<div align="center">

Journal Watch

The Detection of Depression in Palliative Care

</div>

Presented by: Allison Clare, Nov 10, 2010

Abstract

Purpose of review: Depression is prevalent in patients receiving palliative care. Though effective management strategies exist, depression is often not recognized and, therefore, not treated. This review will assess recent research on the detection of depression in palliative care and recommend directions for future research.

Recent findings: Screening is moderately effective in detecting depression in palliative care. It successfully excludes patients without depression, but is less effective in confirming 'caseness'. Clinicians prefer ultra-short screening methods consisting of one or two simple questions, but there is still uncertainty about which tool is optimal. Screening should supplement not substitute comprehensive clinical evaluation. Case-definitions of depression seldom take into account the duration of symptoms or their impact on functioning.

Summary: The ability to detect cases of depressive disorder may be less important than the ability to detect depressive symptoms remediable to treatment. This is reflected in the recent interest in conceptualizing and detecting psychological distress. Evidence-based guidelines on the detection and management of depression in palliative care are needed to help standardize practice and improve patient outcomes.

Strengths: This article was useful in informing the reader of the problems that plague diagnosing depression in the palliative care population and serves well more on the level of a learner (ie a student or off service resident) as opposed to a practicing palliative physician. In addition it gives a good overview of current research in this area.

Weaknesses: It is not a systematic review of the literature but issues related to diagnosing depression in palliative care patients, few suggestions as to how to improve research with regards to each of these issues is addressed.

Relevance to Palliative Care: There are many problems associated with diagnoses of depression in the palliative patient and there is little research to support current screening tools. The best way to diagnose depression in this population is to spend time with the patient and take a thorough history.

.