

The impact of Integrated Mental Health Programme in the management of patients with common mental disorders in the primary care: a two-year service review

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HA Convention
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Background

Depression
Dysthymia
Common mental disorders (CMD)
Adjustment disorder
GAD
Panic disorder
Insomnia

PAST

Psychiatry
Specialist
Outpatient
Clinic

NOW

*Integrated
Mental Health
Programme*

Since October 2011

Objectives



Make early identification and intervention of patients with CMD

Avoiding stigmatization in patients with CMD by allowing management in community setting

Empower of general out-patient clinic

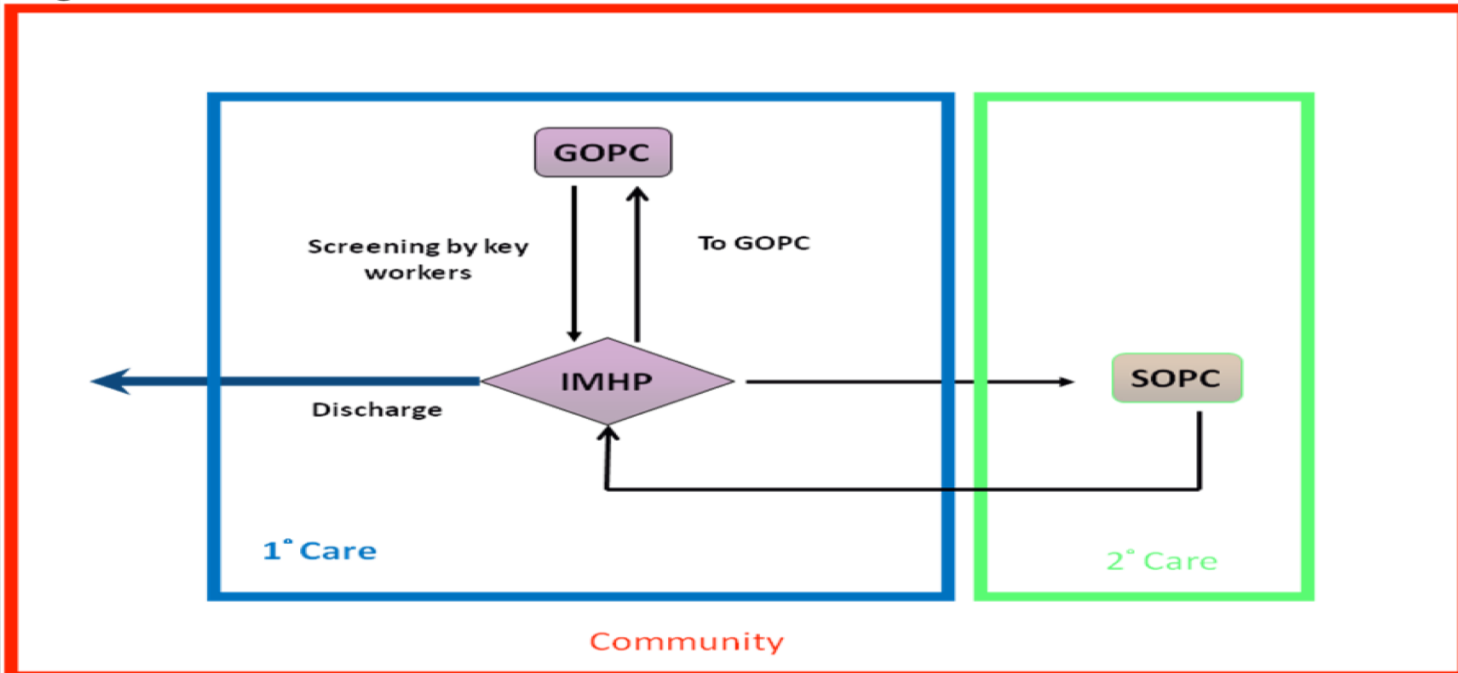
Reduction of psychiatric referral rate

Raising mental health awareness in public

Improving quality of primary health care in whole person management

Team structure

Diagram 1.



