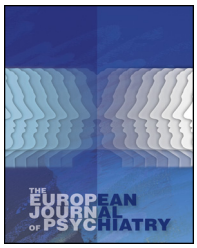
Eur. J. Psychiat. 2017;xxx(xx):xxx–xxx

THE EUROPEAN JOURNAL OF PSYCHIATRY

www.elsevier.es/ejpsy



ORIGINAL ARTICLE

How far is clinical assessment from the bullseye? Using MEmind to compare clinical assessment with self-assessment in patients with depression and anxiety diagnosis

A. Gómez-Carrillo[a], M.L. Barrigón[b,c], A. Leon-Velasco[d], C. Gonzalez-Garrido[d], M. Ruiz-Gomez[d], R.M. Molina-Madueño[d], S. López-González[d], F. Aroca[e], I. Barahona[e], J. Lopez-Castroman[f], S. Berrouiguet[g], P. Courtet[h], E. Baca-García[b,c,d,i,j,k,l,*], MEmind Study Group[1]

[a] *Department of Psychiatry and Psychotherapy, Campus Charité Mitte, Charité Universitätsmedizin, 10117 Berlin, Germany*
[b] *Department of Psychiatry, IIS-Jimenez Diaz Foundation, Madrid, Spain*
[c] *Universidad Autónoma de Madrid, Madrid, Spain*
[d] *Department of Psychiatry, University Hospital Rey Juan Carlos, Móstoles, Madrid, Spain*
[e] *Instituto de Matemáticas, Universidad Nacional Autónoma de México, Mexico*
[f] *Department of Psychiatry, Nimes University Hospital, and University of Montpellier, France*
[g] *Brest Medical University Hospital at Bohars, Adult Psychiatry, Brest, France*
[h] *Department of Emergency Psychiatry and Post Acute Care, CHRU Montpellier, University of Montpellier, Montpellier and FondaMental Foundation, Créteil, France*

* Corresponding author.
E-mail address: ebacgar2@yahoo.es (E. Baca-García).

[1] **MEmind Study Group** is composed by: Fuensanta Aroca, Antonio Artes-Rodriguez, Enrique Baca-García, Sofian Berrouiguet, Romain Billot, Juan Jose Carballo-Belloso, Philippe Courtet, David Delgado Gomez, Jorge Lopez-Castroman, Mercedes Perez Rodriguez; **Fellows and PhD students:** Elsa Arrua, Rosa Ana Bello-Sousa, Covadonga Bonal-Giménez, Pedro Gutiérrez-Recacha, Elena Hernando-Merino, Marisa Herraiz, Marta Migoya-Borja, Nora Palomar-Ciria, Ruth Polo-del Rio, Alba Sedano-Capdevila, Leticia Serrano-Marugán, Iratxe Tapia-Jara, Silvia Vallejo-Oñate, María Constanza Vera-Varela, Antonio Vian-Lains; **MONCLOA – ARGANZUELA – FJD Hospital, Madrid:** Susana Amodeo-Escribano, Olga Bautista, Maria Luisa Barrigón, Rodrigo Carmona, Irene Caro-Cañizares, Sonia Carollo-Vivian, Jaime Chamorro-Delmo, Javier Fernández-Aurrecoechea, Marta González- Granado, Jorge Hernán Hoyos Marín, Miren Iza, Mónica Jiménez-Giménez, Ana López-Gómez, Laura Mata-Iturralde, Laura Muñoz-Lorenzo, Rocío Navarro-Jiménez, Santiago Ovejero, María Luz Palacios, Margarita Pérez-Fominaya, Ana Rico-Romano, Alba Rodriguez-Jover, Sergio Sánchez-Alonso, Juncal Sevilla-Vicente, María Natalia Silva, Ernesto José Verdura-Vizcaíno, Carolina Vigil-López, Lucía Villoria-Borrego; **VILLALBA Hospital, Madrid:** Ana Alcón-Durán, Yago Cebolla-Meliá, Ezequiel Di Stasio, Juan Manuel García-Vega, Pedro Martín-Calvo, Ana José Ortega, Marta Segura-Valverde; **INFANTA ELENA Hospital, Madrid:** Edurne Crespo-Llanos, Rosana Codesal-Julián, Ainara Frade-Ciudad, Marisa Martin-Calvo, Luis Sánchez-Pastor; **REY JUAN CARLOS Hospital, Móstoles, Madrid:** Miriam Agudo-Urbanos, Raquel Álvarez-García, Sara María Bañón-González, Sara Clariana-Martín, Laura de Andrés-Pastor, María Guadalupe García-Jiménez, Sara González-Granado, Diego Laguna-Ortega, Teresa Legido-Gil, Pablo Portillo-de Antonio, Pablo Puras –Rico, Eva María Romero-Gómez, Eduardo Reguera-Nieto; **HOSPITAL 12 DE OCTUBRE, Madrid:** Luis Agüera-Ortiz, Miguel Ángel Jiménez-Arriero, Javier Rodríguez-Torresano, Javier Sanz-Fuentenebro; **AREA SANITARIA III AVILÉS, ASTURIAS:** Mónica Álvarez-Villechenous, Natalia Bretón-Díez, María Fernández-Rodríguez, Emilia García-Castro, Juan José Martínez-Jambrina.

http://dx.doi.org/10.1016/j.ejpsy.2017.08.006
0213-6163/© 2017 Asociación Universitaria de Zaragoza para el Progreso de la Psiquiatría y la Salud Mental. Published by Elsevier España, S.L.U. All rights reserved.

