

Common mental health disorders in primary care overview

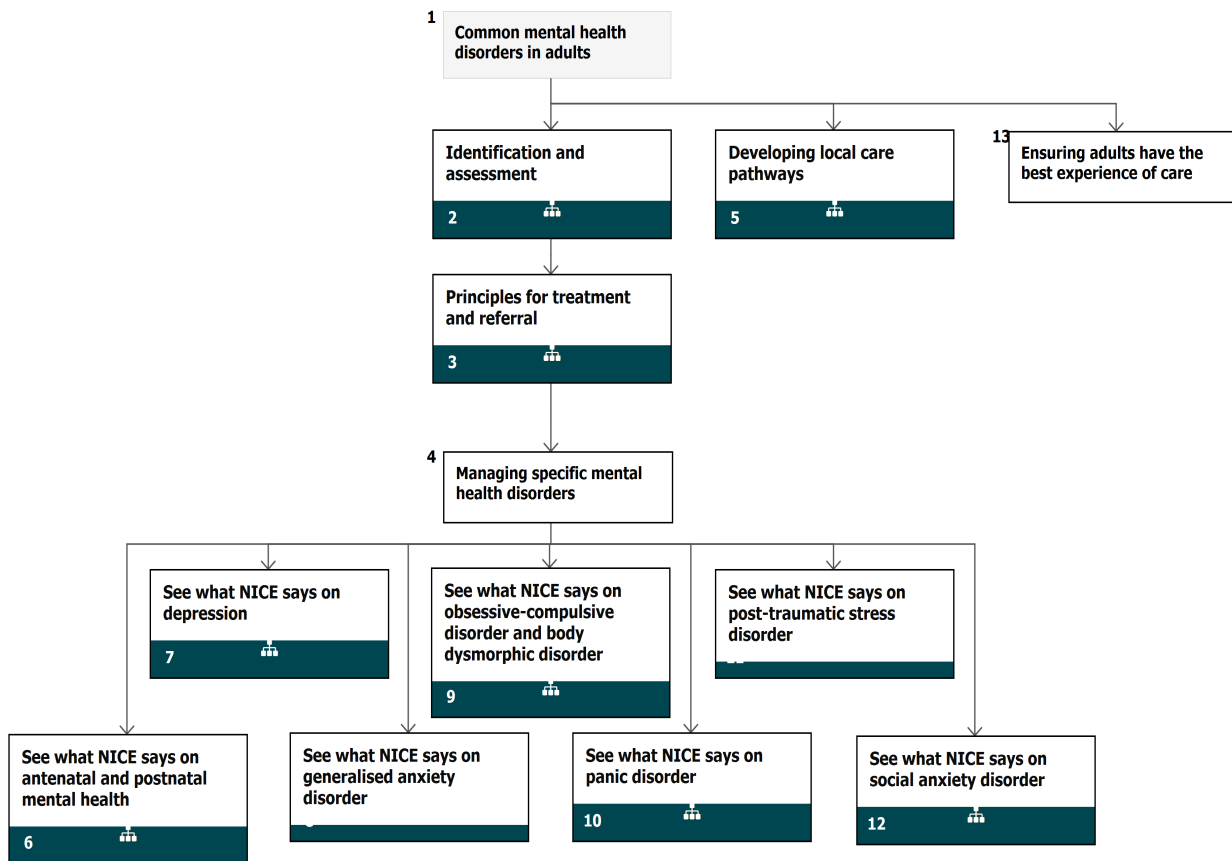
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/common-mental-health-disorders-in-primary-care>

NICE Pathway last updated: 04 December 2018

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



1 Common mental health disorders in adults

No additional information

2 Identification and assessment

[See Common mental health disorders in primary care / Identifying and assessing common mental health disorders](#)

3 Principles for treatment and referral

[See Common mental health disorders in primary care / Principles for treatment and referral in common mental health disorders](#)

4 Managing specific mental health disorders

A stepped-care model is used to organise the provision of services and to help people with common mental health disorders, their families, carers and healthcare professionals to choose the most effective interventions. For more information on the stepped care model, see [stepped care model: a combined summary for common mental health disorders](#) [See page 5].

