

# Reviewing performance measures for management of major depressive disorder

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A review by the American College of Physicians (ACP) of performance measures designed to evaluate quality of care for those suffering from major depressive disorder found only 1 of 8 measures relevant to internal medicine physicians to be valid.

The article, "Quality Indicators for Major Depressive Disorder in Adults: A Review of Performance Measures by the American College of Physicians" was [published](#) today (March 5) in *Annals of Internal Medicine*.

Major depressive disorder (MDD) is a severe mood disorder that affects at least 8.4% of the [adult population](#) in the U.S. Some characteristics of MDD include persistent sadness, diminished interest in daily activities, and a state of hopelessness. MDD may progress quickly and have devastating consequences if left untreated.

Eight performance measures are available to evaluate screening, diagnosis, and successful management of MDD. However, many performance measures do not meet the validity, reliability, evidence, and meaningfulness criteria.

Out of eight performance measures, ACP's Performance Measurement Committee found only one measure, Suicide Risk Assessment, valid at all levels of attribution. This performance measure evaluates the frequency of suicide risk assessment for patients with a new diagnosis of MDD. The performance measure is clinically sound, evidence-based, and tested appropriately with valid and reliable results.

"It is important to screen, diagnose and provide timely treatment for

MDD," said Omar T. Atiq, M.D., MACP, president, ACP.

"Performance measures intend to encourage evidence-based care with results that will drive improvements in care. However, several feasibility barriers related to continuity of care and coding need addressing to measure appropriate management of MDD accurately."

A January 2023 ACP clinical guideline recommends monotherapy with [cognitive behavioral therapy](#) (CBT) or with a second-generation antidepressant as an [initial treatment](#) in patients in the acute phase of moderate to severe MDD. Despite strong evidence around appropriate treatment for MDD after an initial diagnosis, there are currently no performance measures to fill this gap. However, there are feasibility challenges with the data needed for such a performance measure, including but not limited to ICD-10 coding and capturing CBT recommendations.

There is a need for systemwide technological improvements to extract the necessary data and support proper coding for MDD management. The paper suggests that data interoperability is needed to improve reporting for [performance measures](#) that can move the quality needle and reduce the burden of performance measurement on physicians, group practices and health systems.

**More information:** Amir Qaseem et al, Quality Indicators for Major Depressive Disorder in Adults: A Review of Performance Measures by the American College of Physicians, *Annals of Internal Medicine* (2024). [DOI: 10.7326/M23-3077](https://doi.org/10.7326/M23-3077)

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