

## عنوان مقاله:

A Two Question Screen for Mental Health Opportunities

## محل انتشار:

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## خلاصه مقاله:

Background: Shortened versions of validated PRO measures of coping strategies e.g. PSEQ-2, may facilitate screening and monitoring of psychological conditions such as depression and anxiety. The primary research question in this study assesses the sensitivity and specificity of a PSEQ-2 score of less than 10 for important symptoms of depression (a PHQ-2 score greater than 2), anxiety (GAD-2 score greater than 2), any impactful prior episode of psychological trauma, and QuickDASH greater than 49. Secondly we assess the associations between self-efficacy and other demographic and psychological factors on the magnitude of limitations and pain intensity. Methods: We performed a retrospective PRO evaluation in 926 adult patients attending upper extremity clinic between 1st January 2018 and 31st January 2019. Demographic factors were assessed using electronic medical records and PRO data using an online platform. Patients included 556 (60%) women, 370 (40%) men (mean 51 years + 14 (range, 19-88), mostly (n=584, 63%) with safety net insurance. Results: A PSEQ-2 scoring threshold of less than 10 was 81% sensitive for a PHQ-2 score of 3 or greater, 84% sensitive for a GAD-2 score of 3 or greater, 84% sensitive for one or more important psychological traumas, and 82% sensitive for a QuickDASH of 50 or greater. PSEQ-2 less than 10 was independently associated with greater upper extremity limitations ( $\beta=11$  [6.3 to 17, 95% Confidence interval [C.I],  $p < 0.001$ ) and pain intensity ( $\beta=0.92$  (0.31 to 1.5, 95% C.I)  $P=0.003$ ) amongst other psychological and demographic factors. Conclusion: A PSEQ-2 score less than 10 might, along with verbal and non-verbal signs of distress, be a useful way to introduce the use of more sensitive screening questionnaires about anxiety or depression, or open up the option of speaking directly to mental or social health professionals. Future studies are required to test this hypothesis. Level of evidence: III

## کلمات کلیدی:

Anxiety, Depression, patient outcomes, Psychological factors, Resiliency, stress, Self-efficacy

