



Mar-Apr 2006
Volume 4, Issue 2

Michigan Depression Outreach and Collaborative (MDOCC)

In this Issue

IPT by Dr. Heather Flynn

CareWeb Announcement!

Depression in Primary Care Patient Demographic Information

Contact Dr. Kerber & your Care Managers at:

734-936-8706

Interpersonal Psychotherapy for Depression

Dr. Heather Flynn

Interpersonal Psychotherapy (IPT) is one of the short term therapies that have been proven to be effective for the treatment of depression. Short term psychotherapy usually involves up to 20 sessions (usually weekly meetings, 1 hour per session) and maintains a focus on 1-2 key issues that seem to be most closely related to the depression.

Although depression may not be caused by interpersonal events, it usually has an interpersonal component, that is, it affects relationships and roles in those relationships. IPT was developed to address these interpersonal issues. The precise focus of the therapy targets interpersonal events (such as interpersonal disputes / conflicts, interpersonal role transitions, complicated grief that goes beyond the normal bereavement period) that seem to be most important in the onset and / or maintenance of the depression. The first 1-3 session of IPT are devoted to assessment and identification of the specific interpersonal issue(s) that will be the focus of the remainder of the therapy.

IPT may not be effective in all cases, however, several years of careful study has shown that IPT is equally as effective in the short term treatment of depression as anti-depressant medication therapy. IPT can also work well in conjunction with medications. The decision to use IPT and medications for depression is based on a number of factors such as the severity of the depression, past treatment history, and patient preferences. An IPT clinician (such as a psychologist, psychiatrist or social worker) should present treatment options during the assessment phase and discuss the rationale for IPT.

Since depression is a recurrent illness, it is recommended that successful short term treatment be combined with ongoing, maintenance therapy. Maintenance IPT (IPT-M) can be administered once per month following termination of the short term phase. Preliminary results from ongoing studies suggest that IPT-M may prolong time to recurrence of depression (Frank et al., 1990).

To find out more about IPT, please visit the International Society for Interpersonal Psychotherapy website at www.interpersonalpsychotherapy.org

Frank, E., Kupfer, D., Perel, J.M., Cornes, C., Jarrett, D.B., Mallinger, A.G., McEachran, A.B., Grochocinski, V.J. (1990). Three-year outcomes for maintenance therapies in recurrent depression. Arch Gen Psychiatry. Dec;47(12), 1093-9.

OUTCOMES MEASURES REPORTS CAN NOW BE ACCESSED IN CAREWEB!

- ✓ Outcome measures completed by your patient during our regularly scheduled calls will be available under the **"imaged documents" section in Careweb.**
- ✓ **M-DOCC will discontinue the faxing of these reports to your clinic**
- ✓ MDOCC will now be sending an email to you after the patient completes the measure
- ✓ Remember to check the **imaged documents** section of Careweb **every time** you see a patient who is enrolled in MDOCC.

M-DOCC
Depression Support
Services for Primary
Care

For answers to questions,
 please contact your
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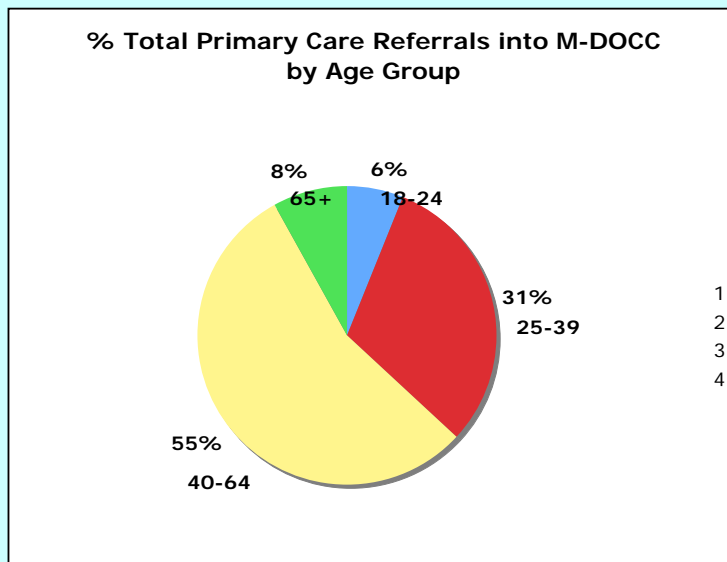
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SELECTED DPC DATA:
Demographic Information of Primary Care Patients
Referred to MDOCC Program
(Total # of referrals=1168)



Patient Referrals by Clinic

Year	2003	2004	2005	Totals
Brighton	139	177	56	372
Chelsea	116	138	49	303
Livonia	8	33	83	124
Dexter	0	119	20	139
East Ann Arbor	78	71	32	181
Total referrals	341	538	240	1,119

Comorbidities*

Patients with _____ and comorbid depression	n	%
Asthma	645	19.4%
Diabetes (type I and II)	441	18.2%
Coronary artery disease	187	16.9%
Congestive heart failure	92	23.6%
overall prevalence of depression		12.8%

**Source: Rates calculated from DFM ClinfoTracker software; 4-year longitudinal recording of all health problems recorded for 45,708 patients from 5 DFM sites*

Please contact your care managers at:
MDOCC-referrals@med.umich.edu or call (734) 936-8706