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Review article

Screening instruments for assessment of depression

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ABSTRACT

Globally, more than 350 million people of all ages suffer from depression. In spite of the high burden, depression is often unrecognized and undertreated. Inaccurate assessment is one of the important barriers for effective care. Clinical diagnosis is considered as the gold standard for the diagnosis of depression. However, the available instruments help to estimate the burden of depression in epidemiological studies as well as help to screen, diagnose and monitor the treatment in clinical practice. Screening instruments are very useful in community surveys, and can be used for referring patients to psychiatrists. Hence, there is a need to understand the different scales of depression, their advantages, limitations and psychometric properties. This article summarizes various available instruments for assessment of depression and their properties.

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1. Introduction

Depression is a common mental disorder, characterized by sadness, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, feeling of tiredness, and poor concentration. These problems can become chronic or recurrent, and lead to substantial impairment in an individual's ability to take care of his or her everyday responsibilities [1]. It is the most common cause of suicide. Globally, more than 350 million people of all ages suffer from depression [2]. According to the WHO Global Burden of Disease report 2004, depression was one of the leading contributors to the burden of disease during 2000–2002, ranked as third worldwide [3]. It is projected to reach second place in the DALYs lost (Disability Adjusted Life Years) ranking worldwide by the year 2020, and the first place by 2030 [4]. In spite of the high burden, depression is often unrecognized and undertreated [5]. Diagnosis of depression by a non-specialist is haphazard. Nearly 30–50% patients with depression are missed during diagnosis by a primary care physician [6].

One of the major challenges faced by India in delivering comprehensive psychiatric services in the community is lack of mental health manpower, with <1 Psychiatrist for 100,000 population [7]. Average national deficit of psychiatrists is estimated to be 77% and it is more than 90% for one third of the country's population [8]. At the same time, the insufficient training (1.4% lecture time of the total) in the subject of psychiatry during undergraduate training renders non-psychiatrist physicians unprepared to competently deal with mental illnesses including depression [8]. Less than half of the affected people (fewer than 10% in some countries) receive treatment even though the effective treatment against depression is available. Inaccurate assessment is one of the important barriers for effective care [2].

Clinical diagnosis is considered as the gold standard for the diagnosis of depression. However, the available instruments help to estimate the burden of depression in epidemiological studies as well as help to screen, diagnose and monitor the treatment in clinical practice. Screening instruments are very useful in community surveys, and can be used for referring patients to psychiatrists. Hence, there is a need to understand the different scales of depression, their advantages, limitations and psychometric properties. This article summarizes various available instruments for assessment of depression and their properties.

A summary of various scales is provided in Table 1.

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Table 1
Screening instruments for assessment of depression.

| Name of scale | Developed by (persons) and year | Used for (conditions) | Age-group (in year) | Time taken to administer and number of items | Sensitivity and specificity | Free or Purchased and website link of the scale | Self- or interviewer-administered | Special features, if any |
|--|---|---|-----------------------|---|--|--|------------------------------------|--|
| 1. Beck Depression Inventory | Beck et al., 1961 | Measure severity of depression in diagnosed patients (monitor the treatment in clinical practice) | >13 | 5–10 min 21 items | Sensitivity – 97% Specificity – 99% (BDI-PC) | Purchased Psychcorp.com | Self-administered | Beck Depression Inventory for Primary care is a seven item screening tool |
| 2. Zung Self-Rated Depression Scale | W.W. Zung, 1965 | Measure severity of depression in diagnosed patients (monitor the treatment in clinical practice) | Adult | 5–10 min 20 items | | Free www.mentalhealthministries.net/resources/flyers/zung_scale/zung_scale.pdf | Self-administered | Also been used as a screening tool in general practice. Can be used among elderly persons |
| 3. Center for Epidemiologic Studies Depression Scale | Radloff et al., 1977 | Identify depression in the general population | Adult | 5–10 min 20 items | | Free cesd-r.com | Self-administered | Widely used in community mental health assessment surveys |
| 4. WHO (five) well being index | Mental Health Centre North Zealand, Hillerød, Denmark, 1998 | Screening tool in primary and secondary health care settings | >9 | 2–3 min 5 items | Sensitivity – 94% Specificity – 78% | Free www.psykiatrirregionh.dk/who5/Documents/WHO5_English.pdf | Self-administered | Also measures current mental wellbeing (in last 2 week) |
| 5. Hospital Anxiety and Depression Scale (HADS) | Zigmond and Snaith, 1983 | Assessment of depression in hospital Outpatient clinic | Adult | 7 items for anxiety and 7 items for depression | Sensitivity – 80% Specificity – 80% | Free http://www.scalesandmeasures.net/files/files/HADS.pdf | Self-administered | Also measures Anxiety |
| 6. Cornell Scale for Depression in Dementia | Alexopoulos et al., 1988 | Screen of depression in elderly patients with cognitive deficits | Elderly (≥ 60) | Total 30 min (10 min with patient and 20 min with informant) 19 item | Sensitivity – 93% Specificity – 97% | Free http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.461.315&rep=rep1&type=pdf | Interviewer administered | Only one scale which has been validated in demented and non-demented elderly persons |
| 7. Patient Health Questionnaire | Kroneke et al., 2001 | Screening tool in primary care settings | Adult | 9 items | Sensitivity – 80% Specificity – 92% | Free http://www.phqscreeners.com/ | Self-administered | PHQ-2 is useful in time constraint situation |
| 8. Hamilton Depression Rating Scale | Max Hamilton, 1960 | Measure severity of depression in diagnosed patients (monitor the treatment in clinical practice) | Adult | 20–30 min 17 items (4 items added in HDRS-21 to measure subtype of depression) | | Free http://www.npcrc.org/files/news/hamilton_depression_scale.pdf | Interviewer administered | Scale was designed as unstructured clinical interview. Structured interview guides, self-report forms, and computerized versions have been developed |
| 9. Major Depression Inventory | Bech et al., 2001 | Screening tool for depression | Adult | 10 functional items (total 12 items) | Sensitivity – 86–92% Specificity – 82–92% | Free https://www.psykiatri-regionh.dk | Self-administered | |
| 10. Geriatric Depression Scale | Yesavage et al., 1982 | Screening of depression in elderly persons | Elderly (>60 year) | 8–10 min 30 items | Sensitivity – 55–100% Specificity – 81% | Free http://web.stanford.edu/~yesavage/GDS.html | Self- or Interviewer administered/ | GDS does not maintain its validity in persons with dementia |
| 11. Edinburgh Postnatal Depression Scale | Edinberg, 1987 | Screening tool primary care | | 5 min 10 items | Sensitivity – 86% Specificity – 78% | Free https://pesnc.org/wpcontent/uploads/EPDS.pdf | Self-administered | Post-partum, pregnancy |
| 12. Children's Depression Inventory | Kovacs M. and Beck A.T. | Assess depression in children and adolescents (School and pediatrics clinic) | 7–17 | 15 min 27 items | | Purchased http://www.mentalhealthpromotion.net/resources/cdi-info1.pdf | Interviewer administered | CDI 2 (updated recent version) is available in paper-and-pencil with MHS Quikscore, through the MHS Online Assessment Center and software formats |
| 13. Montgomery and Asberg Depression Rating Scale | Montgomery and Asberg, 1979 | Detect the effect of antidepressant treatment | Adult | 10–15 min 10 items | | Free http://www.psy-world.com/madrs.htm | Interviewer administered | Structured interview guide for the MADRS (SIGMA) is available |

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