Strategies for Managing Co-Morbid Diabetes and Depression in Primary Care
Agenda

- Opening Remarks
- Housekeeping
- Presentation
- Q&A
- Closing Remarks
Introduction to the atom Alliance

Multi-state alliance for powerful change composed of three nonprofit, healthcare QI consulting companies.
Housekeeping Items: Chat

To ensure maximum sound quality, participant lines have been muted; however we welcome ALL questions and comments via the chat board on the right hand side of your screen.

To submit questions or comments:

• Use WebEx chat – send messages to the panelists or all participants using the chat feature drop down menu.
Housekeeping Items: Q & A

To ask panelists questions directly, and privately

- The panelist can then decide to answer the question privately (only the person that asked the question will see the response), or the panelist can answer publicly, and all participants will see the question and the answer.
Strategies for Managing Co-Morbid Diabetes and Depression in Primary Care

Holly Robertson, MD and Eboni Winford, Ph.D.
Cherokee Health Systems
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Overview

Overview of diabetes

Overview of depression

Behavioral health strategies for managing diabetes in primary care

Q & A
Objectives

- Demonstrate a basic understanding of risk factors, symptoms, and lab findings related to diabetes;

- Describe two ways depression complicates treatment and exacerbates symptoms of diabetes;

- Describe two ways primary care providers can incorporate knowledge of depression to help patients improve self-management of diabetes; and

- Describe two ways behavioral health providers can incorporate knowledge of diabetes to help patients improve self-management of depression and diabetes.
Diabetes: Overview

- A cluster of diseases involving problems with insulin (production &/or utilization)

- Affects approximately 9% of the US population
Diabetes: Overview

Pancreas normally releases insulin to help the body store and use glucose and fat from the food consumed for energy.

Diabetes occurs when

- Pancreas does not make **any** insulin
- Pancreas does not make **enough** insulin
- Body does not respond appropriately to insulin—insulin resistance
Diabetes: Overview

Type 1 Diabetes

- Cells that make insulin in the pancreas are destroyed by immune system
- Pancreas makes no insulin
- Need insulin injections to control blood sugar
- Usually starts before age 20
Diabetes: Overview

Type I Symptoms

• Increased thirst &/or hunger
• Dry mouth
• Frequent urination
• Unexplained weight loss
• Fatigue
• Blurred vision
• Heavy breathing
• Loss of consciousness
Diabetes: Overview

Type I Diabetes Risk Factors

Genetics/family history may play a role
Geography
Age
Diabetes: Overview

Numbers to Know

- A random blood sugar test of levels over 200 mg/dL indicate a likely diagnosis of diabetes

<table>
<thead>
<tr>
<th>Fasting Blood Sugar</th>
<th>Classification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 100 mg/dL</td>
<td>Normal</td>
</tr>
<tr>
<td>Between 100 and 125 mg/dL</td>
<td>Prediabetes</td>
</tr>
<tr>
<td>Above 126 mg/dL</td>
<td>Diabetes</td>
</tr>
</tbody>
</table>

- A1C level of 6.5 percent or higher on two separate blood tests indicates diabetes
Diabetes: Overview

Type 2 Diabetes

- Pancreas does not make enough insulin OR
- Body is resistant to insulin the pancreas produces & glucose cannot get into the cells
- Most common form
- Usually occurs in people over 40 & who are overweight
Diabetes: Overview

Type 2 Symptoms

- Slow-healing cuts/sores
- Itchy skin
- Yeast infections
- Recent weight gain
- Numbness/tingling in hands/feet
- Impotence/erectile dysfunction

***in addition to symptoms of Type 1 Diabetes***
Diabetes: Overview

Type 2 Risk Factors

- BMI above 85th percentile
- Family with type 2 diabetes
- Black, Hispanic, Native American, Asian American, or Pacific Islander
- Has signs of insulin resistance (e.g., darkened skin on the neck/armpits)
Diabetes: Overview

