Preface

In recent years, there has been a heightened interest in the psychological well-being of people with diabetes. Current epidemiological evidence suggests that at least one third of people with diabetes suffer from clinically relevant depressive disorders. Furthermore, people with depressive disorders have an increased risk of developing diabetes. This has huge implications for clinical practice as well as for the individual’s experience of diabetes. Depression can lead to poor self-care, can affect glycemic control, and can compromise quality of life. Indeed the prognosis of both diabetes and depression – in terms of severity of the disease, complications, treatment resistance, and mortality – as well as the costs to both the individual and society is worse for either disease when they are comorbid than it is when they occur separately. However, in spite of the huge impact of comorbid depression and diabetes on the individual and its importance as a public health problem, questions still remain as to the most appropriate ways of identifying people suffering from depression. Certain screening instruments have been recommended which could be used to identify people who may have depression; however, there are many other tools available and still more tools which have been used in other countries or cultures, in a range of languages. This book aims to provide an up-to-date resource where many of these instruments are discussed, their appropriate use in people with diabetes addressed, and their utility in a range of settings both in the UK and throughout the world examined. This book also considers other psychological problems found to be common in people with diabetes, for example, anxiety, as well as diabetes-specific emotional difficulties such as fear of hypoglycemia. These emotional problems are common; however, to date there has been little practical guidance on how to identify people experiencing these difficulties.

This book is divided into two sections: Part I considers the difficult questions of why, when, and how we should screen for depression and other psychological problems in people with diabetes. The section starts with an introductory chapter by Norbert Hermanns, who considers the reasons why it is important to screen for depression while keeping in mind the limitations of screening as well as the utility. Chapter 2, by Jeffery Gonzalez, moves the discussion on to consider the importance of measuring other psychological problems and how we might distinguish between
depression and other forms of emotional distress related to diabetes. In Chapter 3, Richard Holt and Christina van der Feltz-Cornelis take us through the key concepts and principles related to screening for depression. The most common screening tools for measuring depression are then considered in Chapter 4 by Cathy Lloyd and Tapash Roy. Finally in this section, Chapter 5 considers some of the issues related to the cultural relevance of existing depression screening instruments and the implications for practice. Examples from research conducted in South Asians with diabetes living in the UK as well as in Bangladesh are used to contextualize the discussions.

Part II of this book consists of a further five chapters each with a different focus, either on a particular group of people, for example, young people or older people, or a different care setting. The section starts with Chapter 6, by Korey Hood, Diana Naranjo and Katharine Barnard, who show how important it is to ensure that the screening tools used to identify depressive symptoms in young people are appropriate for that age group. The authors also demonstrate the importance of family in identifying psychological problems in children and young people. Looking at the other end of the age spectrum, Chapter 7, by Elizabet Beverly and Katie Weinger, examines the importance of screening for depression in older people. The following two chapters take a different approach and consider screening for depression in primary and secondary care. In Chapter 8, Margaret Stone and Paramjit Gill discuss how screening for depression in people with diabetes attending their primary care provider can be done, in line with current national and international guidelines. Mirjana Pibernik-Okanović and Dea Ajduković, in Chapter 9, consider the importance of screening for depression in people attending secondary care facilities for their diabetes, where individuals may have the long-term complications of diabetes which may further exacerbate any mental health concerns. The final chapter, written by Frans Pouwer and Evan Atlantis, provides us with a timely reminder of how the concept of depression has evolved over time, and helps us to keep this in mind as we think about the way forward for both research and clinical practice.

Screening for depression and other psychological disorders is important and, as the authors of this book amply demonstrate, is even more vital where people have a comorbid condition such as diabetes. However we still know very little about the effects of screening, both at an individual and a population level. Further research is urgently required in order to clarify this and to ensure that people with co-morbid diabetes and psychological disorders are cared for in the most appropriate manner. We hope that this book helps the reader, be it health care practitioner, service user, or other providers of care, to make sense of the array of tools available for use when identifying those in need of psychological treatment and care. I would like to take this opportunity to extend my heartfelt thanks to all the contributors to this book as well as my fellow editors Norbert Hermanns and Frans Pouwer, for advice and support from Norman Sartorius, and for editorial support from Elektra McDermott and Teresa Dudley.

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