Major Depression in the National Comorbidity Survey–Adolescent Supplement: Prevalence, Correlates, and Treatment

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Objective: To present the 12-month prevalence of *DSM-IV* major depressive disorder (MDD) and severe MDD; to examine sociodemographic correlates and comorbidity; and to describe impairment and service use.

Method: Data are from the National Comorbidity Survey–Adolescent Supplement (NCS-A), a nationally representative survey of 10,123 adolescents aged 13 to 18 years that assesses *DSM-IV* disorders using the Composite International Diagnostic Interview (CIDI) Version 3.0. One parent or surrogate of each participating adolescent was also asked to complete a self-administered questionnaire.

Results: Lifetime and 12-month prevalence of MDD were 11.0% and 7.5%, respectively. The corresponding rates of severe MDD were 3.0% and 2.3%. The prevalence of MDD increased significantly across adolescence, with markedly greater increases among females than among males. Most cases of MDD were associated with psychiatric comorbidity and severe role impairment, and a

substantial minority reported suicidality. The prevalence of severe MDD was about one-fourth of that of all MDD cases; estimates of impairment and clinical correlates were of 2- to 5-fold greater magnitude for severe versus mild/moderate depression, with markedly higher rates for suicidal thoughts and behaviors. Treatment in any form was received by the majority of adolescents with 12-month *DSM-IV* MDD (60.4%), but only a minority received treatment that was disorder-specific or from the mental health sector.

Conclusion: Findings underscore the important public health significance of depression among US adolescents and the urgent need to improve screening and treatment access in this population.

Key Words: adolescence, depression, epidemiology, service use

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ental disorders are the leading cause of years lived with disability (YLD) worldwide, but 40.5% of this burden is uniquely attributable to major depression. Recent estimates of the prevalence of major depression indicate that 16.6% of adults have been depressed at some point in their lifetime.² More than half of individuals who recover from a first episode of depression will have at least 1 additional episode in their lifetime, approximately 80% of those with a history of 2 episodes will experience a recurrence,³ and nearly 20% of individuals with depression have episodes that last more than 24 months.⁴ In adolescence, rates of depression increase substantially between 13 and 18 years of age, and the estimated cumulative incidence in this population approximates the adult lifetime prevalence rate. ^{2,5,6} However, despite its early onset and protracted course, only 1% of US youth are treated in an outpatient setting for depression each year.⁷ These findings highlight adolescence as a critical developmental period for identifying high-risk individuals and preventing the incidence of this disorder.



Supplemental material cited in this article is available online.

Efforts to minimize the individual and public health burden of major depression are contingent upon obtaining accurate information concerning the scope, correlates, and clinical characteristics of this condition in the general population. Ultimately, this information can be used to frame future research efforts and to set an agenda for the allocation of screening, treatment, or prevention resources. In general, such information has been lacking from nationally representative samples of adolescents. Although 2 recent reports provided estimates of the 12-month prevalence of major depressive disorder (MDD) among 8- to 15-year-olds (2.7%)⁸ and among 12- to 17-year-olds (8.2%),⁹ neither of the studies included assessment of the full range of current *DSM-IV* mental disorders in a comprehensive depiction of depression.

The National Comorbidity Survey-Adolescent Supplement (NCS-A) provides the opportunity to examine the full range of issues in a large, nationally representative sample of 13- to 18-year-olds, representing the critical developmental period for the onset of depression. Furthermore, recent analyses of depression in adolescents have found that many individuals meeting *DSM-IV* criteria for depression have a severe or highly impairing form of this disorder, ¹⁰ but few studies have examined whether correlates vary for the severe and nonsevere manifestations. This report does the following: presents the 12-month prevalence estimates of *DSM-IV* MDD, mild/moderate MDD, and a severe form of

TABLE 1 12-Month Prevalence Estimates and Demographic Correlates of DSM-IV, Severe, and Mild/Moderate Major Depressive Disorder (MDD; N = 10,123)

