

# O15

## USING DIAGNOSTIC INTERVIEWS TO ESTIMATE ACCURATE PREVALENCE OF PTSD AND COMMON MENTAL DISORDERS IN HEALTHCARE WORKERS IN ENGLAND

*D. Lamb<sup>1</sup>, S. A. M. Stevelink<sup>2</sup>, R. Raine<sup>1</sup>, N. Greenberg<sup>2</sup>, M. Hotopf<sup>2</sup>, S. Wessely<sup>2</sup>*

<sup>1</sup>*UCL, London, UK*

<sup>2</sup>*KCL, London, UK*

### Background:

The mental health of healthcare workers (HCWs) is often measured via self-reported screening measures in online surveys. However, such screening measures are typically sensitive, with low positive predictive value, and overestimate prevalence. Diagnostic clinical interviews provide a more accurate prevalence of mental disorders where formal support may be helpful. Accurately estimating the level of need for clinical intervention in this population is vital to enable the functioning of the healthcare system.

### Aims:

To estimate accurate prevalence of mental disorders HCWs in England using diagnostic interviews.

### Methods:

From a large longitudinal cohort study of HCWs (n=23,462), 337 participants were screened with the General Health Questionnaire (GHQ-12) and PTSD Checklist (PCL-6), then interviewed using either the Clinical Interview Schedule – Revised (CIS-R) (n=243), or the Clinician Administered PTSD Scale (CAPS-5) for DSM-5 for PTSD (n=94).

### Results:

GHQ screening caseness for CMDs was 52.8% (95% CI 51.7-53.8). Using CIS-R diagnostic interviews, the estimated population prevalence of generalised anxiety disorder was 14.3% (10.4-19.2), depression 13.7% (CI 10.1-18.3) and a combined generalised anxiety disorder and depression prevalence of 21.5% (16.9-26.8). PCL-6 screening caseness for PTSD was 25.4% (24.3-26.5). Using CAPS-5 diagnostic interviews, the estimated population prevalence of PTSD was 7.9% (4.0-15.1).

### Conclusions:

The prevalence estimates of CMDs and PTSD in HCWs are considerably lower when assessed through diagnostic interviews than when estimated using screening tools. Nevertheless, 1-in-5 HCWs met the threshold for these diagnosable mental disorders which might benefit from clinical intervention.

### References:

Chirico F, Ferrari G, Nucera G, Szarpak L, Crescenzo P, Ilesanmi O. Prevalence of anxiety, depression, burnout syndrome, and mental health disorders among healthcare workers during the COVID-19 pandemic: a rapid umbrella review of systematic reviews. *Journal of Health and Social Sciences*. 2021;6(2):209–20.

Dunn G, Pickles A, Tansella M, Vázquez-Barquero JL. Two-phase epidemiological surveys in psychiatric research. *British Journal of Psychiatry*. 1999 Feb 2;174(2):95–100.

Levis B, Benedetti A, Ioannidis JPA, Sun Y, Negeri Z, He C, et al. Patient Health Questionnaire-9 scores do not accurately estimate depression prevalence: individual participant data meta-analysis. *Journal of Clinical Epidemiology*. 2020 Jun;122:115-128.e1.