Please cite this article in press as: Gómez-Carrillo A, et al. How far is clinical assessment from the bullseye? Using MEmind to compare clinical assessment with self-assessment in patients with depression and anxiety diagnosis. Eur. J. Psychiat. 2017. http://dx.doi.org/10.1016/j.ejpsy.2017.08.006

[i] Department of Psychiatry, University Hospital Infanta Elena, Valdemoro, Madrid, Spain
[j] Department of Psychiatry, General Hospital of Villalba, Madrid, Spain
[k] Autonoma University, Madrid, Spain
[l] CIBERSAM, Madrid, Spain

Received 28 April 2017; accepted 25 August 2017

KEYWORDS
Mood disorders;
Anxiety disorders;
Self report;
Electronic health records;
Health records;
Personal;
Internet

Abstract
Background and objectives: Technology based assessments are being used for screening and monitoring in a wide scope of medical specialties, including mental health field. Depression and anxiety are common disorders in which e-health tools can be useful. We aimed to compare clinician assessment of illness severity in patients with depression and anxiety diagnosis with computer-based self-assessment within 24 h of clinician evaluation via MEmind (www.memind.net), a novel web-tool.
Methods: From May 2014, adult patients attended in outpatient settings in Fundación Jiménez Diaz Psychiatry Department were registered in MEmind, a web tool designed for psychiatric assessment. During the recruitment, clinicians use CGI-S for patient assessment via MEmind and provide patients a code and password to use the web-tool. We selected those patients diagnosed with depression and/or anxiety who connected within 24 h of the clinical visit and complete in the web page GHQ and WHO-5 scales. We calculated a bivariate correlation for CGI-S, WHO-5 and GHQ-12.
Results: Of the 231 participants, 157 (68%) were diagnosed with anxiety disorders and 74 (32%) with depression. Using the Spearman Rho test for correlation, we found a low correlation between CGI-S and total WHO-5 ($r = -0.192$; $p = 0.006$) and between CGI-S and total GHQ-12 ($r = 0.211$; $p = 0.002$) and a good correlation between total WHO-5 and total GQH-12 ($r = -0.606$; $p = 0.000$).
Conclusions: We found a low correlation between clinician assessment and patients' self-reports within 24 h of clinician evaluation. Factors that potentially influenced the degree of correlation related with patients, clinicians, measurements and technology are discussed.
© 2017 Asociación Universitaria de Zaragoza para el Progreso de la Psiquiatría y la Salud Mental. Published by Elsevier España, S.L.U. All rights reserved.

Background

Technological developments and participatory health initiatives are expanding the scope of medicine from a traditional focus on disease cure to a personalized preventive approach.[1] Increasingly technology based assessments are being used for screening and monitoring in a wide scope of medical specialties. With this in mind, MEmind was developed to help clinicians optimize and personalize clinical psychiatric assessment and treatment.[2] Thereby, MEmind allows to improve communication among patients, support network and mental-health professionals; to monitor doctor's drugs prescription habits[3,4]; and monitoring patients through ecological momentary assessment (EMA).[5]

Anxiety and depression are common disorders, in fact more than 350 million people worldwide are affected by depression, making it the biggest cause of disability.[6] In 2010, the estimated number of persons affected by anxiety disorders and unipolar depression in Europe was 69.1 million and 30.3 million, respectively. Furthermore, depression represents 7.2% of the overall burden of disease, with 4,320,400 disability adjusted life years lost.[7]

An early diagnosis and treatment would result in improved personal functioning and reduce long-term costs.[8] Screening instruments for early diagnosis and monitoring are rarely used consistently; a technological approach could facilitate a consistent use. Combining validated screening instruments with the resourcefulness of tablet and phone applications that allow for EMA approaches offers the possibility to tackle these issues in a variety of settings, including primary care and specialty services.

In turn, clinical assessment, the tool to early diagnosis and optimal treatment in mental health, currently relies mostly on retrospective self-reports. The latter are inconsistent with interviewer judgments in as many as 60% of patients and correlate only modestly with informant reports (from clinicians or 7 friends/relatives).[9] Patients, caregivers and doctors may have differing perceptions of illness and yet

Please cite this article in press as: Gómez-Carrillo A, et al. How far is clinical assessment from the bullseye? Using MEmind to compare clinical assessment with self-assessment in patients with depression and anxiety diagnosis. Eur. J. Psychiat. 2017. http://dx.doi.org/10.1016/j.ejpsy.2017.08.006

Download English Version:

https://daneshyari.com/en/article/8926999

Download Persian Version:

https://daneshyari.com/article/8926999

Daneshyari.com