

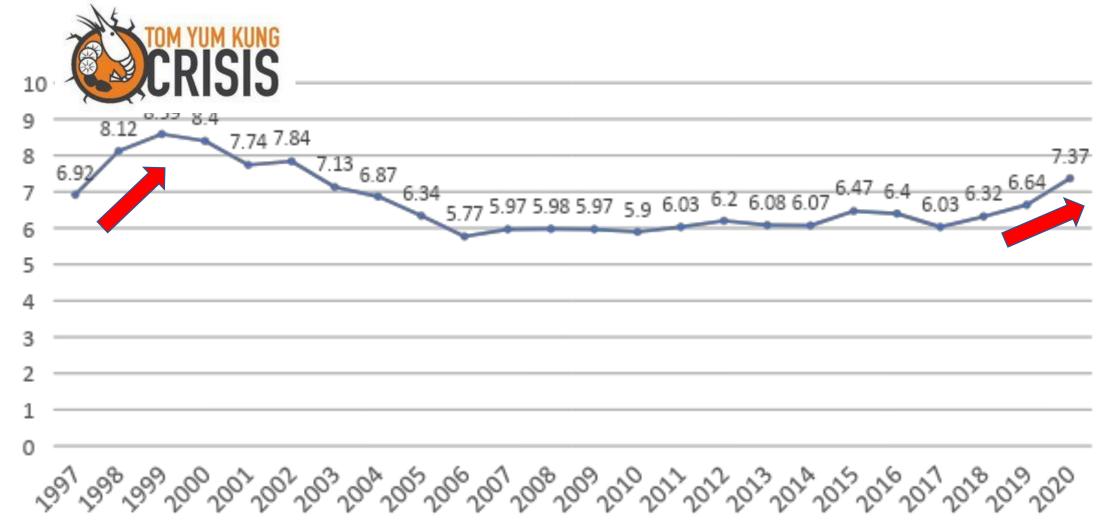


#### The 22<sup>nd</sup> Annual International Mental Health Conference 2023

# Development of the depression and suicidal ideation screening test. Nopporn Tantirangsee

Southern Institute of Child and Adolescent Psychiatry
Department of Mental Health
Ministry of Public Health of Thailand

#### Suicide rate per 100000 populations in Thailand from 1997-2020

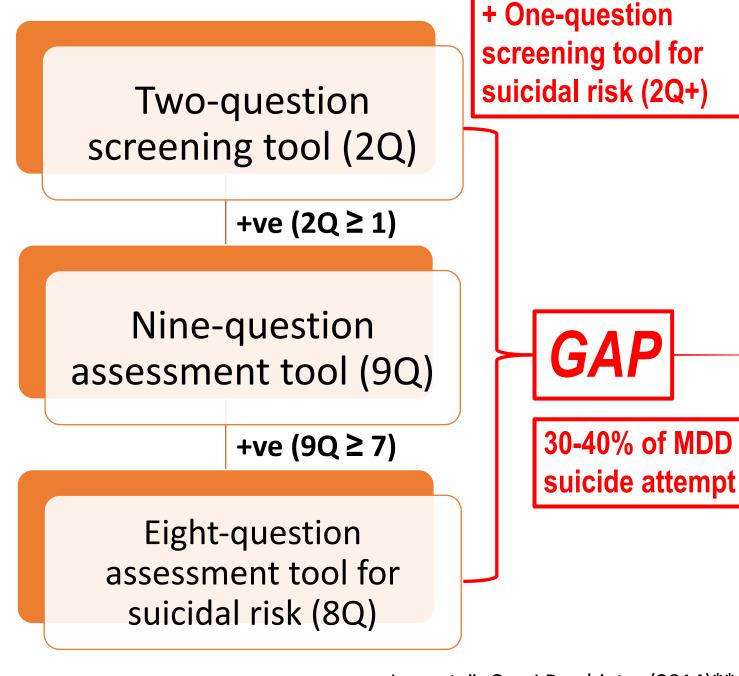


Department of Mental Health of Thailand (2022)

#### The Surveillance

system for Depressive

disorders in Thailand\*



# Objective

To test the psychometric properties of the depression and suicidal ideation screening test (2Q plus).

