COVID-19 and Adolescent Depression and Suicide Risk Screening Outcomes

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Mental health concerns increased during the COVID-19 pandemic, but prior studies have not examined depression screening in the pediatric primary care setting. We aimed to describe changes in screening, depressive symptoms, and suicide risk among adolescents during the COVID-19 pandemic. In a repeat cross-sectional analysis of electronic health record data from a large pediatric primary care network, we compared the percent of primary care visits where adolescents aged 12-21 were screened for depression, screened positive for depressive symptoms, or screened positive for suicide risk between June-December 2019 (pre-pandemic) and June-December 2020 (pandemic). Changes were examined overall, by month, and by gender, race/ethnicity, insurance type, and income. Poisson regression with robust variance estimates was used to calculate prevalence ratios for the pre-pandemic to pandemic changes, overall and by subgroup. Depression screening at primary care visits declined from 77.6% to 75.8% during the pandemic period (prevalence ratio (PR): 0.98, 95% CI: 0.90, 1.06). The percent of adolescents screening positive for depressive symptoms increased from 5.0% to 6.2% (PR: 1.24, 95% CI: 1.15, 1.34)), with greater increases among female, non-Hispanic Black, and non-Hispanic White adolescents. Positive suicide risk screens increased from 6.1% to 7.1% (PR: 1.16, 95% CI: 1.08, 1.26), with a 34% relative increase in the odds of reporting recent suicidal thoughts among female adolescents (PR: 1.34, 95% CI: 1.18, 1.52). Results suggest that depression and suicide concerns have increased during the pandemic, especially among female adolescents. Results underscore the importance of consistent screening for depression and suicidality.

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