

MINIDEP: A simple, self-administered depression screening tool

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Depression is a debilitating illness, and many cases go unrecognized and untreated. There are several depression inventories and questionnaires available for practitioners' use, but many are long or require a specially trained rater or administrator.¹⁻¹⁰

One well-known depression screening questionnaire is the Patient Health Questionnaire (PHQ-9). This instrument is a combination of a 2-item questionnaire and, if the 2-item questionnaire is positive, a 7-item questionnaire.^{2,3} Even if the PHQ-9 is used, it requires a trained healthcare professional to administer it, limiting its use.

On the other hand, the MINIDEP depression screening tool that I developed can be self-administered by the patient either online or while he (she) is in the waiting room. It can be used by any health care specialist (psychiatrist, psychologist, family practitioner, etc.) as part of the patient's evaluation.

Unlike most conventional screening questionnaires, MINIDEP has only 7 questions but covers most of the DSM-5 criteria for major depressive disorder. It also includes a question on unexplained pains or aches, which often is the only symptom that patients report, but is absent in the PHQ-9 and in other screening questionnaires.

Having a simple, easy-to-remember mnemonic means that this questionnaire can be used by medical students, residents, allied health and mental health professionals, and primary care physicians to screen for depression in the community.¹¹

MINIDEP Categories/areas of concern addressed

- M**ood (lowered) and emotional lability.
- I**nterest and desires (anhedonia).
- N**utrition, poor appetite, and weight loss or gain.
- I**nsomnia or hypersomnia.
- D**eath or dying (thinking of), feeling worthless or guilty, or making suicidal plans.
- E**nergy (decreased), impaired daily activities, and worsened cognitive ability.
- P**ains and aches (in absence of unexplained medical illnesses).

I propose rating scores for this questionnaire (*Figure, page e2*) as follows:

0 to 3 Points: Patient is not clinically depressed. Evaluation by a mental health professional might be unnecessary.

4 to 9 Points^a: Depression is suspected. Further evaluation by a mental health professional (not necessarily a psychiatrist) is warranted.

≥10 points: Depression is confirmed. The patient should be evaluated by a psychiatrist for suicidal thoughts.

Note that this proposed rating scale is based on my experience, although I believe it could be useful. To increase this screening

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^aThorough psychiatric evaluation also is warranted if the patient has scored 4 to 9 points, with at least 1 point from Question 5.

Figure

The MINIDEP questionnaire^b

Date _____ Name _____

During the past 2 weeks, how many times have you experienced:

1. A mood change that lasted more than 2 hours?

Less than once	0 points
Maybe once	1 point
More than once	2 points
2. Loss of interest in things that you usually enjoy?

Less than once	0 points
Maybe once	1 point
More than once	2 points
3. Decreased or increased appetite or noticeable weight gain or loss?

Less than once	0 points
Maybe once	1 point
More than once	2 points
4. A disturbance of your typical sleep pattern (early awakening or excessive sleep)?

Less than once	0 points
Maybe once	1 point
More than once	2 points
5. Thinking of death or dying, making suicidal plans, and/or feeling worthless or guilty, or that your life is not worth living?

Less than once	0 points
Maybe once	1 point
More than once	2 points
6. Having less energy to perform your usual daily activities, and/or being forgetful or unable to concentrate on the tasks you previously had no problems with?

Less than once	0 points
Maybe once	1 point
More than once	2 points
7. Unexplained aches or pains?

Less than once	0 points
Maybe once	1 point
More than once	2 points

^bNote: The MINIDEP questionnaire is available for download at www.minidep.com

Unlike other depression screening questionnaires, MINIDEP can be self-administered by the patient

tool's sensitivity, in my experience, evaluation by a mental health professional might be necessary when a patient scores only 3 points on MINIDEP. The optimal number of points for triggering a clinical decision and this questionnaire's sensitivity and specificity, however, need to be studied.

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