Correlate	n	DSM-IV MDD (Total)			Severe MDD			Mild/Moderate MDD		
		%	αOR	95% CI	%	aOR	95% CI	%	αOR	95% CI
Sex										
Female	5,170	10.7	2.48	1.93- 3.18	3.6	3.59	2.14-6.00	7.1	2.05	1.53-2.74
Male	4,953	4.6	1.00		1.0	1.00		3.5	1.00	
Wald χ^2_{1}			53.7			25.0			24.9	
p			0.000			0.000			0.000	
Age, y										
13	1,652	4.5	1.00		0.5	1.00		4.0	1.00	
14	2,218	5.5	1.24	0.74-2.09	1.0	1.93	0.75-4.98	4.6	1.15	0.61-2.15
15	1,887	8.6	1.92	1.26-2.94	2.0	3.92	1.41-10.90	6.5	1.62	1.04-2.54
16	2,010	8.7	2.01	1.38-2.92	3.9	8.04	3.26-19.81	4.7	1.18	0.77-1.81
17	1,758	10.0	2.36	1.47-3.79	3.3	6.77	2.56-17.92	6.7	1.71	1.02-2.87
18	598	8.1	1.87	1.09-3.23	4.0	8.29	3.04-22.59	4.1	1.03	0.51-2.08
Wald χ^2_5			21.6			50.5			8.8	
p p			0.001			0.000			0.118	
Race/ethnicity										
Hispanic	1,914	8.9	1.35	0.97-1.90	2.5	1.28	0.85-1.94	6.4	1.36	0.85-2.17
Non-Hispanic black	1,953	8.0	1.16	0.95-1.41	2.6	1.27	0.74-2.19	5.5	1.10	0.80-1.53
Other	622	8.3	1.26	0.82-1.94	3.3	1.71	1.07-2.75	5.0	1.06	0.54-2.05
Non-Hispanic white	5,634	7.1	1.00	0.02 1.74	2.1	1.00	1.07 2.73	5.0	1.00	0.54 2.65
Wald χ^2_3	3,004	7.1	4.4		2.1	5.5		5.0	1.8	
			0.219			0.141			0.621	
p Poverty index ratio			0.217			0.141			0.021	
•	1,717	0 2	1.04	0.76 1.44	2.4	1.07	0.55.2.06	5 0	1 02	0.70 1.20
≤1.5 Poor		8.2		0.76-1.44	2.4		0.55-2.06	5.8	1.03	0.78-1.38
≤3.0 ≤4.0	2,023	6.5	0.82	0.58-1.17	2.1	0.93	0.60-1.43	4.3	0.79	0.49-1.26
≤6.0 	3,101	7.7	0.99	0.76-1.30	2.2	0.96	0.51-1.81	5.5	1.01	0.75-1.35
>6.0	3,282	7.7	1.00		2.4	1.00		5.3	1.00	
Wald χ^2_3			2.2			0.5			1.6	
p			0.529			0.925			0.648	
Parents' education										
Less than high school	1,684	6.9	0.89	0.65-1.22	1.9	0.88	0.45-1.70	4.9	0.91	0.62 - 1.32
Graduated high school	3,081	7.5	1.00	0.74-1.34	2.4	1.09	0.66-1.80	5.1	0.96	0.69-1.33
Some college	1,998	8.6	1.20	0.85-1.71	2.7	1.29	0.76-2.19	5.9	1.15	0.73-1.81
Graduated college	3,360	7.3	1.00		2.2	1.00		5.1	1.00	
Wald χ^2_3			4.4			1.7			1.2	
p			0.225			0.627			0.747	
Region										
Northeast	1,868	9.0	1.25	0.82 - 1.92	1.9	0.60	0.34-1.07	<i>7</i> .1	1.74	1.13-2.68
Midwest	2,776	7.4	1.09	0.77-1.53	2.0	0.65	0.41 - 1.05	5.4	1.43	1.00-2.03
South	3,434	6.8	0.91	0.64 - 1.30	2.0	0.62	0.38 - 1.01	4.7	1.15	0.75-1.76
West	2,045	7.8	1.00		3.3	1.00		4.4	1.00	
Wald χ^2_3			3.3			6.5			8.7	
р			0.343			0.088			0.034	
Urbanicity										
Metropolitan	4,508	8.2	1.05	0.65-1.71	2.7	0.91	0.57-1.46	5.4	0.90	0.54-1.50
Other urban	3,304	6.9	0.94	0.58-1.52	2.0	0.92	0.56-1.50	4.9	0.85	0.48-1.50
Rural	2,311	7.2	1.00		1.6	1.00		5.6	1.00	
Wald χ^2_2	,		1.1			2.9			0.4	
p			0.587			0.240			0.834	
Parents' marital status			0.00/			J. <u>L</u> -JJ			3.30→	
Married/ cohabiting	4,602	7.2	1.00		2.2	1.00		5.0	1.00	
Previously married	1,002	8.9	1.20	0.79-1.83	1.5	0.61	0.32-1.18	7.4	1.47	0.88-2.47
Never married	308	4.6	0.53	0.74-1.83	2.4	0.01	0.32-1.16	2.2	0.37	0.06-2.47
Unknown	4,204	7.7	0.33	0.24-1.16	2.4	1.0	0.36-2.26	5.1	0.37	0.13-0.92
GIIKIIOWII	4,204	7.7	0.7/	0./ 1-1.34	2.0	1.0	0.50-1.//	ا . ا	0.70	0.72-1.29

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