[1]瞿伟,谭永红,谷珊珊,等.全病程管理模式对抑郁症患者依从性及疗效的影响[J].第三军医大学学报,2014,36(11):1118-1120.

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全病程管理模式对抑郁症患者依从性及疗效的影响

Title: Whole course management improves efficacy and compliance for depressed patients: a prospective parallel controlled study

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关键词：   抑郁症; 依从性; 疗效; 全病程管理

Keywords: depression; compliance; efficacy; whole course management

分类号：   R197.323; R395.2; R749.4

文献标志码：   A

摘要：   目的   探讨全病程管理模式对抑郁症患者依从性及疗效的影响。   方法   采用前瞻性平行对照研究，将2011年1月至2013年3月在西南医院临床心理科门诊就诊的符合DSM-Ⅳ抑郁发作诊断标准100例首发抑郁症患者按随机数字表法分配50例患者接受全病程管理服务（全病程管理组），50例进行门诊常规治疗（对照组），所有患者跟踪随访6个月，对两组患者治疗前基线及治疗后1、3、6个月进行依从性及17项汉密尔顿抑郁量表（HAMD）的评定。   结果   治疗后第1个月两组患者依从性无显著差异（$P>0.05$），在治疗后第3、6个月全病程管理组依从性均显著高于对照组($P<0.05$, $P<0.01$)；对照组患者治疗后第1、3个月HAMD评分明显低于治疗前，但治疗后第6个月HAMD评分与治疗前比较差异不显著（$P>0.05$）；而全病程管理组HAMD评分在治疗后1、3、6个月均显著低于治疗前（$P<0.05$），且评分随治疗时间延续呈递减趋势；全病程管理组与对照组在治疗后第1个月HAMD评分比较无显著差异（$P>0.05$），而在治疗后3、6个月全病程管理组HAMD评分均显著低于对照组（$P<0.05$）。   结论   全病程管理模式能提高抑郁症患者的依从性及疗效。

Abstract: Objective   To investigate the efficacy and compliance of whole course management for depressed patients.   Methods   A total of 100 patients who met with the DSM-Ⅳ diagnostic criteria of depressive episodes and freshly

diagnosed depression in our clinic from January 2011 to March 2013 were enrolled in this prospective parallel controlled study. The cohort of patients was random divided into 2 groups, with no significant difference in age, sex, educational levels and scores of psychological scales. One group received a full course of management services, and another group received conventional treatment. All the patients were followed up for 6 months. Patient compliance was assessed by Morisky's compliance scale and the efficiency was evaluated by 17-item Hamilton depression scale (HAMD) before and in 1, 3 and 6 month after treatment.　　Results　　There was no significant difference between 2 groups in compliance scale score in the first month after treatment ($P>0.05$), but the score was significantly higher in the whole course management group than the control group in 3 and 6 months after treatment ($P<0.05$, $P<0.01$). The HAMD scale score in the control group was significant lower in 1 and 3 months after than before treatment ($P<0.05$), but no such difference was seen in 6 month after treatment ($P>0.05$). However, the score of the whole course management group was significantly reduced in 1, 3 and 6 month after treatment than before treatment ($P<0.05$), and the values were in a time-dependent manner. No significant difference was seen in the score in 1 month after treatment ($P>0.05$), the whole course management group had significantly lower scores than the control group in 3 and 6 months after treatment ($P<0.05$).　　Conclusion　　Whole course management improves the compliance and efficacy in depressed patients.

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