

# **Do General Practitioners Adhere to NICE Guidelines for Depression? Questionnaire Survey**

**Supplementary Information for Web Version of Paper: GP Questionnaire**

## GP QUESTIONNAIRE

### Background information: About You

Gender (*please circle*): \_\_\_\_\_ Male / Female

Year of qualification as a doctor: \_\_\_\_\_

Do you have MRCGP? (*please circle*): Yes / No

Have you trained or worked in Psychiatry for at least 6 months in the past: Yes / No

### Question 1

Do you routinely screen the following patient groups for depression? (*please tick all that apply*)

	YES	NO
Past history of depression	<input type="checkbox"/>	<input type="checkbox"/>
Coronary heart disease	<input type="checkbox"/>	<input type="checkbox"/>
Diabetics	<input type="checkbox"/>	<input type="checkbox"/>
Other mental health problems eg dementia, schizophrenia	<input type="checkbox"/>	<input type="checkbox"/>

If so, please state your method of screening: (*please tick all that apply*)

Two question approach	<input type="checkbox"/>
A formal rating scale eg PHQ-9, BDI, HAD	<input type="checkbox"/>
Clinical judgement	<input type="checkbox"/>

### Question 2

How would you rate your overall level of confidence at treating depression in general practice?

(*please tick only one*)

low

fair

high

### Question 3

Please state which two antidepressant drugs you are prescribing most commonly at the moment:

Name of 1<sup>st</sup> choice: .....usual treatment dosage:.....

Name of 2<sup>nd</sup> choice: .....usual treatment dosage:.....

Explain briefly your main reasons for this choice:

Answer: .....

#### Question 4

In which of the following situations would you normally prescribe **antidepressant medication** within your management of a depressed patient? *(please tick ALL that apply)*

- Overall **level** of depression rated by yourself as **mild** - still able to work and carry out normal daily activities
- Moderate** - struggling with the above, some impairment
- Severe** - unable to work or carry out daily activities
- Several **somatic** (biological) **symptoms** present.
- Current **alcohol** consumption is at potentially harmful levels (at least 35 units weekly for women, 50 units for men)
- Patient is at least moderately depressed, but there is a clear and understandable **reason** for this (e.g. coexisting physical illness, no job, relationship problems etc.)
- Suicidal** thoughts or ideas present

#### Question 5

After initial recovery from an episode of depression, what is the minimum period of time for which you routinely advise patients to **continue taking** their antidepressant?

*Answer:* .....

If a patient has had **two or more** episodes of clinical depression in the recent past, for how long would you advise the patient to continue taking antidepressants?

*Answer:* .....

#### Question 6

Do you use Cognitive Behavioural Therapy as a GP as part of your management of depression in primary care?

- Yes
- No

Please give reason for your answer (eg evidence base, time, skills, patient preference)

*Answer:* .....  
.....

**Question 7**

Please state your main reasons for **referring** a depressed person to secondary care mental health services (e.g. a community mental health team or a psychiatrist)

Answer: .....

.....

Name up to **three other professional agencies** that you most commonly involve to assist in managing depression in primary care ( for example, practice nurse/ counsellor, CPN, social worker, primary care mental health worker, graduate mental health worker, job centre, housing, Citizens' Advice Bureau, Relate, alcohol service etc.)

1.....

2.....

3.....

**Question 8** (please tick **ALL** that apply)

Which of the following non-pharmacological approaches do you use in managing depression:

- Giving written information about depression to the patient
- Deciding the management plan in collaboration with the patient
- Practical problem-solving techniques
- Getting the patient to keep a diary of mood, thoughts & activities
- Scheduling of previously pleasurable activities as "homework"
- Challenging of the patient's negative thoughts (e.g. " I am a failure", "everyone hates me")
- Advice on promoting sleep
- Referral for exercise on prescription
- Referral for counselling
- A guided self help programme (eg written material plus limited professional support. If so, please state type of professional who would offer support eg GP, primary care mental health worker, CPN etc.....)
- Computerised CBT (If so, please name the computer programme .....
- Initially no intervention, I'd observe only. (If so, please state for how long you wait before suggesting an intervention.....)



