

People with depression see no immediate change from common GP assessment, study shows

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GPs use the PH9-Qs to monitor depression. Credit: University of Southampton

A commonly used questionnaire adopted by GPs to monitor the treatment of depression does not provide any immediate benefits to

patients, a new study has found.

Primary care researchers testing the PHQ-9 assessment, which measures the severity of depression, found it did nothing to improve people's symptoms after 12 weeks.

Doctors use the forms to assess depression and recommend appropriate treatments.

The study by the University of Southampton did, however, reveal that patients reported a better quality of life at six months if they completed the PHQ-9 consistently.

Findings from the four-year investigation, conducted with the University of Liverpool and University College London, are [published](#) in the *British Journal of General Practice*.

Professor of Primary Care Tony Kendrick, from Southampton, said current evidence that PHQ-9s improve the management of depression for patients in [primary care](#) is inconsistent.

He added, "Our study shows that people who tracked their PHQ-9 scores reported significantly improved overall well-being across a longer period of about six months."

"It also showed that a benefit for depression at six months could not be ruled out."

"Despite this, asking GPs to use these tools more regularly in primary care remains a challenge—particularly as patients struggle to book appointments at their surgeries."

Monitoring with patient-reported outcome measures, or PROMS, is

recommended by NICE, and they are used regularly by psychologists in NHS Talking Therapies as well as doctors in Europe and the U.S..

The Southampton study enrolled more than 500 adults with depression treated in GP practices—half the patients received the PHQ-9 questionnaire twice.

After 12 weeks, there was no significant difference in depression scores between the groups.

But, after 26 weeks, those who received the questionnaire reported a better quality of life and improved on some measures of anxiety and depression.

Those with GP-recorded follow up PHQ-9 scores were also more likely to be prescribed antidepressants and to see a [mental health](#) professional.

Prof Kendrick added, "More research into PROMs is needed but clearly patients who were monitored using PHQ-9s showed some improvements at six months."

"Self-assessment tools like the PHQ-9 are still well valued by many GPs and patients for monitoring [depression](#) treatment."

"We would like to see future studies test PROMs which are automatically administered and integrated into patients' records, and which create more specific recommendations for treatment, possibly using artificial intelligence."

More information: Tony Kendrick et al, Depression follow-up monitoring with the PHQ-9: open cluster-randomised controlled trial,

British Journal of General Practice (2024). [DOI: 10.3399/BJGP.2023.0539](https://doi.org/10.3399/BJGP.2023.0539)

Provided by University of Southampton

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