# 2Q plus

During the past two weeks until today, do you feel*					
1.	worried, down, depressed, or distressful?	No	Yes		
		0	1		
2.	boring, loss of interest, or unhappy to doing	No	Yes		
	things?	0	1		
Du	ring the past month until todayDo you feel	No	Yes		
Suffering to the point of not wanting to live?		0	1		

<sup>\*</sup>Thoranin Kongsuk et al., J Psychiatr Assoc Thailand 2018; 63(4): 321-334

#### M.I.N.I.

## Mini International Neuropsychiatric Interview

Thai version 5.0.0-Revised 2007

Gold standard: MDE and Suicidality Modules

THAI: พันธุ์นภา กิตติรัตนไพบูลย์ (P. Kittirattanapaiboon), สุวรรณา อรุณพงค์ไพศาล<sup>2</sup> (S. Arunpongpaisal), สุวัฒน์ มหัตนิรันดร์กุล<sup>3</sup> (S. Mahatnirunkul), ธรณินทร์ กองสุข<sup>4</sup> (T. Kongsuk), กอบโชค จูวงษ์ <sup>5</sup> (K. Choovong), หทัยชนนี บุญเจริญ<sup>3</sup> (H. Booncharoen), ปทานนท์ ขวัญสนิท<sup>5</sup> (P. Kwansanit), อัจฉรา จรัสสิงห์ (A. Charatsingha)

Study settings: Thirteen

psychiatric hospitals

Study subjects: Psychiatric

patients who visited the

outpatient department

between 28 March 2022 and

18 April 2022

## INCLUSION CRITERIA

# EXCLUSION CRITERIA

- 18 years and above
- Can communicate in Thai

Individuals with aggressive behavior

# Sample size

#### Sensitivity

$$rac{Z_{1-lpha/2}^2 \hspace{0.2cm} imes \hspace{0.2cm} S_N \hspace{0.2cm} imes \hspace{0.2cm} (1-S_N)}{L^2 \hspace{0.2cm} imes \hspace{0.2cm} ext{Prevalence}}$$

## Specificity

$$rac{Z_{1-lpha/2}^2 \hspace{0.1cm} imes \hspace{0.1cm} S_P \hspace{0.1cm} imes \hspace{0.1cm} (1-S_P)}{L^2 \hspace{0.1cm} imes \hspace{0.1cm} (1-\operatorname{Prevalence})}$$
 โดย

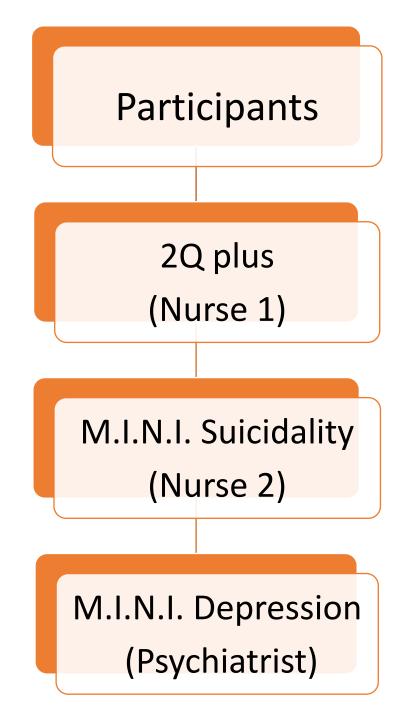
$$S_N = anticipated sensitivity = 97.6*$$

$$S_p$$
 = anticipated specificity = 59.2\*

Nonresponse rate = 40%

Total sample size = 280

\*https://www.hiv.uw.edu/page/mental-health-screening/phq-2



		MINI (Depression)		
		Positive	Negative	
30	Positive	TP	FP	
2Q	Negative	FN	TN	

		MINI (Suicidality)		
		Positive	Negative	
Oplus	Positive	TP	FP	
Q plus	Negative	FN	TN	

TP = True positive Sensitivity = TP/(TP+FN)

FP = False positive Specificity = TN/(TN+FP)

