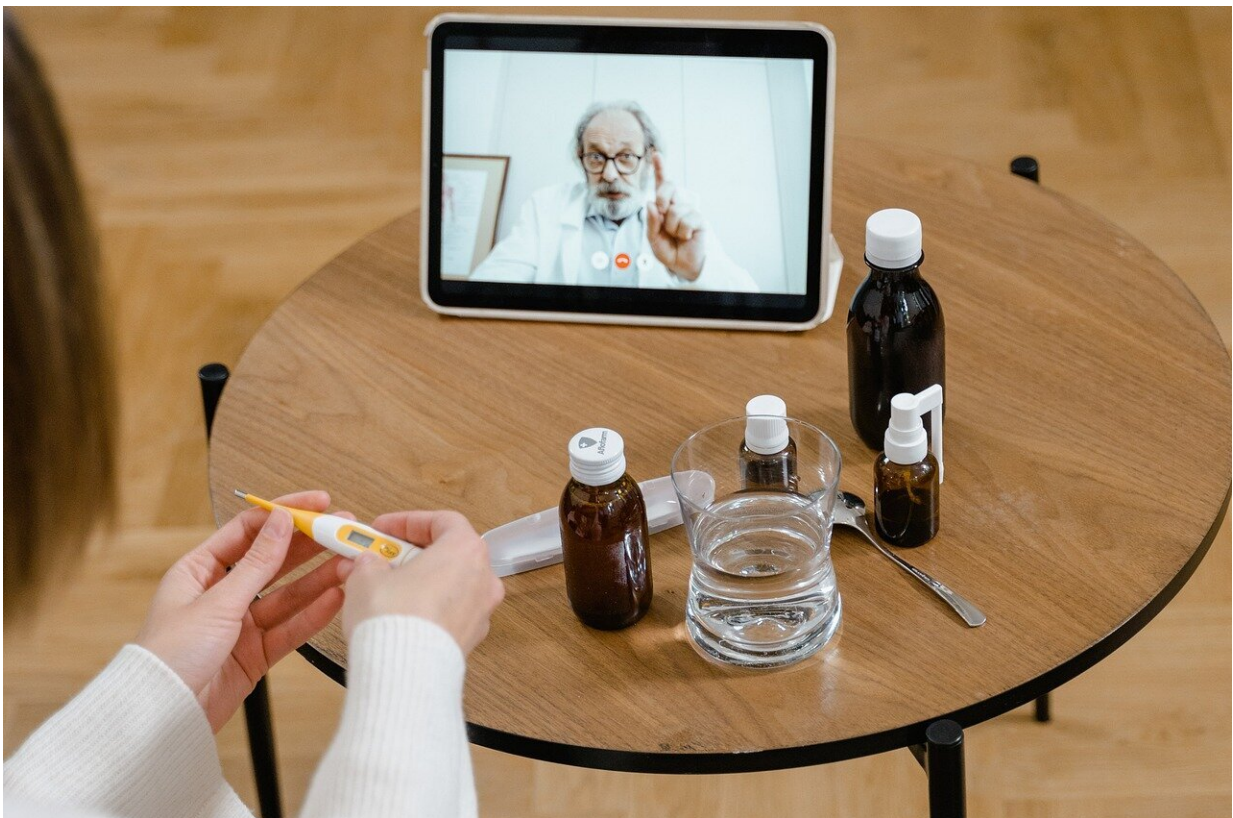


# Pandemic shift to telemedicine helped maintain quality of care for depression, says study

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The rapid transition from in-person to care to telemedicine visits at the start of the COVID-19 pandemic did not adversely affect the quality of

care—and even improved some aspects of care—for patients with major depression in a major integrated health system, according to a new report. The study appears as part of a special "Virtual Visits" supplement to *Medical Care*.

"A rapid shift to virtual behavioral health care was possible without compromising health care-related practices," according to the new research, led by Nancy S. Weinfield, Ph.D., of Kaiser Permanente (KP) Mid-Atlantic Permanente Research Institute, Rockville, Md. The study is one of 10 original research papers examining the implementation and impact of [telemedicine](#) in the new supplement.

## **New research on telemedicine implementation in health care systems**

In March 2020, health care systems across the United States rapidly pivoted from in-person appointments to virtual visits via telemedicine. While many providers had been building their telemedicine capabilities, the unprecedented shift to virtual visits during the pandemic had the potential to disrupt care practices and outcomes—perhaps especially in vulnerable patient groups.

The new studies look at how the shift to telemedicine affected the quality, utilization, and patient experience of care. "The supplemental issue of *Medical Care* aims to advance evidence about how health care organizations and systems can best support telemedicine implementation," according to an introduction by Guest Editor Hector P. Rodriguez, Ph.D., MPH, of University of California, Berkeley.

Seven papers assess the implementation of telemedicine within three regions of the KP system, examining trends in telemedicine utilization, and comparing the impact of telemedicine and in-person visits on

conditions including urinary tract infections, neck and back pain, and depression. Other studies focus on vulnerable populations, including Medicare and Medicaid beneficiaries and patients receiving care in community health centers—highlighting telemedicine's role in maintaining continuity of primary care and the quality of diabetes care.

## **Virtual visits persist for major depression, and some aspects of care improve**

In their study, Dr. Weinfield and colleagues looked at how the shift to virtual visits in the KP system affected care for patients with depression. The researchers analyzed electronic health record data on nearly 29,000 first telemedicine follow-up behavioral health visits by patients diagnosed with major depression.

Two of three KP regions showed small but significant reductions in prescriptions for antidepressant medications during the peak pandemic shift to virtual care (April to June 2020), after adjustment for patient characteristics. However, medication orders returned to pre-pandemic levels during the recovery period, beginning in the summer of 2020. Prescription fulfillment rates were unchanged between the three periods.

Meanwhile, rates of patient completion of depression symptom screening tools increased significantly in all three regions during the peak pandemic period, and continued to increase during the recovery period. "The transition and subsequent adjustment period have instead been marked by improved adherence to measurement-based care practices in virtual visits, signaling a potential new capacity for virtual health care delivery," the researchers write.

In contrast to the conditions evaluated in other KP studies, behavioral [health](#) for [major depression](#) continued to be delivered predominantly

through telemedicine during the pandemic recovery period. Dr. Weinfield and co-authors conclude: "Within these three regions of KP, the fact that care has not rebounded to include substantial in-person visits suggests that virtual visits have proven to be a successful model for providers and patients."

**More information:** Nancy S. Weinfield et al, Health-care–Related Practices in Virtual Behavioral Health Treatment for Major Depression Before and During the COVID-19 Pandemic, *Medical Care* (2023). [DOI: 10.1097/MLR.0000000000001815](https://doi.org/10.1097/MLR.0000000000001815)

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