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National Health Experts Convene to Advance Adolescent Mental Health Screening in Primary Care

Forum Covers Institute of Medicine; U.S. Preventive Services Task Force Recommendations for Teen Mental Health Checkups in Doctors' Offices

NEW YORK – Leaders in government, pediatrics and mental health, met June 4 to explore this spring's back-to-back recommendations from the Institute of Medicine (IOM) and U.S. Preventive Services Task Force (USPSTF) for all teens to receive a mental health screen as part of routine medical care for the early detection of depression and other mental disorders. The national experts were convened by the TeenScreen National Center for Mental Health Checkups at Columbia University with the expectation that the proceedings will inform those working nationwide to include screening in medical settings in public policy including national health reform.

The IOM's *Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities* report and the USPSTF's *Recommendation Statement on Screening for Major Depressive Disorders in Children and Adolescents* together urge that primary care settings become the front line in the early detection of mental illness and prevention of suicide. Forum speakers and participants discussed the importance of using evidence-based screening tools for early detection, the need for advocacy to promote mental health checkups in primary care, and the need for provider reimbursement and training of health professionals.

"Prevalence of depression is as high as 20 percent in 12- to 18-year-olds and many of these adolescents are undiagnosed," said Thomas G. DeWitt, M.D., F.A.A.P., chair of methodology for the USPSTF panel and director of General and Community Pediatrics at Cincinnati Children's Hospital Medical Center. Dr. DeWitt compared depression screening to testing for high blood pressure explaining that identification and treatment for depression early on could, as identification and treatment for hypertension has, result in improved outcomes and better quality of life down the road.

The Director of the IOM Board on Children, Youth and Families Rosemary Chalk, who has written and directed several IOM reports on the health of adolescents, focused on the benefits of early identification, saying "Mental and physical health are inseparable and that is true for our youth," Chalk said. "We need support for early intervention...making mental health a national priority in establishing public prevention goals. We need to talk about how to build...positive, protective factors within our communities, within families, within youth."

Lloyd Sederer, M.D., medical director of New York State's Office of Mental Health endorsed the need for change in the current health care system. "The goal is to devise a measure of mental disorder and make it standard of practice in primary care," he said. He said it is important for parents and communities to know that a standard for adolescent screening exists and that they can expect their child's whole health to be routinely evaluated. He went on to say that providers cannot wait for an adequate mental health system to be in place before beginning to implement screening, saying that there has to be a tipping point of action and that the time to begin is now.

Representatives of Kaiser Permanente, EmblemHealth, and ValueOptions; leading managed care companies engaged in mental health checkup projects, presented at Thursday's forum and outlined the steps necessary for physicians to implement the IOM and USPSTF recommendations.

Richard Spurlock, M.D., M.B.A., medical director of Kaiser Permanente Southern Colorado discussed the importance of having referral and reimbursement systems in place to support physicians. “Doctors want to do the right thing,” Spurlock said. “Payers need to remove barriers, such as reimbursement, for providers in the trenches.”

Many pediatricians are already implementing mental health checkups as a standard of care at adolescent health visits. John H. Genrich, M.D., a Colorado Springs pediatrician who currently screens adolescents for depression and other mental illnesses in his private practice shared some of his experiences, “When a child has a problem, the parents often ask ‘Why didn’t you say something?’ and the answer from the teen is always, ‘Because you never asked’.” Dr. Genrich spoke of how the integration of screening has changed the way he treats adolescent patients and how it saves time by allowing him to have a better informed interview with adolescent patients. By reviewing their screening questionnaire before the physical exam, Dr. Genrich has been able to use the checkups to ask more directed questions about mental health and get several teens the help they needed.

Darcy Gruttadaro, J.D., director of the Child and Adolescent Action Center for the National Alliance on Mental Illness, summed up the need for mental health checkups in primary care by saying, “The years from sixth to tenth grade are key developmental years for our children. You can never get back those critical developmental years. These reports remind us that screening in primary care is the right thing to do. We know today we’re not identifying 80 percent of kids [who have mental illness]. We have to be asking these questions in primary care, because we’re just not reaching the kids we need to be reaching.”

The TeenScreen National Center has several demonstration programs across the nation where mental health checkups are incorporated into primary care appointments. For more information or to obtain materials about incorporating screening into primary care settings, please contact www.teenscreen.org, call 1-866-TeenScreen (1-866-833-6727) or email MentalHealthCheckups@childpsych.columbia.edu.

Last week’s program was the first Trendell Health Policy Forum, named for Eric Trendell, a college student who died by suicide in 2002. A gift from his family’s estate partly supported the forum.

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The TeenScreen National Center for Mental Health Checkups at Columbia University is a non-profit, privately funded mental health initiative. The mission of the National Center is to expand and improve early detection of mental illness by mainstreaming mental health checkups as a routine procedure in adolescent health care, schools, and other youth-serving settings. The National Center offers youth mental health checkups through two major national efforts, TeenScreen Primary Care and TeenScreen Schools and Communities. Voluntary screening is provided in more than 500 sites in 43 states through the National Center’s efforts. The National Center is an affiliate of the Columbia University Division of Child and Adolescent Psychiatry.