

Depression screening aids behavioral care referrals for breast cancer patients

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Reuters Health - 21/01/2022 - Breast cancer patients who receive depression screening as part of medical oncology checkups are more likely to receive behavioral health referrals than those who don't get screened, a clinical trial finds.

Researchers randomized six medical centers in Southern California 1:1 to provide 1,436 patients with newly diagnosed breast cancer either usual care, consisting of education on depression, or a screening intervention designed to identify people in need of behavioral health referrals. At the three intervention sites, patients were screened using the nine-item Patient Health Questionnaire (PHQ-9) and referred for behavioral health care based on whether they had low, moderate, or high scores.

Overall, 59 of 744 (7.9%) patients at the intervention sites were referred for behavioral health services, compared with 1 of 692 (0.1%) at the control sites. The referrals were completed by 44 of 59 (75%) patients at the intervention sites and by the only patient referred at control sites.

"Depression screening in medical oncology is critically important, as patients with cancer may experience high levels of distress during and after their treatment," said lead study author Erin Hahn of the Kaiser Permanente Southern California Department of Research & Evaluation in Pasadena.

"Our results show that implementing guideline-recommended depression screening programs is feasible with pre-implementation planning to select strategies to support the program and ensuring that the program suits local resources," Hahn said by email.

Most of the patients at both the intervention (87%) and control (84%) sites had early-stage 0-IIb breast cancer, and the median Charleston Comorbidity Index score in both groups was 1.0. While nearly all patients were women, there were four men in the intervention group and three men in the control group.

Among the 10% of patients in the intervention group with PSQ-9 scores indicating a need for referrals for mental health services, 94% received referrals.

Patients in the intervention group had significantly fewer clinic visits to the oncology departments (rate ratio 0.86), although there was no meaningful difference between groups in outpatient visits for primary care, urgent care, or emergency department service utilization.

One limitation of the study, the authors note in JAMA, is that they lacked data on mental health outcomes for patients who received referrals to mental health services. Results from breast cancer patients also may not be generalizable to people with other types of malignancies, they add.

More research is needed to better understand the clinical benefit and cost-effectiveness of this type of intervention, the study team writes. However, Hahn said, based on the success of the intervention at the three centers that implemented it, depression screening initiatives are being rolled out at all Kaiser Permanente medical oncology departments in Southern California.

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