CCAS Research Programme Summary:
Case-finding & Comorbidity in Addiction Services

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BACKGROUND

Patients accessing community drugs services often experience mental health problems which adversely affect their quality of life and complicate treatment. Detection of psychological problems is generally poor in routine addictions treatment. PHQ-9 and GAD-7 are brief questionnaires for depression and anxiety disorders widely used in primary care as case finding tools and clinical outcome measures. The validity & reliability of such screening tools in treatment assessment is considered by few studies with notable methodological limitations and little evidence exists to support their use in this setting.

THE STUDY

A total of 103 patients in routine addictions treatment completed brief screening tools and structured diagnostic interviews. A subgroup of 19 patients took part in qualitative interviews. The main aims were:
- To determine the validity and reliability of brief screening tools for common mental disorders, with comparison to a gold-standard diagnostic interview.
- To investigate patients’ experiences and opinions about routine mental health screening.
- To investigate associations between substance use and symptoms of depression and anxiety.

KEY HIGHLIGHTS

- Common mental disorders are the norm rather than the exception in addiction treatment; with 70% of patients meeting criteria for a depressive and/or anxiety disorder.
- PHQ-9 and GAD-7 are reliable screening tools for the detection of major depression and anxiety disorders in drug and alcohol users accessing routine methadone maintenance treatment. Using adjusted cut-off scores slightly higher than those used in primary care was found to improve the accuracy of these questionnaires in this setting. Both measures had adequate sensitivity and specificity (above 75%), and the symptom scores tended to remain in the same range after a watchful wait period of 4-6 weeks.
- The Treatment Outcomes Profile (TOP) psychological health scale was also found to be a useful case-finding tool to detect the presence of a common mental disorder. This ultra-brief measure may be usefully integrated into a three-step assessment strategy: (1) using TOP to identify patients at risk of presenting a mental disorder based on a score of 12 or below; (2) using PHQ-9 and GAD-7 to reliably identify depressive or anxiety disorders; (3) using structured interviews or psychiatric assessment in cases where multiple disorders are suspected.
- Overall, patients who were interviewed agreed with the use of mental health screening tools in routine practice as a way of identifying needs and providing appropriate support and treatment. Good therapeutic alliance with drug-workers enhanced the acceptability of screening. Staff support was necessary to deal with the emotional impact of screening and to overcome accessibility and literacy problems.
- Weekly alcohol use is associated with severity of psychiatric symptoms, even when controlling for poly-substance use, severity of dependence and demographic characteristics.

PUBLICATIONS


