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ANALYSIS OF OUTPATIENT CARE RECEIVED BY OVER 780,000 STATUTORY HEALTH INSURED INDIVIDUALS DIAGNOSED WITH DEPRESSION

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Introduction: Former studies show low treatment rates of outpatients with a diagnosis of depression. Various characteristics influence these treatment rates.

Objectives/aims: To examine the effects of individual and regional characteristics on getting depression-specific treatment in the federal state of Bavaria.

Methods: Outpatient treatment for depression as well as individual and regional characteristics of outpatients diagnosed with depression were analyzed based on secondary data from the Association of Statutory Health Insurance Physicians Bavaria in 2006 (N=780,226). Depression-specific treatment was classified in "Threshold" and "Subthreshold" treatment according to its intensity. Descriptive analyses were followed by logistic regression analysis (STATA, PASW).

Results: More than half of the patients diagnosed with depression did not use any depression-specific treatment within one year. Individual factors which heighten the rates of a depression-specific treatment were female gender, middle age, a moderate or severe depression, a psychiatric comorbidity and no somatic comorbidity. Interestingly, living in a more rural area increased the chance of using "Threshold" treatment.

Conclusions: The knowledge about the influence of individual characteristics on getting a depression-specific treatment is important to reach the risk groups. A possible reason for higher rates of "Threshold" treatment in rural areas is the higher rate of pharmacotherapy in rural areas, which was more often classified as "Threshold" treatment than psychotherapy according to our classification.