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**EMBARGOED until Wednesday September 30, 2009 12:01 a.m. EST**

## **Less than 50% of men and women with depression see a doctor for treatment**

### **Research finds even for those hospitalized for severe depression, many receive little follow-up**

TORONTO, Ont., September 30, 2009 — Less than half of men and women in Ontario who may be suffering from depression see a doctor to treat their potentially debilitating condition, according to a new women's health study by researchers at St. Michael's Hospital and the Institute for Clinical Evaluative Sciences (ICES). What's more, many hospitalized for severe depression fail to see a doctor for follow-up care within 30 days of being discharged, and many head to hospital emergency departments for care. The findings suggest the need for a comprehensive care model involving a multidisciplinary team of health-care professionals, including family doctors and mental health specialists, to help women and men and better manage depression and improve their quality of life.

"As a leading cause of disease-related disability among women and men, depression puts a tremendous emotional and financial burden on people, their families and our health-care system," says Dr. Arlene Bierman, a physician at St. Michael's Hospital and principal investigator of the study Project for an Ontario Women's Health Evidence-Based Report (POWER). "Many Ontarians with depression are not treated for their condition and those who are often receive less than desired care. While there is a lot that is known about how to improve depression, we need to apply this to our work with patients if we want to improve the diagnosis and management of depression. "This involves better co-ordination among primary care and mental health-care professionals in both community and hospital settings," added Dr. Bierman, a researcher at ICES.

Nearly half a million Ontarians, aged 15 and older, suffer from depression. Worldwide, an estimated 154 million people are afflicted by the condition, which is responsible for lost productivity, increased disability claims and greater use of health-care services.

Key findings of the POWER study released today include:

- Less than 50% of men and women with depression visited a doctor for care for their condition

- 33% of men and women discharged from hospital for severe depression did not see a doctor for a follow-up visit within 30 days
- 17% visited a hospital emergency room within 30 days of discharge from hospital while about 8% were readmitted to hospital
- Many older adults started on antidepressant medication did not receive the recommended number of follow-up visits to manage their condition.
- The lack of co-ordinated care for patients suggests the need for a collaborative care-model involving a team of health-care professionals, including mental health professionals and primary care providers.

“Research shows that patients cared for using a collaborative model are more likely to see improvement in symptoms, are able to better manage their depression and avoid multiple visits for emergency care,” said Dr. Elizabeth Lin, lead author of the chapter and a research scientist at the Centre for Addiction and Mental Health (CAMH). A study by CAMH released earlier this year also found collaborative care to be a less costly and more effective way of providing mental health treatments for people on short-term disability leave for a psychiatric disorder.

The study titled POWER (the Project for an Ontario Women’s Health Evidence-Based Report), is funded by Echo: Improving Women’s Health in Ontario, an agency of the Ontario Ministry of Health and Long-Term Care. It is the first study in the province to provide a comprehensive overview of women’s health in relation to gender, income, education, ethnicity and geography. The findings are detailed in the report titled *Depression* — the third to be released this year as part of the study. Findings can be used by policymakers and health-care providers to improve access, quality and outcomes of care for Ontario women.

“The findings clearly support the need to re-evaluate the treatment of depression in Ontario,” says Pat Campbell, CEO, Echo: Improving Women’s Health in Ontario. “We need to provide better access and delivery of more appropriate and effective courses of care. The POWER Study makes a strong case for the adoption of collaborative care models — a key finding that can help inform system planning, program planning and policy development.”

For more information on the POWER Study and its partners visit [www.powerstudy.ca](http://www.powerstudy.ca). Other findings from the study will be released later this year.

Dr. Arlene Bierman is a researcher in the Keenan Research Centre at the Li Ka Shing Knowledge Institute of St. Michael's Hospital, a scientist at ICES and Echo's Ontario Women's Health Council Chair in Women's Health at St. Michael's Hospital and the University of Toronto (Lawrence S. Bloomberg Faculty of Nursing).