

PAPER 16

MSTS Abstract

Title: Utilization of Mental Health Referrals for Symptoms of Anxiety and Depression in Patients with Sarcoma

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Background: Symptoms of anxiety and depression exist at a higher prevalence than the general population for patients with sarcoma. Anxiety and depression are known to lead to increased morbidity and mortality, as well as increased health care costs. Therefore, identifying and treating these patients with symptoms of anxiety and depression is an important part of their total care. However, many barriers exist to accessing mental health care. As such, identifying symptoms is only a first step. We identified patients with moderate or worse symptoms of anxiety and depression and provided referrals to mental health professionals to facilitate mental health care.

Question/Purpose: The purpose of the study is to investigate if offering referral mental health professionals, social workers and/or psychiatrists, facilitates access to care for patients.

Patients and Methods: Patients with sarcoma, regardless of disease state, were invited to complete the General Anxiety Disorder-7 (GAD-7) and Patient Health Questionnaire-9 (PHQ-9) questionnaires in the outpatient clinic. Results were reviewed and scored within 72 hours. Patients scoring ≥ 10 on either questionnaire, corresponding to moderate or worse anxiety or depression for the GAD-7 and PHQ-9, respectively, or answering affirmative to question #9 on the PHQ-9 (thoughts of self-harm), were contacted by the orthopaedic oncology team and offered referral to either Social Work or Psychiatry within our institution. Patient charts were reviewed for utilization of these referrals, including data on provider type, frequency of follow up, and therapies offered.

Results: Of 190 patients who participated in responding to the questionnaires, 41 (21.6%) met criteria for referral to mental health professionals. Of these, 30 accepted the referral (73%) and 11 declined referral (27%). Of those patients who declined, during the subsequent year, one patient was referred by another service and that patient once again declined referral. None saw social work or psychiatry for evaluation. Of those patients who accepted referral, nine (30%) saw Social Work only, one (3%) saw Psychiatry only, seven (23%) saw both Social Work and Psychiatry, and 13 saw neither (43%). Of those who saw Social Work, the median number of visits was two. For those who saw Psychiatry, the median number of visits was four. Interventions included supportive therapy, psychotherapy, medications, and support groups.

Conclusion: Symptoms of anxiety and depression are more prevalent in patients with sarcoma than in the general population. Treatment of these symptoms is an important part of the wholistic care of these patients. In our cohort, referrals to mental health professions were frequently accepted, but were only utilized 57% of the time. Of those who did utilize referrals, most met with Social Work, followed by both Social Work and Psychiatry, and then Psychiatry only. Utilization of referral most often resulted in supportive therapy – often active listening and validation of symptoms. More work should be done to identify barriers to care in this population given the large proportion of patients who did not utilize referrals, as well as to review changes in symptoms after treatment.