FN = False negative

TN = True negative

# Statistical analysis

Sensitivity

Specificity

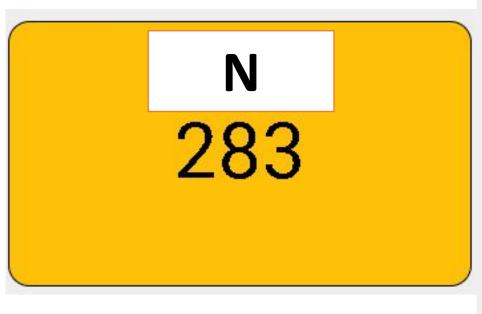
Accuracy

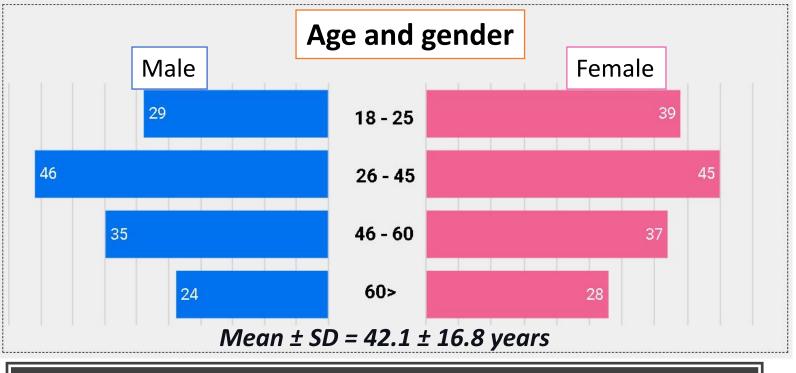
Positive predictive value (PPV)

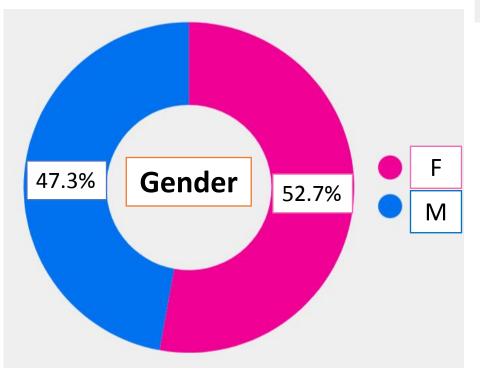
Negative predictive value (NPV)

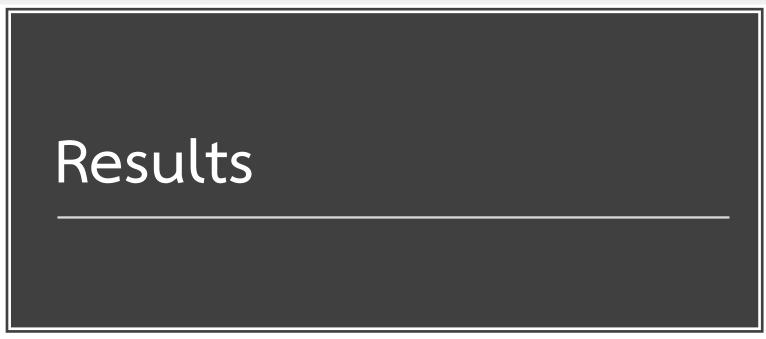
Positive likelihood ratio (LR+)

Negative likelihood ratio (LR-)









# Psychometric properties

2Q	Sensitivity	Specificity	Accuracy	PPV	NPV	LR+	LR-
1	93.4%	50.2%	61.8%	40.8%	95.4%	1.88	0.13
2	89.5%	72%	79.8%	57%	94.3%	3.20	0.15
Q Plus	Sensitivity	Specificity	Accuracy	PPV	NPV	LR+	LR-
1	83.7%	94.7%	91.1%	88.5%	92.3%	15.79	0.17

# Implementation - Online active screening



https://checkin.dmh.go.th

Resilience

Stress

Depression

Suicidal idea

2Q+

Burnout

### Present

4,260,000 screened

# 504,323 screened positive for depression

- Depression only 375,449 (74.4%)
- Depression with suicidal risk 128,874 (25.6%)

137,795 screened positive for suicidal risk

- Suicidal risk only 8,921 (6.5%)
- Suicidal risk with depression 128,874 (93.5%)

# Conclusion

- The 2Q plus screening test was practical and easy to administer to screen the risk for depression and suicidality. It suits community health workers to screen people in the community for further treatments.
- Patients who screen positive should be further
   evaluated with the 9Q and 8Q questionnaires to detect
   the clinical severity.