Multidisciplinary Approach



Educational Groups

爸媽系列

教導從容 有教無慮

此系列內容為配合小組治療而製作的資料，
詳情請參閱本院中心的小組治療。

九龍中醫院聯網
家庭醫學及普通科門診
綜合心理健康計劃

尋找睡眠之旅

不眠不憂

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腦力無限

『忘』中有法
活得精彩

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尋找快樂之旅

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輕輕鬆鬆 齊放鬆

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知情識壓

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Aim of study

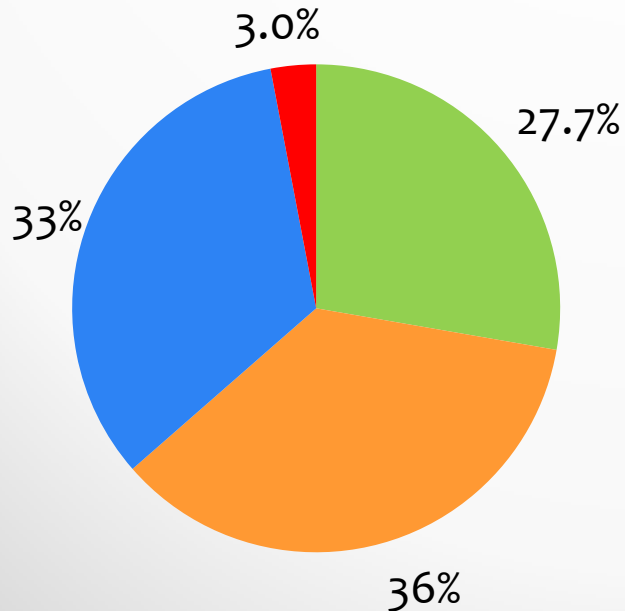
- * This study explored the effectiveness of IMHP in managing patients with CMD in the primary care setting and assessed its contributions in reducing Psychiatric Specialist OPD workload.

Methodology

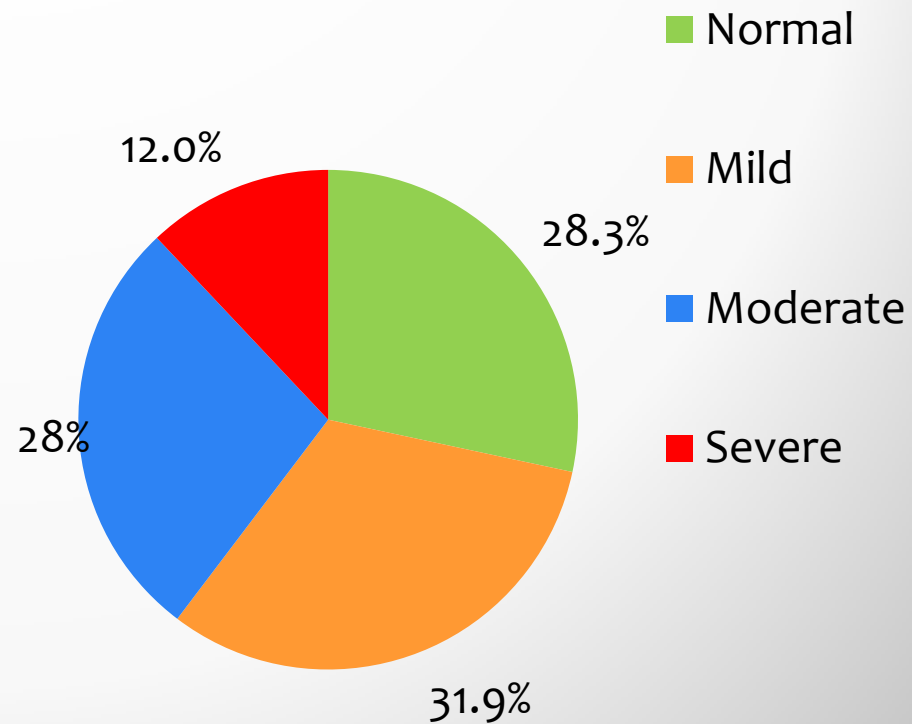
- * All patients referred to KCC IMHP from 10/2011 to 09/2013 were reviewed. They were screened by standard assessment tools including PHQ-9 for depression and GAD-7 for anxiety.
- * Score of 5, 10 and 20 in PHQ-9 represents cut-points for mild, moderate and severe depression and score of 5, 10 and 15 in GAD-7 for mild, moderate, and severe anxiety.
- * For those successfully closed cases, their pre- and post-IMHP mood scores were compared.
- * Student's t-test was used for analyzing continuous variables and Chi-square test for categorical data.
- * All statistical tests are two-sided, a p-value of <0.05 was considered significant.

