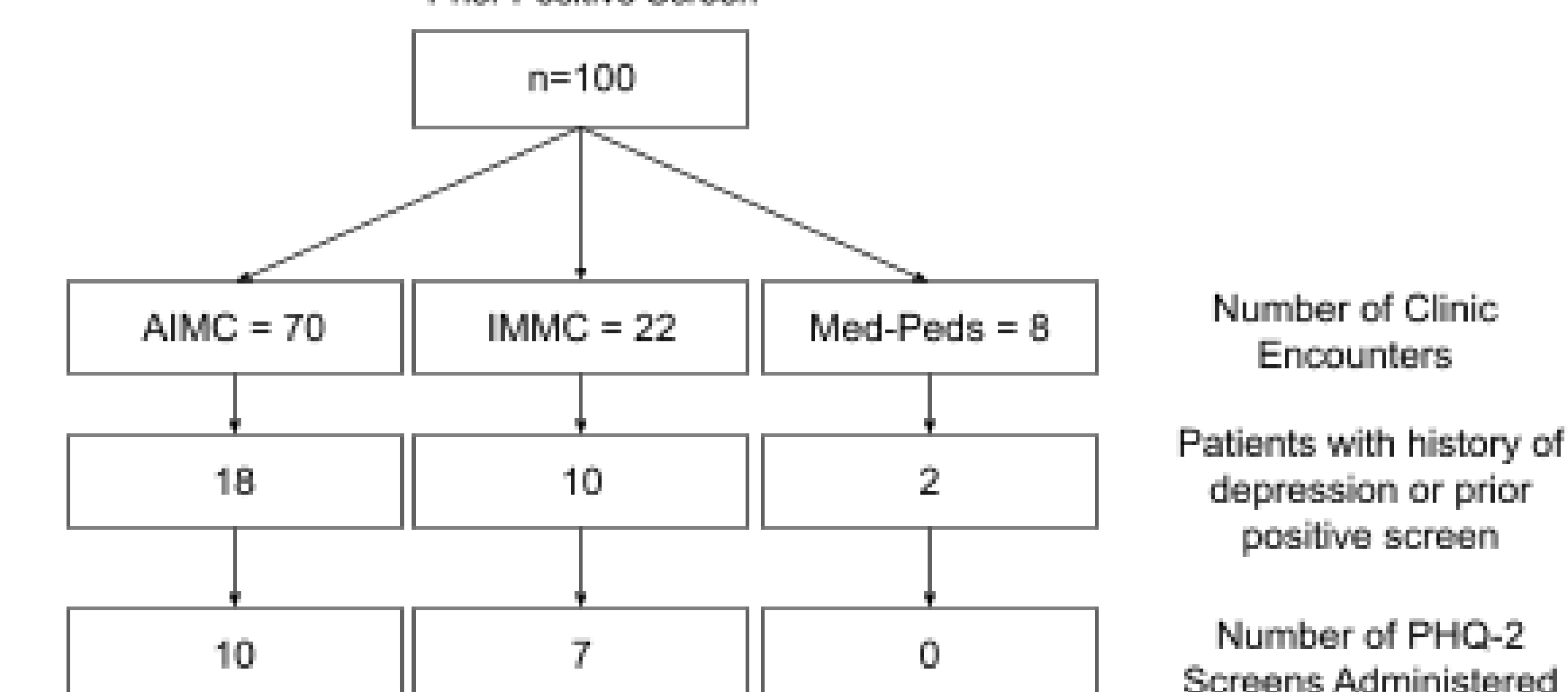
Of 1142 clinic encounters, 100 patient encounters were randomly selected using a randomization tool and reviewed. The PHQ-2 was administered in 53 of 100 encounters (53%) - 37 of 70 (52.85%) AIMC encounters, 14 of 22 (63.64%) IMMC encounters, and 2 of 8 (25%) Med-Peds encounters. Of the 53 PHQ-2 questionnaire screens, none 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. Of the 100 encounters, 30 patients had a prior diagnosis of depression or prior positive screen. A PHQ-2 was administered in a total of 17 of 30 encounters (56.67%), and only 1 PHQ-9 was administered in 30 encounters. Depression was addressed in the assessment and plan in only 7 of 30 encounters for those with a prior history (23.3%).

## Results

PHQ-2 Administration in Clinic Encounters of Patients with a Cancer Diagnosis



Depression Screening in Patients with History of Depression or Prior Positive Screen



## Conclusions

- Our data showed 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
- Education on how to utilize EPIC tools to document PHQ-2 and PHQ-9 in flowsheets may aid in ease of documentation and thereby increasing the incidence of screening

## References

1. Meijer, A., Roseman, M., Milette, K., Coyne, J. C., Stefanek, M. E., Ziegelstein, R. C., ... & Thombs, B. D. (2011). Depression screening and patient outcomes in cancer: a systematic review. *PLoS one*, 6(11), e27181.
2. National Comprehensive Cancer Network. (2019). *NCCN Guidelines for Distress Management (version 3.2019)*. Retrieved from [https://www.accc-cancer.org/docs/projects/psychosocial-distress-screening/nccn-distress\\_5-6-2019.pdf?sfvrsn=882ba01\\_2](https://www.accc-cancer.org/docs/projects/psychosocial-distress-screening/nccn-distress_5-6-2019.pdf?sfvrsn=882ba01_2)
3. National Comprehensive Cancer Network. (2020). *NCCN Guidelines for Patients Distress During Cancer Care (version 2.2020)*. Retrieved from <https://www.nccn.org/patients/guidelines/content/PDF/distress-patient.pdf>