

10th Conference on Health Care of the Chinese in North America

Depression Among Chinese-Speaking Patients in Primary Care



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Depression among the Chinese is often untreated, probably because of their cultural concept that unhappiness is secondary to external circumstances such as financial hardship, political injustice, family conflict or lack of friends, rather than a mood disorder that impairs the individual's response to stress. Primary care physicians need to be alerted by the somatoform complaints of these patients, in order to provide appropriate care for the body and the mind. As the major teaching hospital in Boston's Chinatown, the Tufts-New England Medical Center started a pilot study to screen for depression in the primary care setting. In Phase I, two Chinese questionnaires translated from the MHI-5 (Mental Health Inventory with 5 questions) and the SCREENER (with 44 questions) are completed by each subject. In Phase II, positive cases from Phase I are interviewed using a Chinese version of the SCID-IV (Structured Clinical Interview Diagnostic and Statistical Manual-IV) as the gold standard, to compare the validity of the MHI-5 and the SCREENER as screening instruments.

During a four-week period in November-December 1999, 359 (58% female) Chinese-speaking patients aged 18-65 attending 4 different primary care practices were recruited and 318 completed the study. Positive scores were found in 11 (3.5%) patients for both instruments, in 8 (2.5%) for MHI-5 only, and in 12 (3.8%) for the SCREENER only. The overall prevalence of positive cases was 31/318 or 9.8%. The interviews of these cases and a sample of negative cases are in progress, and the results will be discussed.

In 1981-1983, a nutritional and health survey of 338 elderly (aged 60+, 67% female) Chinese conducted at a primary care health center in the same area showed the prevalence of self-reported depression was 8%, and the usage of psychotropic medication within the past year was 3%.

It appears that the prevalence of depression in adult Chinese-Americans is comparable to that of Caucasians.