

Do clinicians and patients have same definition of remission from depression?

October 31 2012

Rhode Island Hospital researcher Mark Zimmerman, M.D., director of outpatient psychiatry, has found that patients suffering from major depressive disorder (MDD) define remission from depression differently than clinicians. While many psychiatrists and clinicians view remission from a symptom-based standpoint, the study found that patients put much more emphasis on life satisfaction and sense of well-being than on actual symptoms. The paper is published online in advance of print in the *Journal of Psychiatric Research*.

"Current standards for treating <u>major depressive disorder</u> recommend that achieving remission should be considered the principal goal of treatment," said Zimmerman. "But recent studies have shown that patients and clinicians view remission differently. To determine the best approach to achieving a level of remission satisfactory to the patient, we developed the Remission from Depression Questionnaire to measure the components of depression that patients feel are most important."

The Remission from Depression Questionnaire (RDQ) includes questions about symptoms of depression, non-depressive symptoms, features of positive mental health, coping ability, functioning, life satisfaction and a general sense of well-being. This is the first study of the reliability and validity of the RDQ. The study concluded that the RDQ is a reliable and valid measure that evaluates multiple domains that depressed patients consider important to determining remission. The results are consistent with prior research, suggesting that depressed patients' perspective of remission goes beyond symptom resolution.



Two studies were conducted: the first including 100 psychiatric outpatients being treated for DSM-IV MDD in the Rhode Island Department of Psychiatry outpatient practice; and the second examined 274 outpatients receiving ongoing treatment for MDD at the hospital's outpatient residency training clinic. The Rhode Island Hospital outpatient psychiatric group predominantly treats individuals with medical insurance on a fee-for-service basis, and it is distinct from the hospital's outpatient residency training clinic that predominantly serves lower income, uninsured and medical assistance patients.

The RDQ supports recent findings that suggest that symptom-based definitions of remission used in efficacy studies do not adequately reflect the perspective of depressed patients receiving treatment in route clinical settings. "More work must be done to broaden the definition of remission," Zimmerman said. "Our patients need to feel supported, they need to feel confident about their remission. Therefore, it's imperative that clinicians and patients work more closely together to more clearly define remission in order to achieve the best outcomes for these patients. If some of the symptoms appear to be alleviated, but the patient is still suffering from a poor sense of well-being and low life satisfaction, then there is still more work to do."

Provided by Lifespan

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