

Healthcare providers' perspectives on antidepressant discontinuation: a focus group study

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Background

- 1.2 million people use antidepressants in the Netherlands
- Long-term use: 1 out of 3 people
- Main indication: depression and anxiety
- Discontinuing antidepressant is quite challenging
- How do healthcare providers (HCPs) handle these challenges?



Objective

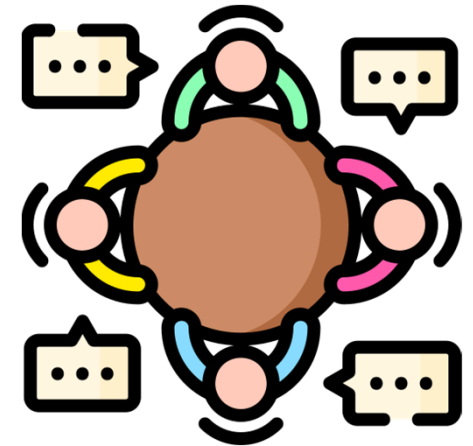
To gain insight into the perspectives, expectations, views and wishes of HCPs regarding the process of AD discontinuation in long-term users





Methods

- Explorative, qualitative study
- Focus group with general practitioners, pharmacists and psychiatrists
- Transcripts were analysed using open coding followed by Theoretical domains framework (TDF)





Six themes

1. Identification of patients	4. Context and resources
2. Behavior of HCPs	5. Knowledge and skills
3. Fears and emotions	6. Professional attitude



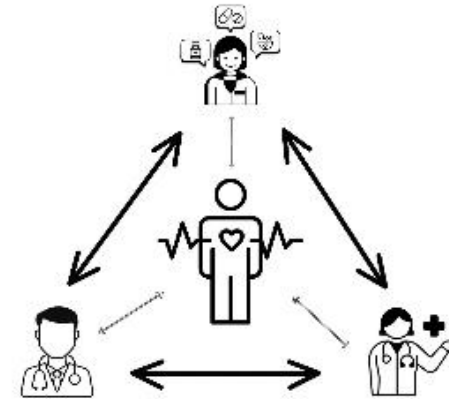
Results

Theme 3. Fears and emotions	Theme 4. Context and resources	Theme 6. professional attitude
Concern about recurrence of depression/anxiety	Lack of collaboration agreements between HCPs	HCPs are unaware about each other's capabilities and practices
<i>"...Never change a winning team'. So if someone is stable, we are not inclined to alter the medication very quickly, although we may think: 'Is that SSRI still useful?...' - P2</i>	<i>"...how we can do it better together." - GP 2</i>	<i>"I did not know it happened like that, but it seems extremely supportive." [referring to pharmacists providing AD discontinuation care] - P1</i>



Discussion & Conclusions

- ✓ AD discontinuation remains a patient-tailored approach
- ✓ Concern about the risk of AD overtreatment versus recurrence of disease
- ✓ HCPs are motivated to provide AD discontinuation care



Collaboration agreements

1. Patient identification
2. Patient invitation
3. Guiding the patient during an AD discontinuation process



Group discussion



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