



## HOW TO IMPROVE THE MANAGEMENT OF CLINICAL DEPRESSION?: A QUALITATIV APPROACH

### [Spanish Full Text](#)

#### SUMMARY

**Introduction:** It is extremely important to understand how patients conceptualize depression and how they assess the care received, since their perception of both the disorder and health services influences their access to and interaction with the health-care system. Furthermore, clinical management of depression is, among other factors, influenced by the attitudes of the professionals involved. Therefore, it is of great interest to have this information and know about the barriers to and facilitators for adopting proposed evidence-based recommendations in clinical practice guidelines (CPGs). A qualitative approach can furnish evidence on these aspects, bearing in mind that there are factors which are difficult to assess by means of quantitative research.

**Objectives:** This study's overall aim was to explore the views held by patients, relatives and professionals about depression and its clinical management. The specific objectives were: firstly, to analyse the experience of depression and the health-care process from the point of view of patients, their families and professionals; and secondly, to assess -at first hand- patients' expectations at different points of the process, identifying both the strengths and the principal areas for improvement.

**Methods:** With the aim of achieving a more complete and comprehensive picture of the designated objectives, a mixed methodological approach were employed, by combining a systematic review of the literature with a qualitative study. To this end, a bibliographic search was conducted in the following databases: Medline (PubMed); Embase and PsycINFO (Ovid). Two independent reviewers selected those qualitative studies that focused on analysing patients', relatives' and professionals' perceptions of depression and its clinical management. While the CASPe checklist (Critical Appraisal Skills Programme Español) and method proposed by Goldsmith et al (2007) were used for quality assessment, thematic analysis of the data was used for analysing and summarising the qualitative evidence. To undertake the empirical study, we opted for the focus group technique. Participants were recruited with the collaboration of professionals drawn from the Galician Health Service (Servizo Galego de Saúde-SERGAS) and the Galician Federation of Associations of Relatives and Persons with Mental Disease (Federación de Asociaciones de Familiares y Personas con Enfermedad Mental de Galicia-FEAFES). Transcripts were analysed by discourse analysis and categorisation of the information, with a double triangulation strategy being used for data and researchers.

**Results:** Depression is complex, not only as a disorder but also in terms of its clinical management. Both the systematic review of the literature and the empirical study highlighted the importance of taking account of how patients conceptualised depression, the



disorder's impact at a personal and family level, and the related stigma. Similarly, the role given to the different treatments was decisive as regards their acceptability and adherence, and could even be a fundamental factor to be borne in mind when it comes to assessing their effectiveness. Patients and relatives alike reported the existence of a certain lack of information, which has become an important barrier in diagnosis and treatment. Furthermore, despite acknowledging the advances experienced in recent decades in the treatment of affective disorders, professionals stressed the need to continue developing strategies to improve clinical practice. Chief among such strategies were the boosting of the collaborative and multidisciplinary approach, and clinical management of depression from an holistic stance without losing sight of the social dimension. Other measures cited were training and the drawing-up and implementation of CPGs adapted to the specific needs of each health-care context.

**Conclusions:** Management of depression is a complex task that calls for the implementation of measures of a different nature, which enable clinical practice to be improved and optimised. To this end, it is necessary to continue to rely on complementing the evidence drawn from traditional research, with qualitative studies that allow for the incorporation of the views, not only of the patients and their family environment, but also of the professionals involved. The appraisal of the role of patients' needs, motivations, attitudes and perceptions is currently as important as the ongoing search for the most effective interventions and treatments. In this respect, the incorporation of qualitative evidence in CPGs is crucial.