

Using the PHQ-9 for Screening, Diagnosis and Management of Depression

Initial PHQ Screening questions:

Over the last 2 weeks, how often have you been bothered by any of the following problems?	Not at all	Several days	More than half the days	Nearly every day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3

Negative screen, repeat PHQ screening annually.

- Positive screen, complete questions 3-9; add answers to questions 1-9 for score.
- Total score of 10 or greater meets criteria for clinically significant depression.

Score	Severity	Treatment Options	Follow-up PHQ-9:		
			1 - 3 mo.	3 - 6 mo.	12 mo.
5 - 9	Mild	<ul style="list-style-type: none"> Self-Management Plan¹ 			X
10 - 14	Moderate	<ul style="list-style-type: none"> Self-Management Plan and Watchful Waiting² OR Treat with medication or psychotherapy if there is a history of depression or if symptoms persist Consider Care Management³ 		X	
15 - 19	Moderately Severe	<ul style="list-style-type: none"> Treatment with medication or psychotherapy Care Management recommended³ 	X		
20 - 27	Severe	<ul style="list-style-type: none"> Medication and Care Management recommended Consider psychotherapy & consultation with a psychiatrist⁴ 	X		

NOTES:

¹**Self-Management** activities are recommended for all patients with a PHQ-9 score of 5 or higher.

²**Watchful waiting** means actively following a person with a PHQ-9 within 3 months, but not actively treating his/her depression. People with persistent symptoms after 2-3 months need active treatment.

³Depression **care management** includes periodic phone calls to assess adherence and barriers to treatment, support self-management, and assess response to treatment

⁴Formal **referral to specialty mental health care** should be considered for the following groups of patients:

- Persistent PHQ-9 score ≥ 20 , especially with suicide risk
- Psychiatric comorbidities such as bipolar disorder, panic, PTSD, psychosis, or active substance abuse
- History of psychiatric hospitalization

Response to treatment each month:

Drop of ≥ 5 points:

- Maintain current treatment

Drop of 2-4 points:

- May warrant increase in medication dose
- Maintain psychotherapy

Drop ≤ 1 point or increase in score:

- If on medication: increase dose, switch, or add a medication
- Consider psychiatric consultation
- Consider adding psychotherapy or medication if only using one

Duration of Treatment:

Initial episode: 6 – 12 months. When patient reaches remission (PHQ-9 score 0 -4), after treating for the recommended duration, consider trying to wean from treatment. Reassess using PHQ-9 annually.

Recurrent episode: ≥ 24 months. Maintenance medication may be needed. Chance of reoccurrence is 70% after 2 episodes of depression and 90% after 3

For more information: <http://www.mainehealth.org>,
<http://elearn.mmc.org/depression> - Modules 1 & 3