

OASIS Alert

News You Can Use: HERE'S ONE WAY TO PREDICT MORTALITY RISK AFTER ACS

Depression screening can save lives.

Patients who are hospitalized for acute coronary syndrome (ACS) and who have major depression are twice as likely to die during the next seven years if their depression doesn't significantly improve, according to a study published in the Archives of General Psychiatry.

The 369 patients in the study were treated with either a placebo or a selective serotonin reuptake inhibitor (SSRI) for the first six months after the heart attack. Investigators took a baseline measurement of depression two weeks after the heart attack and again at six months. About 15 percent of the patients were at least "much improved" by the end of the six months, and about 28 percent had "little or no improvement" in their depression. Five years later, researchers collected mortality data and continued until seven years after the initial heart attack.

Bottom line: Even after controlling for differences in heart disease, those whose depression got better within the first six months had about half the death rate in the next seven years as those whose did not. This held true whether they took the SSRI or the placebo, the study's authors report. And patients who were more severely depressed at baseline had double the risk of dying, the study found.

To do: As you begin screening for depression under OASIS C, focus on follow-up for those patients who show signs of depression.

- **Home care professionals have another tool at their disposal** to help stroke survivors cope with post-stroke depression. The nurse-led behavioral intervention program called "Living Well with Stroke" (LWWS) provides individualized counseling sessions using social interactions and physical activity as a way to elevate mood.

Researchers conducted a clinical trial involving more than 100 stroke survivors who exhibited symptoms of post-stroke depression and compared LWWS against usual post-stroke care. The study included participants from 25 to 88 years old, with more than 70 percent having experienced at least one episode of depression prior to their stroke, while 60 percent were taking an antidepressant medication at entry into the study.

Depression scores in the LWWS group were significantly lower after treatment and at one-year follow-up. At two years, depression scores continued to decrease and remission rates continued to increase, according to the study, funded by the **National Institute of Nursing Research**.

- **Brush up on your ICD-9-CM coding** with a free online course from intermediary **Cahaba GBA** at www.cahabagba.com/rhhi/education; select "Online Courses". New codes take effect Oct. 1 for episodes

with date of service on or after that date, Cahaba reminds providers. New and deleted codes are at www.cms.hhs.gov/Transmittals/downloads/R1770CP.pdf.