GENDER ANALYSIS OF CLINICAL PRACTICE
GUIDELINES FOR DEPRESSION FROM FOUR
EUROPEAN COUNTRIES:

AUSTRIA, FINLAND, SWEDEN
AND THE UNITED KINGDOM


Susanne Weinbrenner,
German Agency for Quality in Medicine

Sanna Lönnfors,
Charité - Universitätsmedizin Berlin

Birgit Babitsch,
Berlin School of Public Health, Charité
INTRODUCTION

- Depression is one of the most common psychiatric disorders and leading causes of disability worldwide

- Women suffer more than men from depression; men commit more suicides than women

- Depressed women and men have different symptoms and coping strategies
STUDY GOALS

- To search and review literature on gender differences in depression
- to evaluate and compare how clinical practice guidelines for depression from four European countries have taken gender differences into consideration
- to develop a systematic approach to taking topics with relevant gender differences into account
**METHODOLOGY | Literature search**

<table>
<thead>
<tr>
<th>MEDICAL SUBJECT HEADING (MeSH) SEARCH</th>
<th>HITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>(&quot;Depression&quot;[Mesh] OR &quot;Depressive Disorder&quot;[Mesh] OR &quot;Depression, Postpartum&quot;[Mesh] OR &quot;Depressive Disorder, Major&quot;[Mesh])</td>
<td>108924</td>
</tr>
<tr>
<td>(&quot;Depression&quot;[Mesh] OR &quot;Depressive Disorder&quot;[Mesh] OR &quot;Depression, Postpartum&quot;[Mesh] OR &quot;Depressive Disorder, Major&quot;[Mesh]) AND (&quot;Gender Identity&quot;[Mesh])</td>
<td>724</td>
</tr>
<tr>
<td>Limitation: All humans, English, Published in the last 10 years</td>
<td>178</td>
</tr>
<tr>
<td>Limitation: All adult: +19 years</td>
<td>111</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EMBASE SEARCH</th>
<th>HITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression (in title) AND gender (in title) NOT drug (in abstract)</td>
<td>275</td>
</tr>
<tr>
<td>Limitation: Human, English language, 1999-current, Adult 18-64 years, Aged 65+ years</td>
<td>122</td>
</tr>
</tbody>
</table>
### METHODOLOGY | Guideline Selection

<table>
<thead>
<tr>
<th>COUNTRY</th>
<th>TITLE</th>
<th>GUIDELINE ORGANIZATION</th>
<th>PUBLICATION YEAR (revision planned)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Austria</td>
<td>Depressive Erkrankungen</td>
<td>Initiative Arznei &amp; Vernunft</td>
<td>2006 (n/a)</td>
</tr>
<tr>
<td>Sweden</td>
<td>Nationella riktlinjer för depressionssjukdom och ångestsyndrom – Beslutsstöd för prioriteringar: Preliminär version</td>
<td>National Board of Health and Welfare</td>
<td>2009 (n/a)</td>
</tr>
</tbody>
</table>
METHODOLOGY | Gender aspects in studies

- Methodological assessment of the literature
- Gender-specific information from literature summarized, clustered, listed and used as a checklist
- Guidelines searched for the information on the checklist and rated ++, + or 0 accordingly
## RESULTS | Literature search

<table>
<thead>
<tr>
<th>CATEGORIES AND SUBCATEGORIES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I Epidemiology (11)</strong></td>
</tr>
<tr>
<td>Epidemiology</td>
</tr>
<tr>
<td>Explanations for gender gap</td>
</tr>
<tr>
<td><strong>II Symptoms (9)</strong></td>
</tr>
<tr>
<td><strong>III Suicide (5)</strong></td>
</tr>
<tr>
<td><strong>IV Diagnosis, treatment and prevention (9)</strong></td>
</tr>
<tr>
<td>Diagnosis</td>
</tr>
<tr>
<td>Treatment and prevention</td>
</tr>
<tr>
<td><strong>V Social factors (26)</strong></td>
</tr>
<tr>
<td>Gender roles</td>
</tr>
<tr>
<td>Working life</td>
</tr>
<tr>
<td>Family / social support</td>
</tr>
<tr>
<td><strong>VI Coping strategies (3)</strong></td>
</tr>
</tbody>
</table>
Patients recognized as depressed by their physicians (Bertakis et al., 2001).

* Cut off point was defined at a BDI Score ≥ 9; ** all BDI Scores
RESULTS | Example gender differences in literature

Coping strategies

Differences in coping strategies in women and men (Angst et al., 2002; ‡ Solomon et al., 2005). *p<0.05; **p<0.01; ***p<0.001.

S. Weinbrenner, GIN Conference, Chicago 28th August 2010
RESULTS | Gender Analysis of Guidelines

- **Epidemiology** → Finland and UK guidelines: depression more common in women

- **Symptoms** → No gender-specific symptoms mentioned in any of the guidelines

- **Suicides** → Austrian guideline: provides numbers, Finnish guideline: male sex as risk factor
RESULTS | Gender Analysis of Guidelines

- **Health care utilization** → UK guideline: women visit physicians more often

- **Social factors** → UK guideline: lots of aspects covered, almost all guidelines: post-partum depression

- **Coping** → UK guideline: women seek more professional help and rely more on social support
RESULTS | Gender Analysis of Guidelines

Guidelines coverage of gender specific issues in literature

Coverage of gender-related issues

Austria | Finland | Sweden | United Kingdom

- Epidemiology
- Symptoms
- Suicide
- Diagnosis, treatment and prevention
- Social factors
- Coping strategies
DISCUSSION | Methods

- Literature/guideline search and appraisal
  - Search strategy and exclusion criteria might have been too restrictive
  - Level of evidence of "gender studies" is often low
  - Appraisal of literature shows inconsistent results
  - Guidelines covering gender aspects may have been missed due to inclusion criteria
DISCUSSION | Findings

- Some data on gender differences is available, but not used: no guideline refers to publications used for this study.
- Lack of gender aspects in clinical practice guidelines for depression.
- No validated tools for assessing „gender-sensitivity“ of guidelines.
- Insufficient gender-specific information in clinical practice guidelines may lead to false diagnosis and therapy.

Andersson et al., 2008 | Plant et al., 2000 | Gilbert et al., 2006 | Khan et al., 2002 | Harris et al., 1999
DISCUSSION | Limitations

- Low level of evidence in gender studies
- Limited scope and time frame of study (Master thesis)
- Limited scope due to language skills
More research on depression and gender
Search and appraisal of gender specific studies
Including gender experts in guideline development
Developing an instrument or including gender aspects existing assessment instruments for guideline appraisal
CONFLICT OF INTERESTS

Thank you for your attention!

The authors declare no financial but academic conflicts of interest