Association between Substance Use Disorder, PTSD and the Effectiveness of Collaborative Care for Depression in Primary Care: A Systematic Literature Search and Narrative Review

Authors: J. Raub, H. Schillok, L. Kaupe, C. Jung-Sievers, G. Pitschel-Walz, M. Bühner, J. Gensichen, F. D. Pokal-Gruppe Abstract: Introduction: In Germany, depression ranks among the top ten diseases with the highest disease burden and often occurs with comorbidities. Collaborative Care (CC), a concept developed in the United States for the primary care management of chronic diseases, has been identified as an efficient model for the treatment of depression in general medicine. A recent meta-analysis highlights research gaps regarding CC in patients with psychiatric multimorbidity. The highest prevalence of psychiatric comorbidities in depression is observed in anxiety disorders, post-traumatic stress disorder (PTSD), and substance use disorders. Methods: We conducted a literature search following the PRISMA guidelines with three components: Collaborative Care, Depression and randomized controlled trial on the common databases. We focused on the examination of psychiatric comorbidities in depression, specifically Posttraumatic Stress Disorder (PTSD) and Substance Use Disorder (SUD). Results: During the screening process, we identified nine relevant articles related to PTSD, the number of articles related to Substance Use Disorder (SUD) was ten. We examined a total of 8,634 individuals. Our literature review did not reveal any overall significant superiority of the Collaborative Care model compared to Usual Care in patients with depression with comorbid Substance Use Disorder (SUD) or Posttraumatic Stress Disorder (PTSD). Discussion: Five studies demonstrate a faster and statistically significant improvement in depression outcomes among patients with Substance Use Disorder (SUD) and Posttraumatic Stress Disorder (PTSD). Currently, several randomized controlled trials on the topic of Collaborative Care in depression with psychiatric comorbidity are ongoing, such as miCare, Claro and COMET.

Keywords: Depression, primary care, collaborative care, PTSD, Substance use Disorder

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