

## DepressionAware 3.0 Client Review Document

### Overview

The DepressionAware HRA is an online application that pre-screens adults between the ages of 18 and 89 for depressive symptoms. The purpose of the application is to identify consumers who should undergo additional screening for depression in a primary care setting.

### Main Scientific Basis

The 2-item Patient Health Questionnaire depression module (PHQ-2)<sup>1</sup> is used as the main scientific basis for the DepressionAware HRA. The PHQ-2 is a clinically validated measure used to identify people who should complete the longer PHQ-9.<sup>2</sup>

### Product Description

Consumers are asked two main questions that comprise the PHQ-2 questionnaire:

- Over the past 2 weeks, how often have you been bothered by little interest or pleasure in doing things?
- Over the past 2 weeks, how often have you been bothered by feeling down, depressed, or hopeless?

For each question, users can answer in the following ways:

- Not at all (0 points)
- Several days (1 point)
- More than half the days (2 points)
- Nearly every day (3 Points)

Consumers with an overall PHQ-2 score of 2 or higher are urged to see a health care professional for additional depression screening.<sup>3</sup> Consumers who do not meet the PHQ-2 threshold of 2 or more, but who report any of the other common symptoms of depression, are asked to talk to a health care professional if symptoms persist, change, or get worse. Consumers who report no current symptoms are advised to keep a journal and talk to a health care professional if any symptoms arise.

Consumers are also asked about common risk factors for depression and the impact of symptoms on daily life. Consumers' self-reported depression risk factors are tallied in a table. Risk factors include

- personal or family history of depression
- repeated negative emotions (guilt, envy, anger, anxiety)
- chronic pain, chronic illness, or prior traumatic brain injury
- current or recent pregnancy
- weight change in the past month or severe obesity
- low or no income
- moderate to high stress levels
- limited emotional support from friends/family
- low self-esteem

- recent major life event

Answers to these additional questions do not impact the recommendation for clinical follow-up. They are included for educational purposes only. It takes roughly 5 minutes to answer all the questions in the HRA.

## Primary Results

The primary result from the DepressionAware HRA is the screening recommendation. The results are organized into the following categories:

### Depression Assessment Recommended

Individuals in this category scored a total of 2 or more points on the PHQ-2 scale. This indicates further assessment for depression is warranted.

### Tell a Doctor About Your Symptoms

Individuals in this category scored a total of 1 point on the PHQ-2 scale, or indicated that any of the following symptoms bothered them on more than half the days over the last two weeks:

- Sleep problems
- Fatigue
- Appetite problems
- Feeling bad about themselves
- Trouble concentrating
- Moving or speaking more slowly than usual
- Being fidgety or more restless than usual

### Keep a Symptom Journal

Individuals in this category did not report having any of the PHQ-2 symptoms and did not report any of the other common symptoms of depression. These users may or may not have risk factors for depression.

## About the Suicide Question

People with certain types of depression (e.g., major depressive disorder) have a higher rate of suicide attempts and suicidal ideation.<sup>4</sup> For this reason, before answering any questions, consumers are asked if they have thoughts of self-harm, have been talking to others about wanting to die, or have made a plan to take their life. Consumers who report having these warning signs for suicide are given a list of emergency resources, including the National Suicide Prevention Lifeline, instead of the HRA questions.

Throughout the HRA, the clinical variability of depression is cited as one reason only a trained health care professional can diagnose the condition.

## References

1. Kroenke K, Spitzer RL, Williams JBW. The Patient Health Questionnaire-2: validity of a two-item depression screener. *Med Care* 2003; 41:1284-1292. doi:10.1097/01.MLR.0000093487.78664.3C
2. Kroenke K, Spitzer RL, et al. (1999). Patient Health Questionnaire (PHQ-9) [screening instrument]. Retrieved from <http://www.integration.samhsa.gov/images/res/PHQ%20-%20Questions.pdf>
3. Arroll B, Goodyear-Smith F, Crengle S, et al. Validation of PHQ-2 and PHQ-9 to Screen for Major Depression in the Primary Care Population. *The Annals of Family Medicine*. 2010;8(4):348-353. doi:10.1370/afm.1139
4. American Psychiatric Association. Depressive Disorders. Fifth Edition. In: American Psychiatric Association, Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association; 2013:164.

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