

Results of 2018's mental health screening among 156 adults at two cystic fibrosis centres in Sweden

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Objectives: Anxiety and depression is common among persons with CF and guidelines suggest annual screening for mental health problems (Quittner et al., 2016). However the present knowledge is multifaceted regarding differences in vulnerability regarding to age, gender and cultural differences. The objective of this study was to assess levels of anxiety and depression among adults from 18 years.

Methods: Adult patients (n = 250 < 18) attending two CF centres in Sweden (Stockholm, Gothenburg) during 2018, representing 59 % of the adult Swedish CF-population, were asked to complete the GAD-7 and PHQ-9 forms at the time of their annual review. The screening results were recorded in the national CF-register. The forms were reviewed within a week and a clinical action plan was made for patients with high scores.

Results: In total 156 individuals (62 %) were screened for anxiety and depression (53 % males, 10 % lung transplanted). Median age was 32 years (min 18; max 76). The median for GAD-7 was 2 (min 0; max 18) and for PHQ-9 it was 3 (min 0; max 18) There were 9 patients (5 %) scoring > 10 for GAD-7 and 17 (10 %) >10 for PHQ-9 indicating moderate or severe symptoms of anxiety and/or depression. Six patients had elevated scores for both. No significant differences were found when comparing gender and/or age (18–29, 30-) regarding levels of anxiety (p = 0.22, p = 0.36) and depression (p = 0.81, p = 0.94) in contrast with results from a previous study which found an elevated risk for anxiety among young adults (<30) (Jarvholm et al., 2020).

Conclusion: Although the results are reassuring, these differ from norm population since the common gender and age differences were not found. The strain of living with CF maybe merges these differences. The nonparticipating proportion was fairly large although the screening was structured and was considered to be important both among staff and patients. This indicates not noticed obstacles in implementing a wellfunctioning screening.