






Depression

Depression is a common presentation in general practice. It is the 5th most common problem managed by GP registrars (2.5% of all problems) and an area that registrars often struggle with early on in training. Ideally, registrars should complete their Level 1 Mental Health Training during their first term.

<p>TEACHING AND LEARNING AREAS</p> 	<ul style="list-style-type: none"> • Clinical features – assessing severity, ‘masked’ depression, comorbidities (anxiety etc.), suicidality • Depression scales – K10, DAS21 • Development of Mental Health Care Plans • Non-pharmacological treatment and psychology/mental health service referral (including local providers), MHCPs • Medications – use and S/E - see NPS Challenges in Primary Care • Challenges in the elderly, adolescents and in the post-partum period • Indications for psychiatry referral and local providers 						
<p>PRE- SESSION ACTIVITIES</p> 	<ul style="list-style-type: none"> • Read the following article on depression as an overview NPS Depression Prescribing Practice Review • Ask the registrar to reflect on a couple of patients that they have recently seen with depression 						
<p>TEACHING TIPS AND TRAPS</p> 	<ul style="list-style-type: none"> • The 4 Ps of assessment – Predisposing (e.g. FHx), Precipitating (e.g. bereavement), Perpetuating (e.g. ETOH) and Protective (e.g. family support) factors • Consider the diagnosis of Bipolar Disorder • Try not to start an antidepressant at the first visit, patients may often improve significantly with non-pharmacological treatment • Registrar to sit in on a consultation with a psychologist or MH nurse 						
<p>RESOURCES</p> 	<table border="1"> <tbody> <tr> <td data-bbox="323 1621 432 1749">Read</td> <td data-bbox="432 1621 1493 1749"> <ul style="list-style-type: none"> • The Psychological Toolkit. This is an excellent resource from BlackDog. • E mental Health Summary Excellent resource for those who don't have easy access to a psychologist or mental health specialist </td> </tr> <tr> <td data-bbox="323 1749 432 1816">Listen</td> <td data-bbox="432 1749 1493 1816">Podcast on depression from Oxford University.</td> </tr> <tr> <td data-bbox="323 1816 432 1877">Watch</td> <td data-bbox="432 1816 1493 1877">TED Talks - Confessions of a depressed comic</td> </tr> </tbody> </table>	Read	<ul style="list-style-type: none"> • The Psychological Toolkit. This is an excellent resource from BlackDog. • E mental Health Summary Excellent resource for those who don't have easy access to a psychologist or mental health specialist 	Listen	Podcast on depression from Oxford University .	Watch	TED Talks - Confessions of a depressed comic
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<p>FOLLOW UP & EXTENSION ACTIVITIES</p> 	<ul style="list-style-type: none"> • Registrar to reflect on how their assessment and treatment has changed for depression after teaching session • Role play the OSCE case under exam conditions • Registrar to complete the RACGP Check Depression Resource • Role play challenging scenarios e.g. new mother with suicidal ideation, young adult with first presentation of BPD 						

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OSCE Case

INSTRUCTIONS FOR SUPERVISOR

You are Ray, a 77 yr old man who has been sent to see the registrar by his concerned daughter, Sally. Sally works as a local pharmacist and called the registrar yesterday (with your permission) with concerns that you are depressed. You are a long term patient of the practice but you have not met the registrar before.

Story

- You have been feeling increasing depressed over the past few months.
- You felt very low when your wife died 7 years previously but never sought help.
- You improved a little after a year or so, but have never felt happy since then.
- There is no clear precipitant to a worsening of your mood, except for increased pain in your knees from OA.
- You are getting out much less than before due to the pain and 'not interested in seeing anyone'.
- You live alone and have not been cooking as much recently as your appetite has disappeared.
- Your sleep is poor with early morning waking.
- You cannot concentrate on the paper.
- You have felt that 'it would be better off if I wasn't here' but have no plans, and don't think you could go through with anything.
- Your daughter is your only real support but 'she is busy with her own life'.
- You have no significant medical problems and only take Panadol Osteo for your knees.
- You don't smoke or drink.

Assess

- Communication skills – patient centredness, empathy

- Assessment – symptoms, 4Ps, safety

- Treatment options – non-pharma Rx, talking therapies, medication

- Follow-up and safety netting
