

Journal Watch

Screening for depression in palliative cancer patients attending a pain and symptom control clinic

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ABSTRACT

Objective: Depression in palliative care patients is often underrecognized. Screening can increase case recognition. The aims of this study were to assess the prevalence of depression in palliative cancer patients attending a pain and symptom control clinic and to investigate the validity and utility of a depression visual analogue scale in detecting depression in the advanced cancer outpatient population.

Method: One hundred and thirty-two oncology outpatients who came for consultation at a multidisciplinary pain and symptom control clinic were asked and agreed to complete the Brief Zung Self-Rating Depression Scale (BZSDS; Dugan et al., 1998) and depression visual analogue scale (DVAS).

Results: The majority of participants (72%) indicated clinically significant depressive symptoms according to the BZSDS (21% in the “mild” depressive symptoms range, 32% in the “moderate” range, and 19% in the “severe” range). Participants indicated low endorsement rates of items related to overt manifestation of depression (e.g., sadness, tearfulness, irritability, and suicide ideation). The DVAS showed high correlation with the BZSDS ($r = .82$) and is a potentially useful screening instrument for detecting depressive disorder in palliative care cancer patients.

Significance of results: The results of the study underline the importance of routine screening to detect depressive disorder in palliative care patients to improve their quality of care. The depression visual analogue scale was found to be an effective simple screening tool, easy to administer and use.

KEYWORDS: Depression, Screening, Palliative care, Oncology, Cancer, Scales

Strengths

- Literature review: good overview of complexities of depression assessment in medically/terminally ill population
- Sampling: Consecutive sampling approach with good response rate (132/150 who met study criteria participated in study)
- Measures: Use of depression measures which were appropriate for study population (The BZSDS has been previously validated in cancer population)

Weaknesses

- Sampling: did not describe total number of patients screened or characteristics of non-participants
- Arbitrary recommendation of cut-off score of ≥ 65 mm as measure of depression based on mean DVAS score of 66.2 mm, with limited empirical support
- Limited generalizability to palliative patients in other palliative settings, such as community or hospice
- Does not appear to have received formal ethics approval from an ethics review board, although most ethical requirements appear to have been met (only verbal consent obtained)

Relevance to Palliative Care

- Highlights the importance of screening for depression in the palliative population
- Both the DVAS and BZSDS appear to be reasonable approaches for depression screening in this population