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IMPROVING PATIENT EDUCATION AND ACCESS TO ANXIETY TREATMENT

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Problem

- According to the World Health Organization, in developed countries, mental health accounts for more disability than any other group of illnesses [1].
- About 25% of adults in the United States are reported to have a mental illness [2].
- Anxiety disorders are the most prevalent class of mental disorders faced by individuals in the United States [3,4].
- Although anxiety disorders are treatable, only 34% of people diagnosed receive treatment [4].
- In Vermont:
 - Out of the 6826 people receiving outpatient mental health services, 39% were for anxiety disorders [5].
- In Rutland County:
 - Out of the 265 respondents with an anxiety disorder, only 30% were receiving psychotherapy for their condition [5].

Cost

- The CDC reports that in 2002 mental illness cost the United States about \$300 billion [2].
- A study sponsored by the Anxiety and Depression Association of America, published in 1999, estimated the cost of anxiety disorders in the U.S. to be more than \$42 billion a year. About ½ of these costs are predicted to be due to individuals seeking help for their anxiety symptoms that mimic physical illnesses [6].
- Mental illness is associated with increased incidence of other chronic illnesses, such as cardiovascular disease, diabetes, and obesity [2].

Community Perspective (a)

Patient encounters during my clinical rotation at Brandon Medical Center:

- Several patients who had not previously been diagnosed with an anxiety disorder reported anxiety symptoms, including new onset of panic attacks. Many were about to start college, a particularly stressful time full of changes. Most of these patients were unaware of any techniques they could use to help decrease their symptoms and denied having someone they could talk with about it. I felt there was not sufficient time to educate them about anxiety disorders let alone, discuss self-relaxation techniques. In addition, I did not have any resources off-hand I could give to them to help them this issue.
- I also saw a number of patients who have been living with an anxiety disorder for most of their lives. Many have been using medications for years but continue to report uncontrolled symptoms. During discussions I found patients to have minimal knowledge about the other treatment options available for anxiety and their shown benefits. Many were interested to receive more information.

Community Perspective (b)

- *Name Withheld*, D.O., Brandon Medical Center
 - It is always helpful to have something to be able to hand to patients.
 - It would be useful to build on a previous student project. Often, they don't get implemented because the student leaves shortly after.
 - Access to the updated list of the mental health providers in this region would be great for both patients and providers to have.
- *Name Withheld*, LICSW, Brandon Medical Center
 - Patients are much more likely to seek therapy if the therapist is located in the same office as their primary care doctor.
 - I have plenty of resources and information I give patients but if they don't ever make an appointment, I can't get them the information.
 - People with anxiety disorders often like to have written information to read.

Intervention Goals (a)

- Build on a project from a previous student at Brandon Medical Center to help both projects be more useful.
- Facilitate a welcoming environment for patients and providers to talk about mental health.
- Provide patients with educational materials to learn more about anxiety disorders.
- Increase awareness about the effectiveness of combining self-help techniques and therapy with medications, especially for long-term treatment.
- Help patients build on their self-relaxation skills. Introduce them to new self-help techniques for reducing anxiety.
- Give providers a tool to help address patients' anxiety, particularly when there is a time constraint and there would not be a discussion otherwise.
- Ensure patients and providers have access to the list of mental health providers in Rutland & Addison counties (constructed by student, Amanda Peel).

Methodology (b)

- Reviewed list of mental health providers in Addison & Rutland counties created by previous student, Amanda Peel (2013), with providers at Brandon Medical Center. Distributed updated copy to providers and office manager.
- Created an educational brochure which includes the following:
 - basic definitions of anxiety disorders
 - information concerning the various treatment options available
 - emphasis on importance of combination of medication with self-help techniques and psychotherapy
 - examples of self-relaxation techniques
 - resources for more information
 - comprehensive list of mental healthcare providers in Addison & Rutland counties
- This brochure will be distributed in all patient rooms for providers and patients to easily access.
- Copies will be sent to the remaining Community Health Center of Rutland Region (CHCRR) facilities for use.

Results/Response (a)

Providers at Brandon Medical Center showed excitement towards the final product. Some responses include:

- This is great information!
- It is important information for patients who may have questions about anxiety and treatment. Having the brochure in the room will make it much easier to ensure that patients receive this information.
- It is great to include the self-help techniques directly in the brochure as well as listing resources to find more. Patient's always ask about those.
- Printing the list of mental health providers listed by location will make it easy for patients to see the options of providers and will be more likely to seek help.
- This will be great to send to the other CHCRR offices.

Results/Response (b)

Patient encounter

- Background: 21yo female with anxiety who has been taking sertraline since age 11. Recently she attempted to discontinue her sertraline but, her anxiety quickly relapsed.
- Patient expressed her frustration that she could not be healthy without medication. She felt she was too young to be dependent on medication for the rest of her life.
- Discussed with patient that medication is only part of the recommended treatment for anxiety and explained that many people see even more results with therapy and using self-help techniques.
- Patient very receptive and excited to hear there are other options to address the root of her anxiety.
- Established plan with patient to start therapy and use self-help resources for the next few months. At the next follow-up appointment we will discuss her progress with these treatments and make a plan to attempt a second trial of discontinuation of sertraline.

Evaluation/Limitations

- Due to the short length of the rotation, there was not time to evaluate the effectiveness of the brochures. It would be useful to do a qualitative analysis. This should include speaking with patients directly about the following:
 - usefulness of the information in understanding their illness
 - if they were more likely to seek treatment for their anxiety as a result
 - if they were more likely to try a combination of treatment as opposed to only using medication
 - if they utilized the list of mental health providers
- A survey of providers would be valuable to determine if the brochure helped to provide more comprehensive care. It would be interesting to see if the brochure was helpful particularly in appointments where there was a time constraint.

Future Recommendations

- Create additional brochures focusing on each of the other common mental health disorders.
- Generate an additional anxiety informational brochure which targets students who are about to start college.
- Continue to update provider list as there is a quick turnover rate.
- Include information about cost. Limited finances is one of the biggest barriers to therapy.
- Hold a class for patients to practice self-relaxation techniques.

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