Results

Distribution of Baseline PHQ-9 for Depression

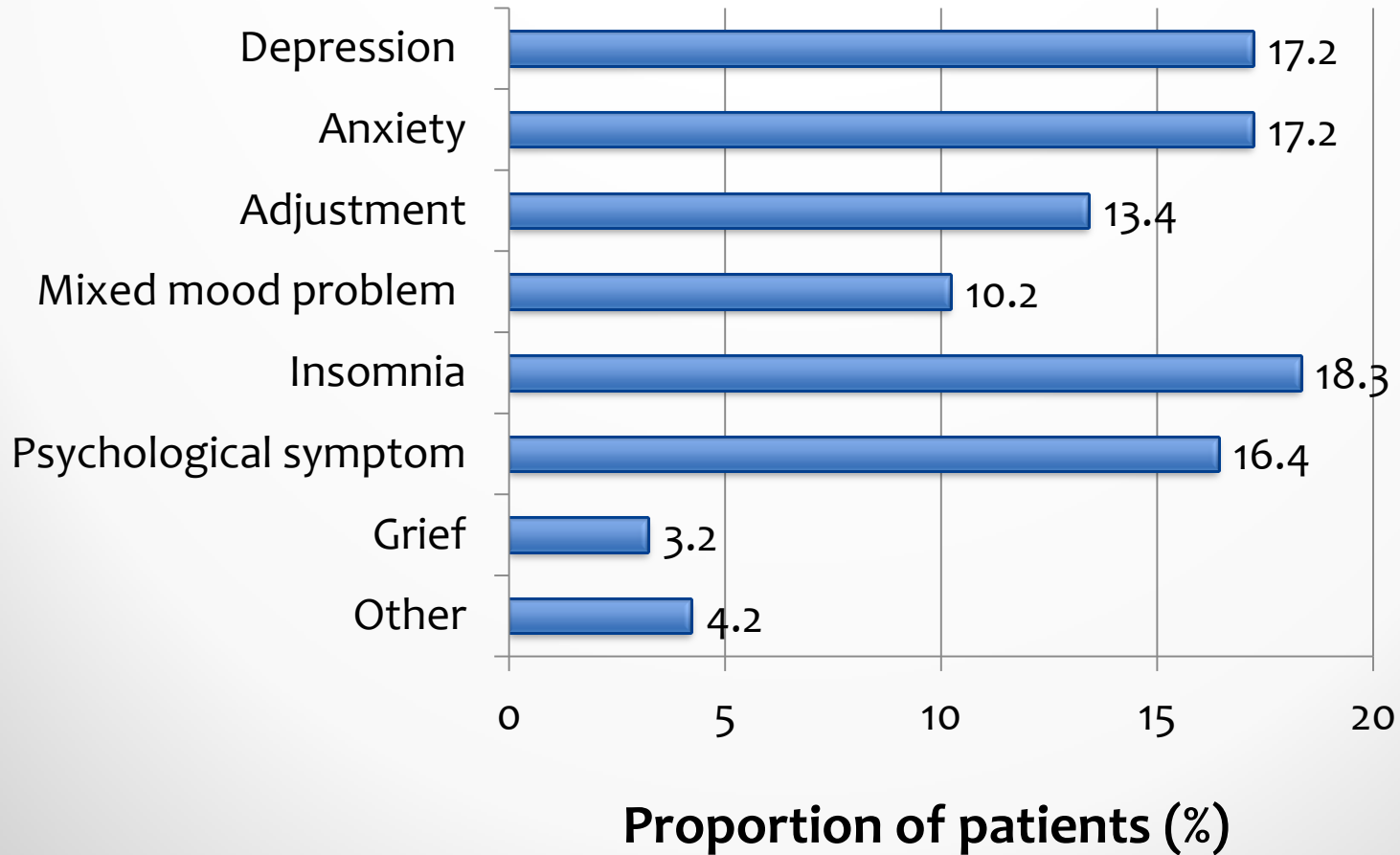


Distribution of Baseline GAD-7 for Anxiety

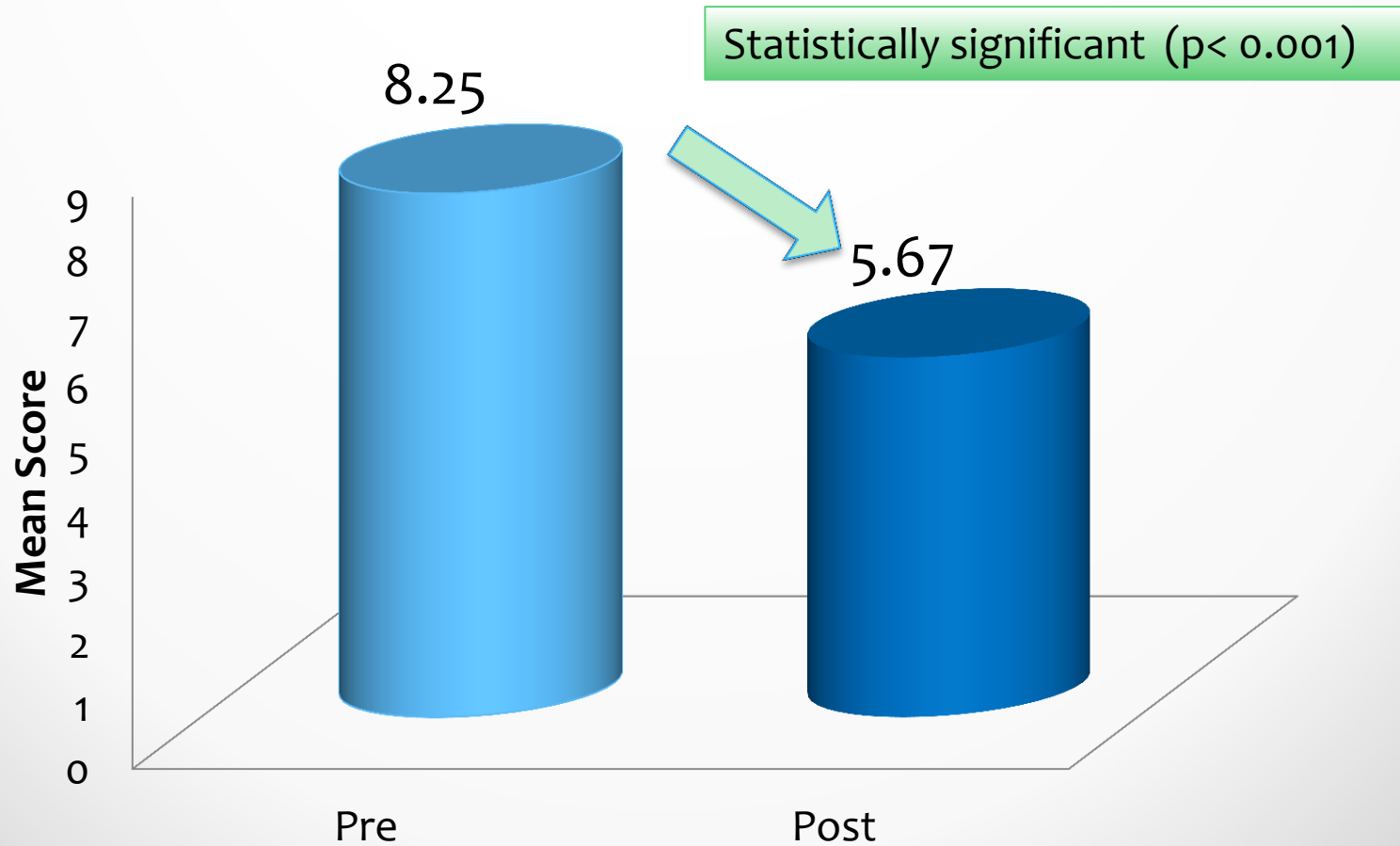


Data collected from 10/2011 to 9/2013

