

Diagnosis and Treatment of Depression Clinical Guideline

MVP Health Care, as part of its continuing Quality Improvement Program, adopted the American Psychiatric Association's (APA) Practice Guideline for the Treatment of Patients with Major Depressive Disorder for adults ^[1] and the American Academy of Child and Adolescent Psychiatry's (AACAP) Practice Parameter for the Assessment and Treatment of Children and Adolescents With Depressive Disorders ^[2]. The full guidelines are available at:

https://psychiatryonline.org/pb/assets/raw/sitewide/practice_guidelines/guidelines/mdd.pdf

<https://www.jaacap.org/action/showPdf?pii=S0890-8567%2809%2962053-0>

Although these guidelines reflect the most current community standard of care for the management of depression and are still clinically relevant, it should be noted additional scientific research has been published since their development.

Impact of The Condition

Major depression is one of the most common mental disorders in the United States. In 2017, an estimated 17.3 million adults aged 18 or older in the U.S. had at least one major depressive episode in the past year. Of this number, 63.8% or 11 million U.S. adults experienced the major depressive episode with severe impairment. Of all U.S. adults, 7.1% had at least one major depressive episode in 2017. ^[3,4]

An estimated 3.2 million adolescents aged 12 to 17 in the United States had at least one major depressive episode in 2017. Of this number, 70.77% or 2.3 million U.S. adolescents aged 12 to 17 experienced the major depressive episode with severe impairment. Of all U.S. adolescents aged 12 to 17, 13.3% had at least one major depressive episode in 2017. ^[3,4]

Rates of Treatment

Sixty-five percent of U.S. adults ages 18 and older with a major depressive episode in 2017 received combined care by a health professional and medication treatment, while 35% did not receive treatment. For U.S. adolescents aged 12 to 17, 39.9% received combined care by a health professional and medication treatment, while 60.1% did not receive treatment.

Summary of the APA Guidelines

MVP adopted the APA guidelines to assist practitioners in the identification of depression in adults ages 18 and over and to provide ongoing management to achieve remission of symptoms and return to an optimal level of functioning. The Executive Summary contains a Summary of Recommendations for psychiatric management, acute phase treatment, continuation phase treatment, maintenance phase treatment, discontinuation of treatment, and clinical factors influencing treatment. The formulation and implementation of a treatment plan for the acute phase addresses pharmacotherapy, somatic therapies, psychotherapy, complementary and alternative treatments, assessing response and adequacies of treatments, and strategies to address inadequate response.

Summary of the AACAP Guidelines

PROVIDER QUALITY IMPROVEMENT MANUAL

MVP adopted the AACAP guidelines to assist practitioners in the identification of depression in children and adolescents and to provide ongoing management to achieve remission of symptoms and return to an optimal level of functioning. This practice guideline addresses the epidemiology, clinical presentation, differential diagnosis, clinical course, risk factors, and pharmacological and psychotherapeutic interventions for children and adolescents with major depressive or dysthymic disorders. Side effects of the antidepressant class of medication, particularly the risk of suicidal ideation and behaviors are discussed. Additionally, recommendations regarding the assessment, as well as the acute, continuation, and maintenance treatment phases are provided.

Other Support for Management of Depression

In conjunction with these guidelines, MVP Health Care offers a Depression Management program for members with major depression. The goal of this program is to help individuals recognize the symptoms of depression ^[5], obtain appropriate treatment and adhere to prescribed therapies. Members receive educational information including information about medications and help with getting treatment. Additionally, members have access to a no-cost depression screening tool, located on the MVP website. ^[6] Throughout their course of treatment, members will have additional support and resources to ensure they are receiving the proper care and that their questions are being answered. If you would like to refer one of your patients to this program, please call the Case Management Department at **866-942-7966**. MVP will outreach to the member and offer enrollment in the program. More information on this and MVP's other health programs may also be found at mvphealthcare.com.

If specialized treatment is needed, MVP will assist providers in matching their patients to an appropriate Behavioral Health provider in their area. To locate an appropriate provider, please call the MVP Behavioral Health Access Center at **(800) 568-0458** between the hours of 8:30 AM and 5:00 PM. Providers in Vermont should call MVP at **800-684-9286** during these same hours. Other referrals for treatment are offered as requested.

[For providers in New York State who care for children and adolescents with mild-to-moderate behavioral health needs, an additional resource, Project TEACH, is available. Project TEACH is funded by the New York State Office of Mental Health and aims to strengthen and support the ability of New York's primary care providers to deliver care to children and their families experiencing mild-to moderate mental health concerns including anxiety, depression, and ADHD, in children, adolescents, and young adults up to age 22. Project TEACH offers providers consultations, referrals, and training at no cost. Project TEACH may be accessed at https://projectteachny.org/.](https://projectteachny.org/)

This guideline is not intended to replace the role of clinical judgment by the physician in the management of this, or any other disease entity. It is an educational guideline to assist in the delivery of good medical care. All treatment decisions are ultimately up to the physician. Where medication recommendations are made, please refer to each health plan's formulary for coverage considerations.

MVP Health Care updates its clinical guidelines at least every two years. The review process is also initiated when new scientific evidence or national standards are published. Practitioners are alerted via the web site and by written notices from the plan via fax or newsletter. A hard copy of the clinical guideline can be requested by calling the MVP Quality Improvement Department at **(800) 777-4793 extension 1-2247**.

1. American Psychiatric Association (APA) Practice Guideline for the Treatment of Patients with Major Depressive Disorder, 2010. Available:
https://psychiatryonline.org/pb/assets/raw/sitewide/practice_guidelines/guidelines/mdd.pdf
2. American Academy of Child and Adolescent Psychiatry (AACAP) Practice Parameter for the Assessment and Treatment of Children and Adolescents With Depressive Disorders, 2007. Available: <https://www.jaacap.org/action/showPdf?pii=S0890-8567%2809%2962053-0>
3. National Institutes of Health. National Institute of Mental Health. Health & Education. Statistics. Prevalence. Major Depression among Adults. Available:
<https://www.nimh.nih.gov/health/statistics/major-depression.shtml>
4. For the NSDUH survey — no exclusions were made for major depressive episode symptoms caused by medical illness, substance use disorders, or medication.
5. <https://www.mvphealthcare.com/members/health-and-wellness/behavioral-health/#depression>
6. <https://www.mvphealthcare.com/download/phq-9/?wpdmdl=235807&refresh=6008965620ca91611175510>