

Putting Prevention into Practice

An Evidence-Based Approach

Screening for Depression in Adults

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► See related U.S. Preventive Services Task Force Recommendation Statement at <http://www.aafp.org/afp/2016/0815/od1.html>.

This PPIP quiz is based on the recommendations of the USPSTF. More information is available in the USPSTF Recommendation Statement and the supporting documents on the USPSTF website (<http://www.uspreventiveservicestaskforce.org>). The practice recommendations in this activity are available at <http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/depression-in-adults-screening1>.

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A collection of Putting Prevention into Practice published in *AFP* is available at <http://www.aafp.org/afp/ppip>.

CME This clinical content conforms to AAFP criteria for continuing medical education (CME). See CME Quiz Questions on page 270.

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Case Study

A.B., a 29-year-old man, presents to your office for a routine visit. He has a history of being overweight and has hypertension that is controlled by diet and exercise.

Case Study Questions

1. According to the U.S. Preventive Services Task Force (USPSTF), which one of the following services should you provide as part of A.B.'s routine care?

- A. Screen for depression only if he reports symptoms suggestive of depression.
- B. Screen for depression.
- C. Screen for depression and prescribe medication if the screening results are positive.
- D. Screen for depression only if he has a family history of depression.
- E. Do not screen for depression.

2. A.B. tells you that his wife is 16 weeks pregnant with their first child. Her pregnancy so far has been uncomplicated, and she is otherwise healthy. A.B. wants to know if she should be screened for depression. Based on the USPSTF's recommendation, which of the following statements are correct?

- A. She should be screened for depression.
- B. She should wait until after delivery and be screened for postpartum depression.
- C. She should not be screened for depression because the pregnancy is uncomplicated and the treatments for depression have adverse effects.
- D. If she requires treatment for depression, cognitive behavior therapy improves outcomes in pregnant women with depression.

3. Your practice is discussing how to implement the USPSTF's recommendations for screening for depression in adults. Which one of the following must be in place before screening patients for depression in a clinical practice?

- A. A dedicated nurse with psychiatric training who can administer the screening test.
- B. Systems and clinical staff to ensure that patients are screened and, if they screen positive, are appropriately diagnosed and treated with evidence-based care or referred to a setting that can provide the necessary care.
- C. The ability to refer patients to a local psychiatrist.
- D. A pharmacist who is familiar with the risk-benefit profiles of different antidepressants.
- E. A system to ensure that every patient is screened.

Answers appear on the following page.

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Answers

1. **The correct answer is B.** The USPSTF recommends screening for depression in all adults regardless of risk factors. All positive screening results should lead to additional assessment that considers the severity of depression and comorbid psychological problems (e.g., anxiety, panic attacks, substance abuse), alternate diagnoses, and medical conditions.

2. **The correct answers are A and D.** The USPSTF found adequate evidence that programs combining depression screening with adequate support systems in place improve clinical outcomes (reduction or remission of depression symptoms) in adults, including pregnant and postpartum women. The USPSTF also found adequate evidence that treatment with cognitive behavior therapy improves clinical outcomes in pregnant and postpartum women with depression.

3. **The correct answer is B.** The USPSTF recommends that screening be implemented with systems and clinical staff in place to ensure that patients are screened and, if they screen positive, are appropriately diagnosed and treated with evidence-based care or referred to a setting

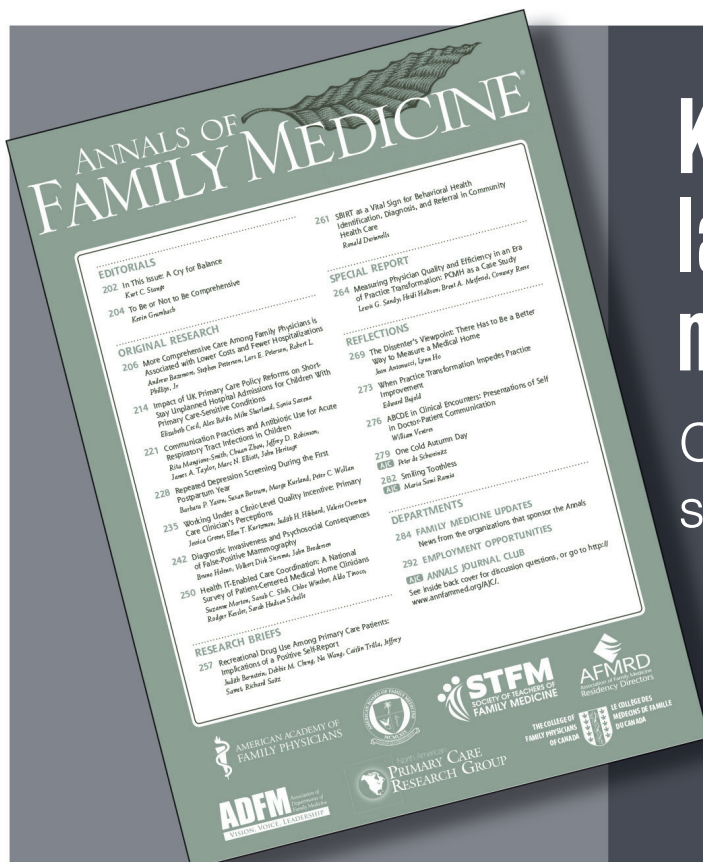
that can provide the necessary care. These essential functions can be provided through a wide range of clinician types and settings. Clinicians must determine the best way to accomplish this in their own practice setting. This represents a change from the 2009 USPSTF recommendation, which recommended against routine screening if staff-assisted depression care supports were not in place, in recognition that such support is now more widely available and accepted as part of current clinical practice.

The views expressed in this work are those of the authors, and do not reflect the official policy or position of the Uniformed Services University of the Health Sciences, the Department of Defense, or the U.S. government.

SOURCES

U.S. Preventive Services Task Force. Screening for depression in adults: U.S. Preventive Services Task Force recommendation statement. *JAMA*. 2016;315(4):380-387.

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