

# Decision Tool Unipolar Depression (DTUD) Version 1.0

## Objective

The Decision Tool Unipolar Depression (DTUD) was developed to aid clinicians in the early identification of the subgroup of patients with MDD in need of highly specialized care. The DTUD is a 10-item clinician-administered instrument designed for use in routine psychiatric clinical practice to identify patients with MDD in need of highly specialized care during the diagnostic phase after referral. The total score is calculated by summing the scores of the ten items and ranges from 0 to 10.

The instrument is a tool for the assessment of highly specialised care need. It is possible to reasonably deviate from the outcome of the list, taking the patient's individual circumstances, patients' preferences, the individual's level of motivation and the available treatment resources.

Completing the decision tool will take up to 5 minutes.

Your findings are both relevant for discussion in a multidisciplinary consultation and in a consultation with the patient

NB The Dutch translation of the DTUD was tested for its psychometric properties; the psychometric properties of other translations are to be tested in future studies.



This work was funded by the Dutch Network for Quality Development in mental health care.

# Decision Tool Unipolar Depression (DTUD) Version 1.0

Name of patient:

Patient medical record number:

|    |   |   |   |
|----|---|---|---|
| 1  | Does the patient have severe depression?<br>Indication: HDRS $\geq 25$ ; IDS-C/SR $\geq 39$ ; Q-IDS-C/SR $\geq 16$ ; MADRS $\geq 31$ ; BDI $\geq 30$ ;<br>CGI serious; DSM-IV 296.x3; PHQ $\geq 20$   | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |
| 2  | In the index episode, have there been any unsuccessful previous treatments in specialised mental health care <b>and</b> does the patient have a<br>- recurrent (more than 2 episodes in the past 5 years) <b>or</b><br>- chronic (>2 years) course of depression? | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |
| 3  | Does the patient have a comorbid personality disorder according to DSM-IV/5 criteria that interferes with the depression treatment?   | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |
| 4  | Does the patient have a comorbid substance dependence disorder that interferes with the depression treatment?   | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |
| 5  | Does the patient have other severe psychiatric comorbidity that interferes with the depression treatment?   | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |
| 6  | Does the patient have somatic comorbidity that interferes with the depression treatment?  | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |
| 7  | Does the patient have a disadaptive coping style that interferes with the depression treatment?<br>Hint: think of extreme avoidance or externalization  | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |
| 8  | Does the patient have a history of prolonged trauma/neglect in childhood?   | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |
| 9  | Are there any social factors contributing to the depression that are hard to influence?   | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |
| 10 | Does the patient exhibit severe psychosocial dysfunctioning?  | <input type="radio"/> yes<br><input type="radio"/> no | Findings and/or level<br><input type="text"/> |

Total amount of positive (=yes) scores  $\geq 5$ ?

- yes ---> indicated for highly specialized care on the basis of the DTUD\*  
 no ---> not indicated for highly specialized care on the basis of the DTUD\*

\* This is a mental health care indication for adults. No rights can be derived.