

Pain and depression: A concerning combination



25.3 million
adults suffer daily
with pain.¹

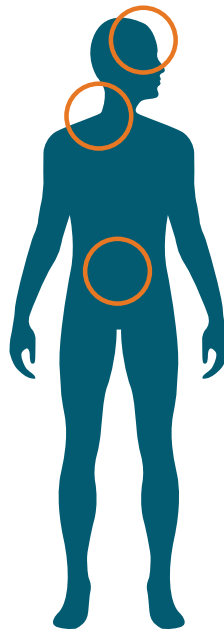
17.3 million
adults in the
US had at least one
major depressive
episode.²

The ratio of reported
depression is
4x greater
in those with
persistent pain³

75% of patients with depression report pain-related symptoms.³

These pain-related symptoms include:

- Headache
- Stomach pain
- Neck and back pain
- Unspecified pain
- Fatigue
- Sleep disturbance
- Appetite disruption



Patients with backaches
and headaches had the
highest odds of having
major depression.³



Patients with depression and chronic pain are more likely to commit suicide than patients with depression or pain alone or those that have pain without depression.³



Unrecognized depression in patients with chronic pain is common.⁴

While these facts can be surprising, understanding what's going on with your client is the first step.

Making the connection

If you're working with clients suffering from either pain or depression, it's important to screen for both. Understanding the interaction between depression and pain, the type of depressive symptoms and/or cognitions a pain-affected person experiences, their quality of life, and how these all interact are crucial factors in successful treatment planning. These brief and effective screeners will help you identify and quantify presenting problems and easily track progress throughout treatment.



Pain Patient Profile

By C. David Tollson and Jerry C. Langley

Identifies depression, anxiety, and somatization, factors most frequently associated with chronic pain.



BECK Depression Inventory®

Provides detailed information regarding somatic and cognitive factors contributing to depression, and can be used to provide the primary diagnosis of depression.



BECK Hopelessness Scale®

Measures the degree of pessimism and hopelessness a patient experiences as a component of their depression. It is also a reliable predictor of potential for self-harm from despair, a common symptom of severe and intractable pain.

Need to dig a little deeper?

When you need to better understand a broad array of factors impacting a patient's level of functioning, consider these comprehensive assessments.



Battery for Health Improvement 2

Identifies biopsychosocial aspects that impact pain, pain-related conditions, and treatment progress.



MBMD®

MILLION® BEHAVIORAL
MEDICINE DIAGNOSTIC
by Theodore Miller, PhD, DSc, Michael Kater, PhD,
Carmel White, PhD, Sarah Meyer, PhD, and Seth Grossman, PhD

Helps identify biopsychosocial factors, including coping strategies, that impact an individual's readiness for and response to chronic pain treatment.



Minnesota Multiphasic
Personality Inventory-2
Restructured Form®

Assesses psychological and behavioural dysfunctions that affect pain management and treatment.

References

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- ² National Institutes of Health (2019, February). Retrieved from: <https://www.nimh.nih.gov/health/statistics/major-depression.shtml>
- ³ Kleiber, B., Jain, S., and Trivedi, M.H. (2005). Depression and Pain Implications for Symptomatic Presentation and Pharmacological Treatments. *Psychiatry* 2(5) 12-18. Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3000181/>
- ⁴ Lee, H., Choi, E.J., Nahm, F.S., Yoon, I.N., Lee, P.B (2018). Prevalence of unrecognized depression in patients with chronic pain without a history of psychiatric diseases. *Korean J Pain* 31(2) 116-124. Retrieved from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5904346/>

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