

Trends in Positive Depression and Suicide Risk Screens in Pediatric Primary Care during COVID-19

Date:

Dec 2022

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Adolescent mental health concerns increased during COVID-19, but it is unknown whether early increases in depression and suicide risk have been sustained. We examined changes in positive screens for depression and suicide risk in a large pediatric primary care network through May 2022. Using an observational repeated cross-sectional design, we examined changes in depression and suicide risk during the pandemic using electronic health record data from adolescents. Segmented logistic regression was used to estimate risk differences (RD) for positive depression and suicide risk screens during the early pandemic (June 2020-May 2021) and late pandemic (June 2021-May 2022) relative to before the pandemic (March 2018-February 2020). Models adjusted for seasonality and standard errors accounted for clustering by practice. Among 222,668 visits for 115,627 adolescents (mean age 15.7, 50% female), the risk of positive depression and suicide risk screens increased during the early pandemic period relative to the pre-pandemic period (RD: 3.8%; 95% CI: 2.9, 4.8; RD: 2.8%, 95% CI: 1.7, 3.8). Risk of depression returned to baseline during the late pandemic period, while suicide risk remained slightly elevated (RD: 0.7% 95% CI: -0.4, 1.7; RD: 1.8% 95% CI: 0.9%, 2.7%). During the early months of the pandemic, there was an increase in positive depression and suicide risk screens, which later returned to pre-pandemic levels for depression but not suicide risk. Results suggest that pediatricians should continue to prioritize screening adolescents for depressive symptoms and suicide risk and connect them to treatment.

Journal:

[Academic Pediatrics](#)

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