Antidepressant medication management

Prescription of antidepressant medications has been shown to be a critical part of the effective care of patients with depression. The consequences of untreated or inadequately treated depression are significant, and taking antidepressant medication correctly is a very important part of appropriate treatment. When medications are used together with appropriate forms of psychological therapy, most patients experience good outcomes. Patients need to be monitored very carefully during the first three to six months of treatment so that the clinician can adjust the dosage or type of medication if necessary. Taking the correct medication as it is prescribed and for the prescribed time is vitally important to the long-term health and well-being of the patient.

Measure
Patients 18 years of age and older who were treated with antidepressants, had a diagnosis of major depression, and who remained on an antidepressant medication treatment for at least 6 months

Two rates are reported:
- Effective Acute Phase Treatment: Patients who remained on antidepressant medication for at least 84 days (12 weeks)
- Effective Continuation Phase Treatment: Patients who remained on antidepressant medication for at least 180 days (6 months)

What to look for
Documentation of the diagnosis for depression or depressive disorder and diagnosis start date.
Documentation of antidepressant medication start date, along with medication name and dosage.

1 HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).
3 Peter Bach et al. HEDIS 2015 Technical Specifications for Health Plans (National Committee for Quality Assurance 2014), 168–171
Tips for provider when talking to the patient

• Talk to your patient about the new medications and encourage discussion about:
  o Expectations of how long to wait for a determination to be made about the effectiveness, since it can take three weeks or longer
  o Expectations about how long the patient may need to be on the medication based on severity and lifetime recurrence
  o Risks of discontinuing the medication prior to six months and that it is associated with a higher rate of recurrence of depression
  o Possible side effects, and that they are generally not dangerous as much as bothersome
  o What the patient should do if they experience side effects
  o The importance of continuing medication, even if the patient is feeling better
  o How to get in touch with your office with questions or concerns
  o Additional factors that can contribute to improvement in symptoms along with the medication, such as aerobic exercise and counseling or therapy
  o The goal of full remission, which may involve increasing the dose even if some improvement is noted at the first follow-up visit
  o Follow-up visits in three to six weeks to reassess symptoms and see if changes need to be made to type or dose of medication
• Provide written instructions to support educational messages.