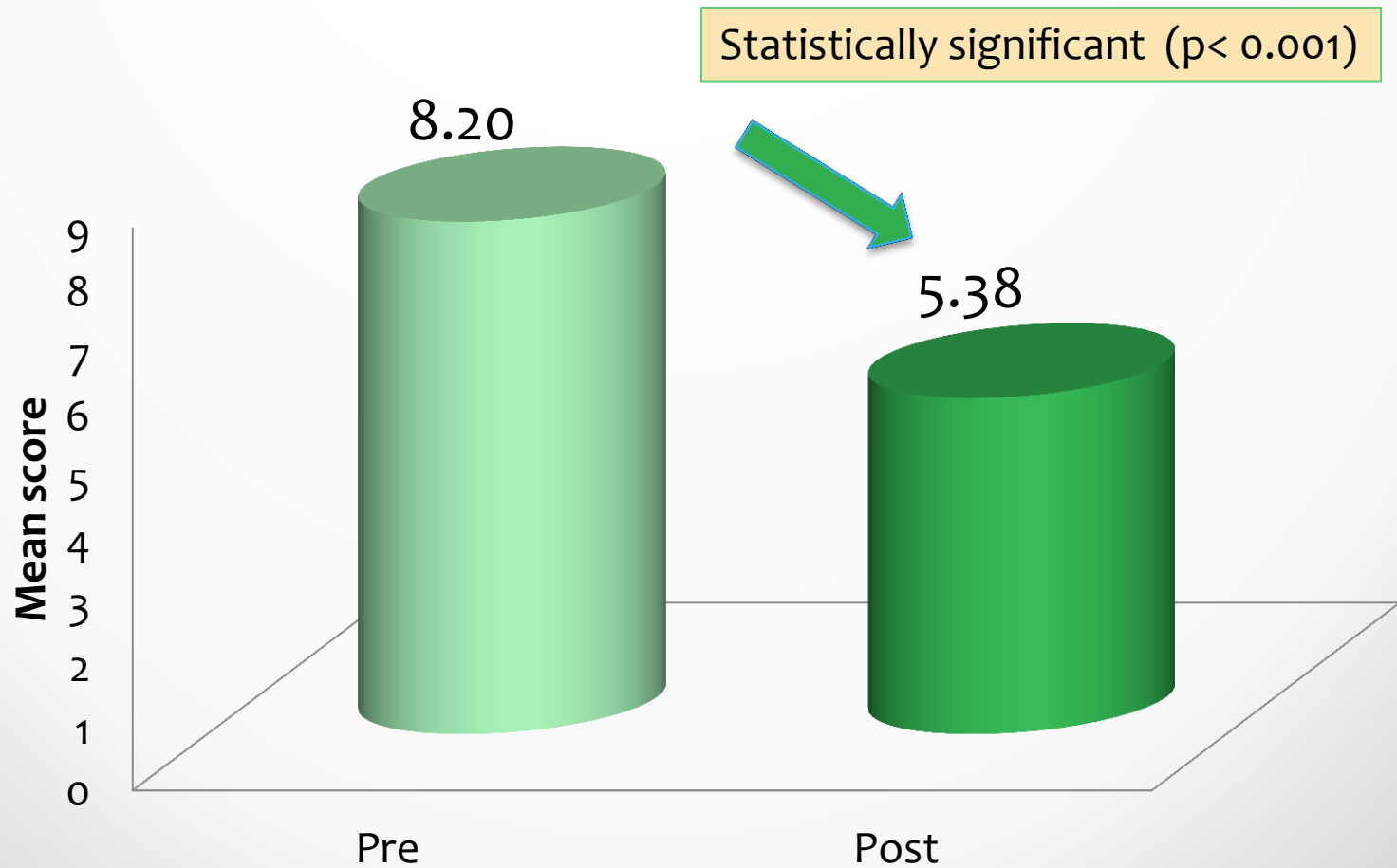
Distribution on Nature of CMD



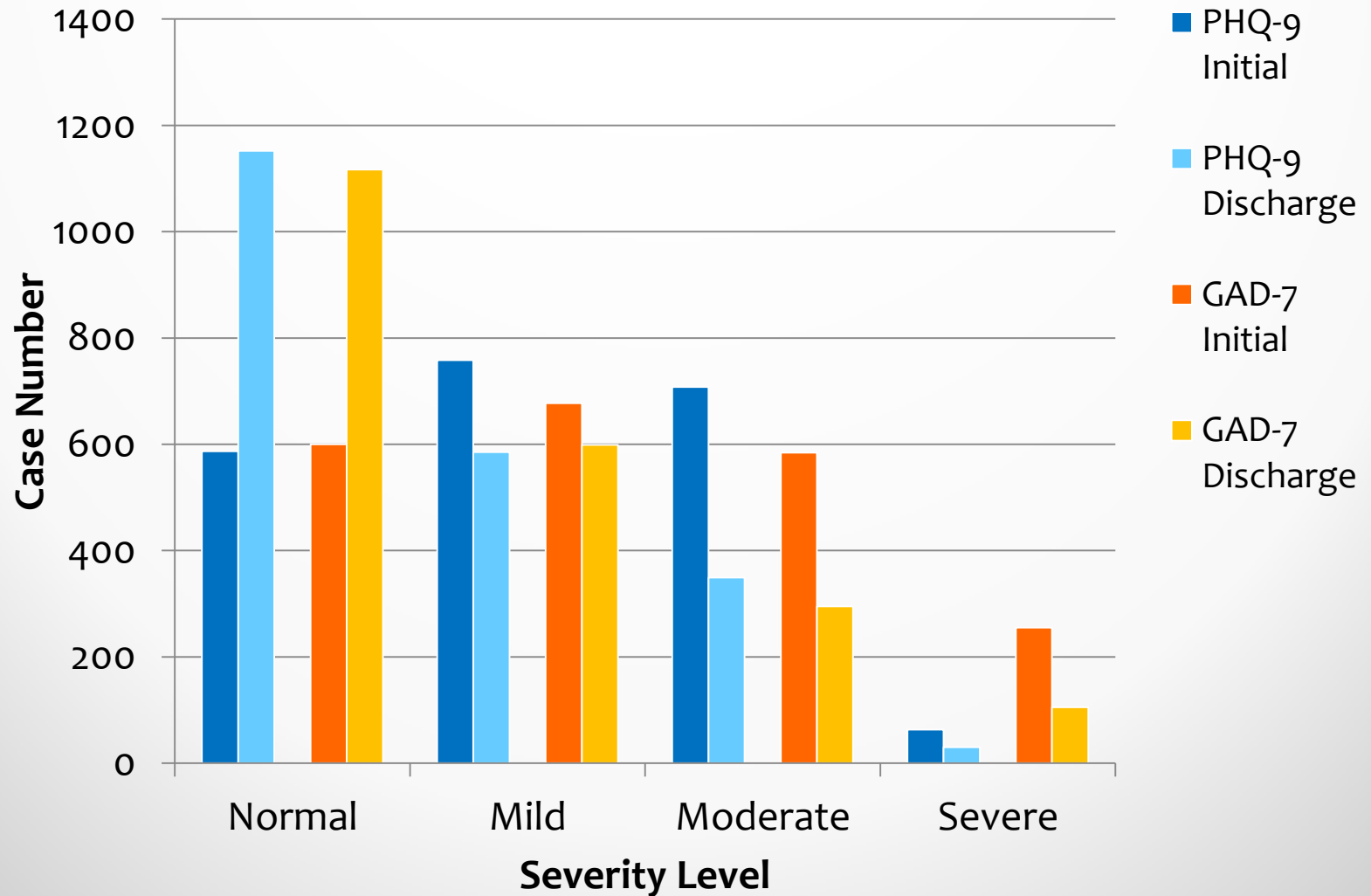
Pre- and post- PHQ-9 mean score



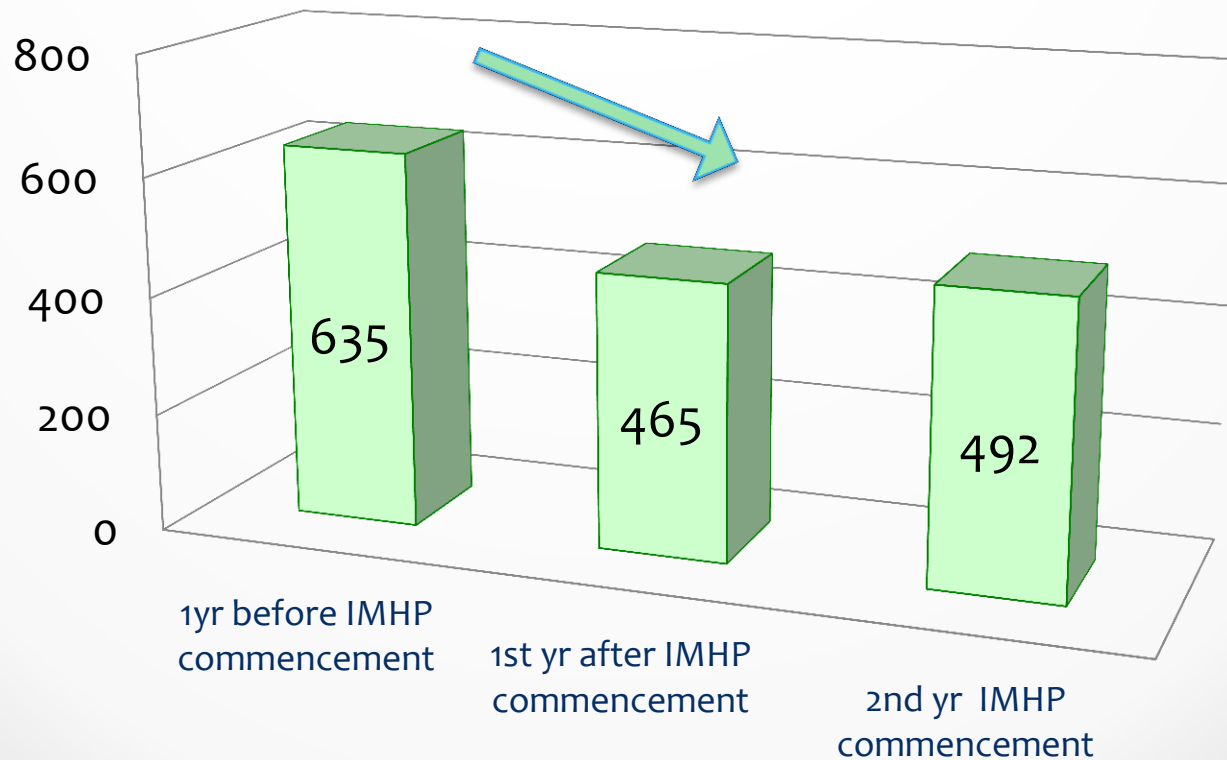
Pre- and post- GAD-7 mean score



Distribution of PHQ-9 and GAD-7 on Severity level (n=2119)



Number of Psychiatric referral



Conclusion

- * These findings supported that IMHP is effective in managing CMDs patients in primary care setting.
- * Mood scores of depression and anxiety disorders have all been significantly reduced after the programme.
- * This multi-disciplinary service model has provided a more effective way of resource utilization and helped to reduce the patient load in need of psychiatric specialist care.

Acknowledgements

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- * Patient Resource Centre, Queen Elizabeth Hospital
- * Department of Occupational Therapy, Kowloon Central Cluster
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THANKS

