

Assessing for Depression and Anxiety in HIV

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Mental Health and HIV

- Higher rates of mental illness in PLHIV 1,2,3,4
- Mental Health critical to care
- - impacts on the HIV treatment cascade
 - mortality and morbidity
- Treatment of psychosocial difficulties leads to better treatment & health outcomes

¹HIV Futures 8, ²HIV Australia, ³NCHSR, ⁴WHO, ⁵Brener et al (2013), ⁶Bravo et al (2010)



Mental Health Screening

- Set of structured questions
- Assists with:
 - early detection and treatment of psychological difficulties
 - determining need for referral for diagnosis or identifying psychological problems
 - targeting resources cost effectively
- Part of holistic care, referral pathways
- Different to psychological assessment

National Standards

- Based upon UK version published 2011
- · Best practice
- Stepped-care approach
- Psychological support provided for different levels of complexity e.g.
 - Emotional support
 - Talking therapies
 - Cognitive assessment and interventions
 - Medication





Screening Standards

- Milestones first 3 months of diagnosis, annually or as indicated by trigger points
 - changes in physical health status, initiation or change of medication, non-attendance, changes in psychosocial status
- Indicate crisis or emergency
- Pathways for further assessment and referral
- Identify trends and epidemiological information
- Individualised screening considerations



Screening Tools

Assessment tool	Depression	Anxiety	Validity – general population	Reliability – general population	DSM (diagnostic) criteria applicability	Sensitive and Specificity (diagnosis)	Brief version available	No cost	HIV population validation
PHQ-9	✓		✓	✓	✓	√	✓	✓	✓
GAD-7		✓	✓	✓	✓	✓	✓	✓	✓
PHQ-4	✓	✓	✓	✓	✓	✓	✓	✓	
CESD-R	✓		✓	✓	✓	✓	✓	✓	✓
K10	✓	✓	✓	✓		✓	✓	✓	✓
SAMISS	✓	√				✓		✓	✓
BDI-II	✓		✓	✓	✓	✓			
DASS	✓	✓	✓	✓		?		✓	

PHQ-9 and GAD-7

Over the last 2 weeks, h by any of the following (Use ">" to indicate your		Not at all	Several days	More than half the days	Near ever day
1. Little interest or pleasu	re in doing things	0	t	2	3
2. Feeling down, depress	ed, or hopeless	0	1	2	3
3. Trouble falling or staying	g asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having	little energy	0	1	2	3
5. Poor appetite or overes	ating	0	1	2	3
6. Feeling bad about your have let yourself or you	selt — or that you are a failure or ir family down	0	1	2	3
7. Trouble concentrating onewspaper or watching	on things, such as reading the television	0	1	2	3
noticed? Or the oppos	slowly that other people could have ite — being so fidgety or restless ving around a lot more than usual	0	1	2	3
Thoughts that you wou yourself in some way	id be better off dead or of hurting	0	1	2	3
	For office co	ong 0 +			
				Total Score	_
	roblems, how <u>difficult</u> have these s at home, or get along with other		ade it for	you to do y	our
Not difficult at all	Somewhat Very difficult difficult		Extremely difficult		

GAD-	7			
Over the <u>last 2 weeks</u> , how often have you been bothered by the following problems? (Use **\sim *\text{to indicate your answer})	Not at all	Several days	More than half the days	Nearly every day
1. Feeling nervous, anxious or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid as if something awful might happen	0	1	2	3

PHQ-4

PHQ-4				
Over the <u>last 2 weeks</u> , how often have you been bothered by the following problems? (Use "" to indicate your answer)	Not at all	Several days	More than half the days	Nearly every day
Feeling nervous, anxious or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Little interest or pleasure in doing things	0	1	2	3
4. Feeling down, depressed, or hopeless	0	1	2	3

4

Stepped screening

Options (example):

- 1. PHQ-4 → positive screen
- 2. PHQ-9 or GAD-7 → positive screen
- 3. GP confirms dx and/or refers to mental health clinician for dx confirmation and treatment

OR

- 1. PHQ-9 or GAD-7 → positive screen
- 2. GP confirms dx and/or refers to mental health clinician for dx confirmation and treatment



Table 1: Recommended model of stepped care provision of psychological support

LEVEL	ASSESSMENT	INTERVENTIONS
1	Recognising the psychological needs of people with HIV	Effective provision of relevant information in accessible formats
Information and support	Initial screening of risk of harm to self and others Recognising and responding to overt psychological distress	Supported self-help Referral to appropriate providers Response to overt distress Supportive communication and general psychologica support Referral to self-management strategies (e.g. books and computerised resources, and courses for the newly diagnosed) Referral to peer support and peer support organisations
2 Enhanced support	Screening for psychological distress Screening for cognitive difficulties Assessment of risk of harm to self and others	Discussions aimed at acceptance and adaptation to living with HIV Referral to more appropriate services and peer support Education around the nature of psychological and psychiatric problems and how to cope with them Brief interventions aimed at behavioural change (e.g. sexual risk behaviour and substance use concerns)

Counselling and psychological interventions based on explicit theoretical frameworks for specific psychological difficulties such as: Assessment and formulation of psychological problems adjustment issues
 moderate Identification of psychiatric problems Counselling and psychological adjustment issues
 moderate or severe anxiety
 substance use concerns
 moderate or severe depression
 psychosexual or relationship problems
 trauma Screening for cognitive impairment therapies (including HIV-Assessment of risk of harm to self and others specialist services) Interventions for cognitive impairment Psychological interventions based on explicit theoretical frameworks to develop and enhance positive psychological processes such as adaptive coping strategies that increase resilience Specialist psychological and psychiatric interventions for severe and complex psychological problems, and comorbidities such as: Psychiatric diagnosis 4 Assessment and formulation of complex psychological problems Specialist trauma
 psychosis
 severe anxiety and depression
 mania
 personality disorder psychological Assessment for cognitive impairment and mental health intervention (HIV Assessment of risk of harm to self and or other specialist) cognitive impairment
 complex childhood and family issues Neuropsychological assessment Cognitive supports and interventions



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