

Depression and diabetes distress* often go unrecognized and unaddressed in patients with type 2 diabetes, resulting in poor health outcomes. Early identification and intervention for these mental health conditions can improve diabetes self-care. Health care providers can help close the gap by conducting regular mental health screenings and referring patients for additional care, if needed.

1 in 5 adults with type 2 diabetes has depression.



1 in 3 adults with type 2 diabetes experiences diabetes distress.



Both depression and diabetes distress can increase risk for serious health complications and early death.

ROUTINE MENTAL HEALTH SCREENING AND TREATMENT CAN IMPROVE DIABETES MANAGEMENT, DIABETES OUTCOMES, AND QUALITY OF LIFE

Depression and diabetes distress are common, but screening rates remain low. The American Diabetes Association and the U.S. Preventive Services Task Force strongly recommend routine screenings for depression and diabetes distress in adults with type 2 diabetes. The strategies below can help address and remove barriers to screening and treatment, and improve patient outcomes.

BARRIERS TO SCREENING AND TREATMENT	STRATEGIES TO OVERCOME BARRIERS
<ul style="list-style-type: none"> Patients lack knowledge about depression symptoms and diabetes distress. Health care providers lack mental health training. 	<p>INFORM</p> <p>→</p> <p>Patients:</p> <ul style="list-style-type: none"> Educate them about depression and diabetes distress. Provide information resources and let them know about available mental health services. <p>Health care providers:</p> <ul style="list-style-type: none"> Identify and participate in mental health trainings.
<ul style="list-style-type: none"> Health care practices lack access to mental health assessment tools. Health care practices don't have reminder systems in place for screening. Health care providers may believe that mental health issues are outside of their scope. 	<p>SCREEN</p> <p>→</p> <ul style="list-style-type: none"> Use publicly available screening tools such as Patient Health Questionnaire-9, Problem Areas in Diabetes Scale, and Diabetes Distress Scale. Include alerts in electronic health records to trigger screening. Identify ways to address mental health issues during routine visits.
<ul style="list-style-type: none"> Health care practices have little or no access to mental health specialists. 	<p>REFER</p> <p>→</p> <ul style="list-style-type: none"> Coordinate care with a health care team that includes mental health professionals to create a treatment plan and problem solve. Refer patients to diabetes self-management education and support services.

*Diabetes distress: Feelings of worry, stress, frustration, and burnout that come from coping with diabetes.

To Learn More About Diabetes Distress and Depression

Read the peer-reviewed article: Owens-Gary MD, Zhang X, Jawanda S, et al. The importance of addressing depression and diabetes distress in adults with type 2 diabetes. *J Gen Intern Med.* 2019;34(2):320-324. <https://doi.org/10.1007/s11606-018-4705-2>

Listen to this CDC podcast: Diabetes, Distress, and Depression. Updated January 2017.

<https://tools.cdc.gov/medialibrary/index.aspx#/media/id/302814>

