

# Consider Ethnicity When Screening for Depression

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SANTA ANA PUEBLO, N.M. — Different populations may require different screening instruments for depression, according to investigators who compared the accuracy of methods for detecting depression in 209 terminally ill cancer patients in Japan.

The patients' total score on the Hospital Anxiety and Depression Scale (HADS), the

most indirect tool in the study, was the most accurate indicator, Dr. Tatsuo Akechi reported in a poster at the annual meeting of the Academy of Psychosomatic Medicine.

Direct questions such as "Are you depressed?" and "Have you lost interest or pleasure?" were the least effective, identifying fewer than half the patients who were diagnosed with depression or an adjustment disorder.

"This is a very interesting and important finding because most Japanese peo-

ple are not likely to express their emotion," Dr. Akechi of Nagoya City University, Honshu, Japan, said in an interview at the meeting.

The HADS asks indirect questions, such as whether patients feel tense or wound up, enjoy the things they used to enjoy, or can sit at ease and feel relaxed.

Dr. Akechi reported the total HADS score had a sensitivity of 80% and a specificity of 67% in the Japanese patients. The HADS depression subscale was nearly as

accurate, with a sensitivity of 78% and specificity of 58%.

Though highly specific, the direct questions each had a sensitivity of only 47% when considered alone. Asking a Japanese patient both questions and considering both answers raised the sensitivity only to 68%.

"When the screening target includes both an adjustment disorder and major depression, the HADS is a more useful screening method than the single-item interviews," the investigators concluded. ■

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