

PW01-101 - FROM DIAGNOSIS TO TREATMENT - AN ANALYSIS OF ACCESS TO DEPRESSION-SPECIFIC OUTPATIENT TREATMENT FOR PATIENTS WITH DEPRESSION

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Background: Former studies show low treatment rates of outpatients with a diagnosis of depression. The aims of this study are to examine

- (1) the rate of diagnosed depression in outpatient care,
- (2) rates of treatment of depression according to individual and regional characteristics and
- (3) effects of individual and regional characteristics on getting depression-specific treatment in the federal state of Bavaria.

Methods: Prevalence of depression and outpatient treatment for depression as well as individual and regional characteristics of outpatients diagnosed with depression were analysed based on secondary data from the Association of Statutory Health Insurance Physicians Bavaria in 2006 (N=780,226). Descriptive analyses were followed by logistic regression analysis (STATA, PASW) to examine predictive effects of individual and regional characteristics on getting depression-specific treatment.

Results: Prevalence of diagnosed depression is 9.2% for persons who are statutory health insured and older than 17 years. 55% of diagnosed depressed patients do not get a depression-specific treatment within one year. Rates of a depression-specific treatment are higher for persons who are female, of middle age, with a moderate or severe depression, with a psychiatric comorbidity, without somatic comorbidity, who live in more rural areas.

Conclusions: The access to depression-specific treatment after a diagnosis of depression must be facilitated. Training for physicians, psychoeducation for patients and anti-stigma campaigns are necessary measures to reach this goal. The knowledge about influence of individual characteristics on getting a depression-specific treatment is important to reach the groups who get least depression-specific treatment.