

Lay summary

Is collaborative care more effective in patients with depression and co-morbid physical disease? Meta-analysis and meta-regression

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When people become depressed it may affect their relationships, their work and their quality of life. Depression is sometimes treated by ‘collaborative care’, where a team of different health professionals work together and the patient follows a structured treatment plan. Various treatments can be used which may include anti-depressant drugs and/or ‘talking therapy’. Studies have shown that collaborative care helps patients with depression more than standard care. However, it sometimes works better than others, perhaps due to differences in the patients or differences in the treatments given, or possibly because the way studies are carried out varies. This review aimed to find out which types of collaborative care work best in adults with depression.

This research analysed the results of 70 randomised controlled trials which have already taken place. These trials involved more than 17,000 patients who were having treatment for depression, and compared the results of those who had collaborative care against those who only had ‘usual’ care. The success of the treatments was judged after 6 months by how well the patients reported they felt, how their depression was rated by a healthcare professional on a standard scale, or by how regularly patients took their anti-depressant drugs. The results of the 70 trials were combined and analysed statistically (this is called a meta-regression) to discover which treatments were most effective and for which patients.

The results showed that:

1. Collaborative care which included talking therapies was more effective than collaborative care which did not include it, whether or not the patients were taking anti-depressants as well
2. Patients who were identified for collaborative care by screening did better with collaborative care than patients referred by clinicians
3. Patients with a long-term physical condition being treated for depression were more likely to take their anti-depressants than those without a long-term condition

Collaborative care is an effective way to treat depression in adults, especially if patients are offered talking therapies as well as, or instead of, anti-depressant drugs. It works best in patients who have been identified with symptoms of depression using questionnaires. When receiving collaborative care, patients who have depression and also a long-term condition are more likely to take their prescribed anti-depressants than patients without a long-term condition. This suggests that collaborative care can improve the quality and outcome of care especially in patients not normally identified with depression and those with long-term conditions.