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Depression, anxiety and satisfaction with primary health care: is there any connection?

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Background & Aim: Anxiety and depression are among the most common psychiatric disorders in primary health care (PHC). These diseases are associated with disability and poor quality of life. There is high comorbidity between anxiety, depression and other chronic somatic diseases. Anxiety and depression are also associated with worse treatment outcomes and higher amount of complications in chronic somatic diseases. However, connection between these diseases and patient's satisfaction with PHC services has not been previously well studied. The main aim of this study is to determine the connections between depression, anxiety and patient's satisfaction with PHC services.

Methodology: 889 patients in PHC centers were randomly selected and asked to fill out the questionnaire. Patients came to their PHC centers for various reasons. Patient satisfaction questionnaire, short version (PSQ-18, Marshall and Hays), was used to determine patient satisfaction. The Hospital Anxiety and Depression scale (HAD, Zigmond and Snaith) was also used. Data analysis was performed using the SPSS 24.0. A p -value < 0.05 was considered as indicative of statistical significance.

Findings: 887 questionnaires were used in data analysis. Both anxiety and depression subscales strongly correlated with each other (Spearman's correlation coefficient 0.742) ($p < 0.001$). Also, the worse estimates of both anxiety and depression subscales correlated with the worse overall score and all subscales of PSQ-18 (Spearman's correlation coefficient -0.462 and -0.536 respectively) ($p < 0.001$). The linear regression analysis of all data (the dependent variable was total PSQ-18 score) showed that the major factor leading to poorer satisfaction with PHC services was a higher depression subscale score ($p < 0.001$) (Table 1). The correlation between anxiety and PSQ-18 score has gone.

Conclusion: The presence of depression leads to poorer satisfaction with PHC services. Depression is a strong factor influencing patients' perception of PHC services, which sometimes can be masked and stay unnoticed among the other factors.

Recent Publications:

1. Sundquist J, Ohlsson H, Sundquist K and Kendler KS (2017) Common adult psychiatric disorders in Swedish primary care where most mental health patients are treated. *BMC Psychiatry*. (17): 235.
2. Buszewicz M J (2011) Improving the detection and management of anxiety disorders in primary care. *Br J Gen Pract*. 61(589):489-490.
3. Sadeniemi M, Pikola S, Pankakoski M, Joffe G and all (2014) Does primary care mental health resourcing affect the use and cost of secondary psychiatric services? *Int J Environ Res Public Health*. 11 (9):8743-8754.
4. Wandell P, Carlsson AC, Gasevic D, Wahlstram L and all (2016) Depression or anxiety and all-cause mortality in adults with atrial fibrillation – A cohort study in Swedish primary care. *Ann Med*. 48 (1-2): 59-66.
5. Treating depression and anxiety in primary care (2008) *Prim Care Companion J Clin Psychiatry* 10 (2):145-152..

Biography

Rima Kavalniene is pursuing her PhD at Vilnius University Medical Faculty in Lithuania. She works as Family Doctor in Primary Health Care Clinic. She is interested in current issues of Mental Health in Primary Health Care. Her PhD is about finding connection between some sociodemographic factors as well as most common mental diseases and patient satisfaction with primary health care services.

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