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Characterizing Depression and Comorbid Medical Conditions in African American Women in a Primary Care Setting

Ruth S. Shim MD, MPH ... Lonnie E. Fuller Sr. MD

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Background

African American women are more likely to seek treatment for depression in primary care settings; however, few women receive guideline-concordant depression treatment in these settings. This investigation focused on the impact of depression on overall functioning in African American women in a primary care setting.

Methods

Data was collected from a sample of 507 African American women in the waiting room of an urban primary care setting. The majority of women were well-educated, insured, and employed. The CESD-R was used to screen for depression, and participants completed the 36-Item Short-Form Survey to determine functional status.

Results

Among the participants with depression, there was greater functional impairment for role-physical ($z = -0.88$, 95% CI = -1.13 , -0.64) when compared to individuals with diabetes and hypertension. Individuals with depression also had greater role-emotional impairment ($z = -1.12$, 95% CI = -1.37 , -0.87) than individuals with diabetes and hypertension. African American women with comorbid hypertension and depression had greater functional impairment in role-physical when compared to African American women with hypertension and no depression ($t(124) = -4.22$, $p < 0.01$).

Conclusion

African American women with depression are more likely to present with greater functional impairment in role function when compared to African American women with diabetes or hypertension. Because African American women often present to primary care settings for treatment of mental illness, primary care providers need to have a clear understanding of the population, as well as the most effective and appropriate interventions.

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