

Online Depression Assessment Tool Validated

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BOCA RATON, FLA. — A brief online depression assessment tool is as valid as a paper-and-pencil version of the questionnaire, a study of 46 psychiatric outpatients showed.

In addition, the Web version of the Clinically Useful Depression Outcomes Scale (CUDOS) correlated 89% or more with blinded clinician ratings of depression.

VITALS **Major Finding:** 100% of patients preferred an online vs. paper version of CUDOS. Mean score of 19.6 online was nearly identical to 19.0 on the previously validated paper CUDOS.

Data Source: Study of 46 depressed outpatients who completed both versions of CUDOS. Researchers compared scores with independent clinician ratings of depression.

Disclosures: Dr. Zimmerman said he had no relevant disclosures.

Patients were given the Web address (www.outcometracker.org) and were asked to complete the 18-item online questionnaire at home before their clinical visit. Results were e-mailed to the physician. After consultation with the psychiatrist, each participant also completed the conventional paper-and-pencil version of CUDOS. They next answered a six-item preference survey.

All patients preferred the Internet version to the paper questionnaire, Dr. Mark Zimmerman said at a poster presentation. "Patients trust it, interestingly. They found it is as trustworthy as paper questionnaires." Patients thought the information collected via the free Web site was more accurate (38% vs. 0%) as well as safer and more secure (52% vs. 5%), compared with paper, Dr. Zimmerman said. "I did not expect that kind of preference."

The conventional CUDOS takes less than 3 minutes to complete and about 15 seconds to score. Dr. Zimmerman said both versions are clinically useful because they cover all DSM-IV symptoms of major depressive disorder.

A greater percentage of patients reported that the online version took less time to complete (59%), compared with 7% who reported that the paper version was quicker. The remaining 34% said completion time was about the same.

"So it is accurate, trustworthy, and convenient," said Dr. Zimmerman of the department of psychiatry and human behavior at Brown University and director of outpatient psychiatry at Rhode Island Hospital, both in Providence.

The study included 11 men and 35 women (mean age, 44 years).

The 19.6 mean score on the Web version was nearly identical to the 19.0 mean score on the paper version. Agreement on remission status (based on a pre-

viously validated cutoff value of 20) was 91% between the CUDOS instruments.

Independent clinicians rated depression in each participant using the MADRS (Montgomery-Åsberg Depression Rating Scale), the CGI-S (Clinical Global Index–Severity) scale, and the GAF (Global Assessment of Functioning) scale. At baseline, patients had a middle level of depression severity, indicated by a mean MADRS score of 12.4

and CGI-S score of 1.3. The mean GAF score was 65.2.

Without valid, standardized instruments such as CUDOS, "assessment of outcome is not precise, and that could have clinical consequences." For example, an individual patient might tell his psychiatrist he is feeling better, but he might have residual depression symptoms that CUDOS could detect and that otherwise would put him at risk of relapse.

On the other hand, a patient might tell his psychiatrist that he is not feeling better while the instrument indicates some symptom improvement.

With this information, a clinician might opt to adjust the patient's dosage instead of switching medications, for example, according to Dr. Zimmerman.

The study did not have a funding source. ■

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