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Integrated depression care for cancer patients: a collaborative care model

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OBJECTIVE:

To describe the development, evaluation and implementation of an integrated collaborative care model for depression in cancer patients.

METHODS:

Two linked services were developed to systematically identify and treat major depression in cancer outpatients. (1) The Symptom Monitoring Service, a 2 stage symptom monitoring and depression screening service, was implemented in three cancer centres in Scotland, UK, and screened more than 20,000 patients for depression. (2) 'Depression Care for People with Cancer' (DCPC) is a systematic, integrated, treatment programme based on the collaborative care model. It includes both pharmacological and psychological treatments and is delivered by a team of cancer nurses and consultation-liaison psychiatrists. We conducted three clinical trials to evaluate its effectiveness and cost-effectiveness. A project in the Oxford Cancer Centre is currently evaluating the process of implementing these services in routine care.

RESULTS:

In the SMaRT (symptom management research trials) Oncology 1,2 and 3 trials we found that DCPC is highly effective and also cost-effective. Implementation in the clinical setting is achievable and welcomed by both patients and healthcare professionals but it is also challenging to train staff to work in new ways and to integrate psychological care into a traditional 'physical' healthcare environment.

CONCLUSIONS:

Systematic identification and treatment of depression in cancer clinics is effective and cost-effective. Implementing this integrated approach in cancer centres brings great benefits but also offers practical challenges.

CONGRESS PRESIDENT EAPM 2018

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