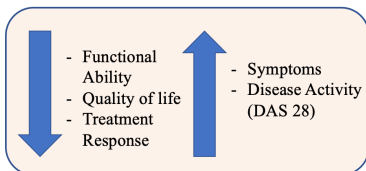


Depression and its impact on Rheumatoid Arthritis

Rheumatoid Arthritis and Depression are widespread diseases associated with poor health outcomes.

Depression among patients with Rheumatoid Arthritis is associated with:



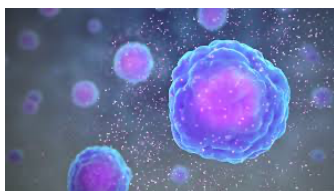
- As a result of the negative outcomes related to depression, it is important for a provider to effectively detect and treat depression in patients with rheumatoid arthritis.

Pathogenesis: An Inflammatory Hypothesis

Recent advances in medicine and research have facilitated the identification of immune alterations present in both conditions and their effects on brain structure and function.

- During the rheumatoid arthritis inflammatory response, proinflammatory cytokines (TNF α , IL-6, and IL-1 β) are circulating systemically.

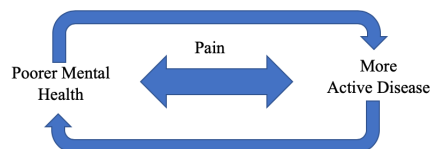
- An increase in these peripheral cytokines is thought to directly activate pathways affecting brain structures known to be altered in depression.



Psychosocial Factors and a Bidirectional Relationship

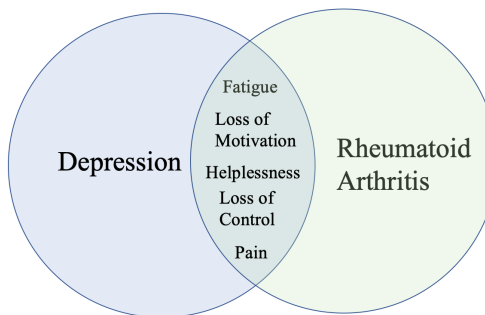
Rheumatoid Arthritis is a chronic disease with no cure.

- The impact of rheumatoid arthritis on a patient's pain and functioning can contribute negatively to their depression, while chronic depression can also be exacerbated by rheumatoid arthritis.



Barriers to Identification

Identifying and diagnosing depression in rheumatoid arthritis can be difficult due to the overlapping signs and symptoms.



Healthcare providers may not screen their RA patients for depression due to:

- time constraints,
- inadequate referral services,
- lack of training and/or confidence in assessing for depression
- assumptions that another healthcare professional will handle the mental health concerns of their patient.

Clinical Protocol

Patient with Rheumatoid Arthritis * See "When to Refer" Section			
Identify Predisposing Risk Factors & Symptomatology			
Predisposing Risk Factors <ul style="list-style-type: none"> Advanced age (≥ 65 yrs.) Female Low Socioeconomic Status Past Hx. of Depression Poor Social Support High Disease Activity (DAS 28 > 5.1) 		Symptomatology <ul style="list-style-type: none"> Sadness, guilt, worthlessness Lack of interest Weight Loss/Gain Changes in Sleep Fatigue Thoughts of Death/ Suicide * 	
Screening Tools <ul style="list-style-type: none"> Patient Health Questionnaire 9 (PHQ9), Beck Depression Index-II (BDI-II), Geriatric Depression Scale (GDS) <ul style="list-style-type: none"> All appropriate screening tools used in multiple studies on depression among rheumatoid arthritis patients Screen all patients with Rheumatoid Arthritis placing special emphasis on those who have predisposing risk factors/symptoms 			
Diagnosis via Screening Tools			
PHQ-9 Depression + Mild= 5 Moderate= 10 Moderately Severe= 15 Severe= 20 *	BDI-II Depression + Mild= 14-19 Moderate= 20-28 Severe= 29-63 *	GDS Depression + Mild= 10-19 Severe= 20-30 *	
Treatment			
Pharmacological First-line treatment = SSRIs <ul style="list-style-type: none"> Sertraline (Zoloft) Paroxetine (Paxil) Fluoxetine (Prozac) Citalopram (Celexa) Escitalopram (Lexapro) Consider: <ul style="list-style-type: none"> Mirtazapine (Remeron) for co-treatment of Insomnia and Weight Loss Bupropion (Wellbutrin) for co-treatment of Weight Gain 	Nonpharmacological <ul style="list-style-type: none"> Cognitive Behavioral Therapy (CBT) Mindfulness Exercise Therapy Support Groups Internet Based Self-Help Programs 	Combination Pharmacological/ Nonpharmacological <ul style="list-style-type: none"> May offer advantages over either modality alone especially among patients with chronic, severe, progressive illness Not well studied 	
Collaborative Care <ul style="list-style-type: none"> Behavioral Medicine Specialist working in tandem with provider in developing & implementing successful interventions Educate and Counsel patient and caregivers 			
When to Refer			
Severe Symptoms of Depression PHQ 9 = 20 BDI-II = 29-63 GDS= 2-30	Suicidal Ideation/ Plans * IMMEDIATE referral to the ER	High Burden on Daily Life / Functioning	Failure to respond to treatment