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Bethany L. DiPrete, Brian W. Pence, David J. Grelotti, Bradley N. Gaynes



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## Measurement of Depression Treatment among Patients Receiving HIV Primary Care: Whither the Truth?

Bethany L. DiPrete<sup>1\*</sup>, Brian W. Pence<sup>1</sup>, David J. Grelotti<sup>2</sup>, Bradley N. Gaynes<sup>3</sup>

<sup>1</sup> Department of Epidemiology, University of North Carolina at Chapel Hill, Chapel Hill, North Carolina, United States of America

<sup>2</sup> Department of Psychiatry, University of California, San Diego, United States of America

<sup>3</sup> Department of Psychiatry, School of Medicine, University of North Carolina at Chapel Hill, Chapel Hill, North Carolina, United States of America

### \*Corresponding Author:

Bethany L. DiPrete

Department of Epidemiology, Gillings School of Global Public Health, 2102 McGavran-Greenberg Hall, Chapel Hill, NC 27599. Phone: +1 (919) 966-7446; Fax: +1 (919) 966-6714. diprete@email.unc.edu

### Abstract

#### *Background:*

Prescription records, manual chart review, and patient self-report are each imperfect measures of depression treatment in HIV-infected adults.

#### *Methods:*

We compared antidepressant prescription records in an electronic data warehouse with antidepressant treatment and psychotherapy identified via manual chart review and self-report for patients at 6 academic HIV treatment centers. We examined concordance among these three sources, and used latent class analysis (LCA) to estimate sensitivity and specificity of each measure.

#### *Results:*

In our charts sample (n=586), 59% had chart indication of “any depression treatment” and 46% had a warehouse prescription record. Antidepressant use was concordant between charts and data warehouse for 77% of the sample. In our self-report sample (n=677), 52% reported any depression treatment and 43% had a warehouse prescription record. Self-report of antidepressant treatment was consistent with prescription records for 71% of the sample. LCA estimates of sensitivity and specificity for “any depression treatment” were 67% and 90% (warehouse), 87% and 75% (self-report), and 96% and 77% (chart).

#### *Limitations:*

There is no gold standard to measure depression treatment. Antidepressants may be prescribed to patients for conditions other than depression. The results may not be generalizable to patient populations in non-academic HIV clinics. Regarding LCA, dependence of errors may have led to overestimation of sensitivity and specificity.

#### *Conclusions:*

Prescription records were largely concordant with self-report and chart review, but there were discrepancies. Studies of depression in HIV-infected patients would benefit from using multiple measures of depression treatment or correcting for exposure misclassification.

Keywords: Depression; HIV; Antidepressive agents; Self Report; Electronic Health Records; Misclassification

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