

# [Business it a professional issues group report](https://assignbuster.com/business-it-a-professional-issues-group-report/)

ID: 10916 Order 197030 December 26, 2007 Business IT- A Professional Issues Group Report The increased cost of consultation, examination, and treatment is driving people to seek online health advisory, particularly of illnesses necessitating a prolonged medication. This simple, low cost, clinically relevant intervention improves the delivery of preventive health services by prompting physicians of evidence-based recommendations in a checklist format that incorporates existing practice patterns. The forms can also be incorporated into an electronic health record.
Physicians are trained to follow guidelines and best practices.
Both antidepressant treatment and time-limited depression targeted psychotherapies are effective when cases of depression are transferred from psychiatric to primary care settings. However, the option between these treatments should depend on patients' preference. Improving treatment of depression in primary care requires properly organized treatment programmes, regular follow-up, monitoring of treatment adherence, and a prominent role for the mental health specialist as educator, consultant, guide and clinician. Future research should focus on how guidelines are best implemented in routine practice, since conventional strategies are not displaying any substantial improvement in their impact on patients.
While considering treatment strategies for patients with depression disorders, there are a number of issues that professional health care specialists confront.
Some of the issues faced are:
\*Does the efficacy of antidepressant pharmacotherapy transfer from specialty to primary care practice
\*Does the efficacy of depression-specific psychotherapies transfer from specialty to primary care practice
\*Are tricyclic antidepressants or newer antidepressants preferable for first line pharmacotherapy
\*Do weekly or biweekly visits during acute-phase pharmacotherapy enhance patient outcomes
\*Is pharmacotherapy or depression-specific psychotherapy preferable as a first-line treatment
\*Which patients should be referred for specialty care
\*Can guideline principles be implemented in primary care
\*Does the implementation of treatment guidelines produce cost-effective services
\*How can care for depression become more cost-effective
Recommendations:
\*Shifting patients away from mental health specialists decreases costs but worsens functioning outcomes. The appropriate strategy for making care for depression treatment cost-effective is through quality improvement and not through changing specialty mix. \*Psychologists managing patients on antidepressant medications did as well as psychiatrists in reducing functioning limitations and were superior to primary care physicians.)
\*Pharmacotherapy be preferred over psychotherapy for the severely depressed, cognitive therapy, with supportive management. Either medication or psychotherapy could serve as the initial treatment for patients with mild or moderate depression.
\*Improved patient outcomes in collaborative care programmes goes down after the withdrawal of the mental health specialist and systematic monitoring of treatment.
\*Psychologists have significantly contributed to patients on depression in primary care and thus there is a rationale why appropriately trained psychologists should be authorized to prescribe.
Our summation is that the idea to turn treatment of depression over to primary care physicians using antidepressant medications has been less than a success. The potency of antidepressant medications has not (and will not) overcome the usefulness of psychological treatments. The stigma against mental conditions allows physicians to help the patients.
What should psychologists do if the treatment of depression in primary care has not been a great success Depression is increasing rapidly and is likely to be the second leading cause of disabling effects by the Year 2020 Time has come to prepare ourselves as a primary health care discipline to address the public needs through enhanced skills of, not only psychotherapy, but pharmacotherapy, as well.
Most psychologists practicing in health care already have a good knowledge base in psychotropic medications, including the routine introduction, monitoring and discontinuance of antidepressants. It provides a powerful argument for psychologists being able to prescribe and manage patient care for depression in comparison to usual care by primary care physicians.
With online treatment of health checks becoming a reality, patients will be able to fill out their details to learn if and when they require medical assistance.
It is now time to fulfill psychology's role as a primary care discipline with authority.
References:
http://www. division42. org/MembersArea/IPfiles/IPWin00/AdvProfIssues/Depression. html
http://www. pubmedcentral. nih. gov/articlerender. fcgiartid= 1543627