Numbers to Know

- The same tests may be run for type 2 as type 1 diabetes
- Or a glucose tolerance test may be necessary
- Blood sugar above 200 mg/dL after two hours is considered diabetes
- Blood sugar of 140-199 mg/dL indicates prediabetes
- There are ways to differentiate between type 1 and type 2 diabetes, but the type may not be known
Diabetes: Overview

Long-term consequences of diabetes include:

- Vision changes including blindness
- Non-traumatic amputations
- Kidney damage including failure/dialysis
- Neuropathy
- Heart & blood vessel disease
- Skin & mouth conditions
- Digestion problems
Diabetes: Treatment Goals

- A1C < 7%
- Blood glucose levels around 100
- If overweight/obese, weight loss

***This will vary from person to person***
Co-Morbid Diabetes & Depression

- Treatment of diabetes often complicated by co-morbid depression

- Depression is an independent risk factor for diabetes

- Up to 45% of people with diabetes have undiagnosed depression

- Depression is associated with poorer self-management of diabetes symptoms
Co-Morbid Depression & Diabetes

Presence of depression along with diabetes can:

• Complicate diagnosis
• Exacerbate symptoms
• Complicate treatment
• Increase morbidity, mortality, course of illness
• Reduced adherence and self-care
• Poorer treatment outcomes
Depression: Overview

- A mood disorder characterized by episodes of at least 2 weeks’ duration where clear-cut changes in mood, thoughts, and levels of activation occur.

- Approximately 7% of US population has a diagnosis of depression (12-month prevalence); 17% (lifetime prevalence).

- Rate is 1.5-3x higher in females than males beginning in early adolescence.

- Rate among 18-29-year-olds is 3x higher than rate among individuals over age 60.

- More common among those with chronic illness.
Depression: Overview

Symptoms of Depression

- Depressed/irritable mood most of the day
- Reduced interest/pleasure in almost all activities
- Significant changes in weight (up or down)
- Trouble sleeping (too much or too little)
- Moving slowly or being fidgety
- Fatigue/loss of energy
- Feelings of worthlessness or excessive guilt
- Difficulty concentrating/thinking
- Thoughts of death &/or suicidal ideation

* Symptoms present for at least 2 weeks
Depression: Overview

Risk Factors

- Female gender
- Temperament
- Environment
  - Adverse childhood experiences
  - Stressful life events
  - Access to resources
- Genetics
- Substance use
- Medical diagnoses
  - Cardiovascular
  - Obesity
  - Endocrine-related (e.g., diabetes)
Depression: Overview

Numbers to Know

- 5 or more symptoms for at least 2 weeks
- Score of 9 or greater on PHQ-9
Depression: Overview

Long-term consequences of depression include:

- Decreased functioning/disability
- Exacerbation of medical symptoms
- Increased risk for disease including coronary diseases & strokes
- Complicated disease management
- Increased substance use
- Sleep disturbances
- Increased risky behaviors
- Increased risk of suicide attempts & completions
Depression: Overview

Treatment Goals

- Reduction/remission of symptoms
- Increased functioning
- Early identification & treatment of recurrences
- Reduced suicide attempts/completions
There is a growing need to expand our scope of practice to best address these co-occurring concerns & to continually improve the quality of health care
Treatment Goals of Co-Managing Depression & Diabetes

- Improved glycemic control
- Reduced hospital admissions
- Improved morbidity & mortality rates
- Reduced health care costs
- Reduced diabetes-related complications
- Increased quality of life
- Reduced cardiac events
- Improved diabetes self-care including adherence
Strategies & Interventions for Co-Managing Depression & Diabetes

- Clarify diagnosis
- Manage with medications
- Problem-solve barriers to adherence & self-management
- Assess for symptoms of depression & address comorbid concerns
- Assess for self-management of diabetes
- Encourage concurrent blood glucose and mood ratings
- Encourage lifestyle changes including food choices and activity/exercise
- Coordinate access to behavioral health and/or primary care services
- Communicate between care providers (BH & PCP)
On-Demand Learning (ODL)

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- Click “Submit” and you’ll have access to the ODL of your choice.
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