5 Developing local care pathways

[See Common mental health disorders in primary care / Developing local care pathways for common mental health disorders](#)

6 See what NICE says on antenatal and postnatal mental health

[See Antenatal and postnatal mental health](#)

7 See what NICE says on depression

[See Depression](#)

8 See what NICE says on generalised anxiety disorder

[See Generalised anxiety disorder](#)

9 See what NICE says on obsessive-compulsive disorder and body dysmorphic disorder

[See Obsessive-compulsive disorder and body dysmorphic disorder](#)

10 See what NICE says on panic disorder

[See Panic disorder](#)

11 See what NICE says on post-traumatic stress disorder

[See Post-traumatic stress disorder](#)

12 See what NICE says on social anxiety disorder

[See Social anxiety disorder](#)

13 Experience of care

Use these recommendations with NICE's recommendations on:

- [patient experience in adult NHS services](#)
- [service user experience in adult mental health services](#).

Stepped-care model: a combined summary for common mental health disorders

Focus of the intervention	Nature of the intervention
<p>Step 3: Persistent subthreshold depressive symptoms or mild to moderate depression that has not responded to a low-intensity intervention; initial presentation of moderate or severe depression; GAD with marked functional impairment or that has not responded to a low-intensity intervention; moderate to severe panic disorder; OCD with moderate or severe functional impairment; PTSD.</p>	<p>Depression: CBT, IPT, behavioural activation, behavioural couples therapy, antidepressants, combined interventions, collaborative care (for people with depression and a chronic physical health problem), self-help groups, counselling, short-term psychodynamic psychotherapy (discuss with the person the uncertainty of the effectiveness of counselling and psychodynamic psychotherapy in treating depression).</p>
	<p>GAD: CBT, applied relaxation, drug treatment, combined interventions, self-help groups.</p>
	<p>Panic disorder: CBT, antidepressants, self-help groups.</p>
	<p>OCD: CBT (including ERP), antidepressants, combined interventions and case management, self-help groups.</p>
	<p>PTSD: Trauma-focused CBT, EMDR, drug treatment.</p>
	<p>All disorders: Support groups, befriending, rehabilitation programmes, educational and employment support services; referral for further assessment and interventions.</p>

<p>Step 2: Persistent subthreshold depressive symptoms or mild to moderate depression; GAD; mild to moderate panic disorder; mild to moderate OCD; PTSD (including people with mild to moderate PTSD).</p>	<p>Depression: Individual facilitated self-help, computerised CBT, structured physical activity, group-based peer support (self-help) programmes (for people with depression and a chronic physical health problem), non-directive counselling delivered at home (for women during pregnancy or the postnatal period), antidepressants, self-help groups.</p>
	<p>GAD and panic disorder: Individual non-facilitated and facilitated self-help, psychoeducational groups, self-help groups.</p>
	<p>OCD: Individual or group CBT (including ERP), self-help groups.</p>
	<p>PTSD: Trauma-focused CBT or EMDR.</p>
	<p>All disorders: Support groups, educational and employment support services; referral for further assessment and interventions.</p>
<p>Step 1: All disorders – known and suspected presentations of common mental health disorders.</p>	<p>All disorders: Identification, assessment, psychoeducation, active monitoring; referral for further assessment and interventions.</p>

CBT

cognitive behavioural therapy

EMDR

eye movement desensitisation and reprocessing

ERP

exposure and response prevention

GAD

generalised anxiety disorder

Distress Thermometer

a single-item question screen to identify distress by asking the person to mark on a scale of 0 to 10 how distressed they have been during the past week

GAD-2

2-item generalised anxiety disorder scale

HADS

hospital anxiety and depression scale

GAD-7

7-item generalised anxiety disorder scale

IAPT

improving access to psychological therapies

IPT

interpersonal therapy

Mild

when applied to common mental health disorders, mild generally refers to relatively few core symptoms (although sufficient to achieve a diagnosis), a limited duration and little impact on day-to-day functioning

OCD

obsessive compulsive disorder

PHQ-9

9-item patient health questionnaire

PTSD

post-traumatic stress disorder

Sources

Common mental health disorders: identification and pathways to care (2011) NICE guideline CG123

Your responsibility**Guidelines**

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

Technology appraisals

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

Medical technologies guidance, diagnostics guidance and interventional procedures guidance

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in

their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.