



WHO Mental Health Economics Dr Dan Chisholm

The *diamond* Consortium and PEP Collaboration (Primary Care Evidence-Based Psychological Interventions) was pleased to welcome the arrival of Dr Dan Chisholm, the second visiting academic for the Consortium in 2005. Dr Chisholm is a mental health economist currently working in the Department of Health System Financing, Expenditure and Resource Allocation and also the Department of Mental Health and Substance Abuse, WHO Geneva. The Consortium hosted Dr Chisholm between 4 - 20th April 2005. His work is focused on analysis of the costs and effectiveness of strategies for reducing the global burden of mental disorders and addiction, and its contribution to broader priority-setting agendas at the national level. While in Melbourne, Dr Chisholm gave two seminars and facilitated a workshop on 'Costs and costing for economic analysis of health interventions'.



Dr Dan Chisholm facilitating a Consortium workshop on 'Costs and costing for economic analysis of health interventions'

The first of the two seminars *'The longitudinal relationship between depression status, health service costs and work productivity (LIDO)'* addressed the notion of policy relevance of mental health economics, what the current limitations are and how they can be overcome. In the follow-up evening seminar Dr Chisholm presented an economic dimension using the LIDO study as an example, comparing the extent to which (treated and non-treated) depressives make use of services, how LIDO measured the economic impact of depression on individuals and health services, and exploring the associations between service costs, depressive symptoms and quality of life. Copies of the presentations by Dr Chisholm are available at;

The *diamond* study is launched!

diamond, the first ever large study of the way depression is actually managed in Australian general practice was officially launched on Tuesday 15th February 2005, coinciding with the visit by Prof Christopher Dowrick, the *diamond* Consortium's first visiting academic for 2005. A Professor of Primary Medical Care at the University of Liverpool UK, Prof Dowrick has research interests in mental health, particularly depression and medically unexplained symptoms in primary care and community settings. He is a member of the UK Department of Health's Mental Health Task Force, and editor of the journal 'Chronic Illness'. In his most recent book 'Beyond Depression' (OUP, 2004) he provides a radical critique of current medical approaches to understanding and managing depression, and proposes alternative perspectives drawn from philosophical, historical and literary sources. During his stay, Professor Dowrick was based at the Department of General Practice, the University of Melbourne and conducted three seminars:

'Beyond Depression'
'Medically unexplained symptoms'
'The impact of the words GPs use when talking about depression'

Prof Dowrick's seminar entitled 'Beyond Depression' that preceded the launch attracted an audience of over 50 people, with representatives from a range of research institutions / centres and other health organizations including St Vincent's Primary Mental Health, Mercy Hospital for Women, Mother and Child Health Research - La Trobe University, Health Issues Centre, Darebin Community Health. For copies of the presentations, visit www.diamond.unimelb.edu.au/events/seminars



Left to right: Prof Christopher Dowrick, audience at the seminar by Prof Dowrick entitled 'Beyond Depression'



Dr Gail Gilchrist presents preliminary results from the *diamond* study pilot

Do you have any research or best practice you want to share with us?

Contact: Maria Potiriadis, University of Melbourne, Department of General Practice, 03 8344 9719 or m.potiriadis@unimelb.edu.au

Greetings from Liverpool....

Prof Christopher Dowrick,
Professor of Primary Medical Care,
University of Liverpool, UK



It was a great honour for me to be invited by the *diamond* Consortium to spend a February fortnight in Melbourne. I had a wonderful time! Although everyone apologised for the unseasonably cool weather, it was at least 20 degrees warmer than back home in Liverpool, and just right for me. It was a delight to explore the banks of the Yarra and the restaurants and bookshops of Lygon Street, to be introduced to Double Happiness in (aptly named) Liverpool Street, and to have a glimpse of Ballarat and the countryside around it - even my close encounter with a Tiger Snake gave me a good surge of adrenalin.

The visit confirmed my impression that *diamond* is being run by a strong and effective research team. You are well organised, able to think both creatively and strategically, and with excellent collaborative links within the mental health research community, and with general practitioners and patient groups in Melbourne and across Victoria.

The research you are undertaking is of fundamental importance, not just in Victoria but also internationally. You are mapping illness and care pathways from two relatively neglected perspectives, those of primary care practitioners and people with experience of depression. You are including important components not adequately considered in previous studies, especially regarding characteristics of practitioner's style, and the life experiences of patients. You are demonstrating the need to be aware of the whole process of care, and are not falling into the simplistic assumption that findings drawn primarily from psychiatric research in other health care settings are sufficient or appropriate in context of Victorian primary care. And the longitudinal element of *diamond* is crucial, since we really do not yet know enough about the natural history of depression in primary care settings, how long symptoms may persist, or what are the key factors associated with recovery or recurrence.

I very much appreciated the many opportunities you gave me to share ideas through lectures, seminars and discussions. Lots of high quality food for thought. Keep up the excellent work.... I look forward to finding out more about your work next time I'm down under.

Regards,
Christopher Dowrick

The *diamond* study underway!

The *diamond* Study is the first of its kind in Australia to map the pathways to and from primary care for people experiencing depression. This is an opportunity for patients to share their experiences and voice their feelings about the way local GPs care for their emotional well-being. Through this study we will learn about how emotional issues are currently managed by the local doctor and to recommend changes to the system where necessary. Leading the group is Associate Professor Jane Gunn, working with colleagues in the University's Department of General Practice and collaborative partners from St Vincent's Mental Health and Monash and Newcastle Universities.

Following a very successful pilot in regional Victoria, the next phase of *diamond* is now underway across rural and metropolitan Victoria. The response to *diamond* from patients has been positive and GPs and patients alike have really valued their chance to have a say. By November 2005, 18 000 Victorians will have received a *diamond* survey.



It's been a mailing frenzy - 7800 Victorians have received a *diamond* study screening survey so far...that's a lot of mail!!



Media Corner

News

Patients praise GP skill in depression management

BY JANE McCREIDIE

GPs are the mainstay of depression treatment in Australia, with patients rating the care they provide very highly, a pilot study has found.

Most patients with probable depression were treated by their GP rather than a mental health specialist, according to the study conducted by researchers at the University of Melbourne (see box).

Chief investigator Associate Professor Jane Gunn, from the university's department of general practice, said a large follow-up study of 18,000 patients from 30 randomly selected practices would be one of the world's first longitudinal studies of the management of depression in primary care.

The DIAMOND (Diagnosis, Manage-

What patients said about their GP

“ Initial visit to GP was like a shot in dark. [I] didn't think he could help at all. [I] don't think it's publicised enough that GPs can help with depression. ”

“ Often he just listens, often he'll validate the feelings that I'm not going mad — [that] it's valid to feel that way, which means a lot. ”

“ The first time I went I felt relief ... that someone listened and took action ... he listened and prompted me to speak about how and why I thought I was feeling like that. ”

good evidence on the best ways of treating this condition.

accessing support services and time constraints. Professor Gunn said.