

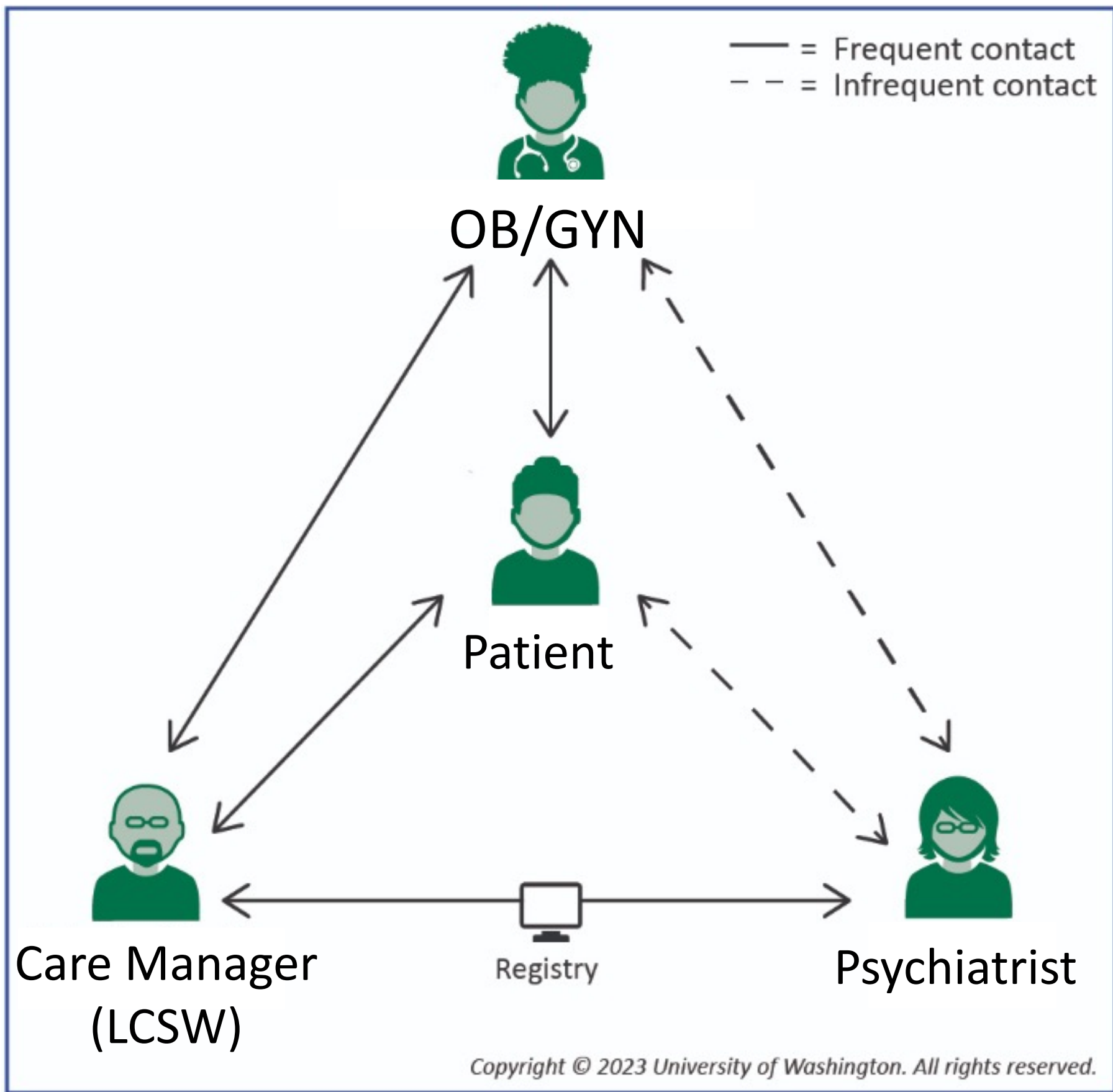
Participation in a collaborative care model is associated with increased odds of achieving remission and response from perinatal depression and/or anxiety however efficacy may vary by race/ethnicity and insurance type.

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Analysis of a Collaborative Care Model for Perinatal Mental Health Care

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Methods:



Collaborative Care Obstetric Resource Program (**CORP**): Collaborative care model incorporating OB/GYN and Psychiatry to address mental health of obstetric patients

Results:

	Remission			Response		
	OR	95% CI	p-value	OR	95% CI	p-value
Number of visits through CORP	1.09	1.03-1.15	0.0015	1.16	1.09-1.23	<0.001
Race/Ethnicity						
White		reference			reference	
Asian	0.71	0.42-1.21	0.21	0.98	1.09-1.22	0.93
Black or African American	0.54	0.18-1.50	0.25	0.50	0.16-1.42	0.21
Latinx	0.55	0.30-0.97	0.04	0.61	0.34-1.10	0.11
Multi-Race/Ethnicity	0.74	0.23-2.22	0.59	0.52	0.15-1.60	0.27
Native Hawaiian or Other Pacific Islander	<0.001	NA->1000	0.98	<0.001	NA->1000	0.98
Southwest Asian and North African	0.24	0.01-1.56	0.19	0.59	0.08-3.22	0.55
Other	0.25	0.06-0.82	0.03	0.29	0.08-0.93	0.04
Unknown/Declined	1.52	0.28-1.14	0.64	3.24	0.49-6.38	0.29
Insurance type						
Private		reference			reference	
Public	0.37	0.17-0.74	0.0075	0.54	0.27-1.04	<0.001

Table 1. CORP treatment and sociodemographic characteristics associations with remission and response (N=377)

- Objectives: Evaluate the impact of the CORP program on depression and anxiety outcomes in obstetric patients
- Population: All patients referred to the CORP program from November 2019 to May 2023
- Data source: PHQ-9 and GAD-7 scores on referral to CORP and discharge from the program, UCSF EHR
- Data analysis: Logistic regression analyses performed in R Studio
 - Independent variable: number of visits with CORP
 - Dependent variable: remission (defined as PHQ-9 or GAD-7 score <5 on discharge) and response (defined as a change in PHQ-9 or GAD-7 score of ≥50% on discharge in comparison to scores at referral)
 - Confounding variables: include race/ethnicity, public vs. private insurance

Discussion:

- Treatment through CORP has a statistically significant impact on achieving remission or response
- Latinx patients have decreased odds of reaching remission but no statistically significant difference in response
- Patients with public insurance have decreased odds of achieving remission and response
- Higher rates and increased odds of response in comparison to remission could be the result of the PHQ-9 and GAD-7 questionnaires incorporating symptoms such as levels of sleep and energy which make it difficult to achieve a score of <5 in the peripartum population.