



### **TWO-THIRDS OF YOUTH MENTAL HEALTH ISSUES NEED MORE THAN PRIMARY CARE-BASED HELP**

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TWO-thirds of young people with emerging mental disorders who attended primary care-based early intervention services remained poor or deteriorated over two years of care, according to research published today by the *Medical Journal of Australia*.

Dr Frank Iorfino, from the University of Sydney's Brain and Mind Centre, and colleagues, conducted a study of young people presenting for mental health care at two primary care-based early intervention mental health services between June 2008 and July 2018. The study involved 1510 people aged 12 to 25 years for whom two years' follow-up data were available.

Iorfino and colleagues identified four distinct trajectories of social and occupational functioning for the study participants.

Just under half (49%; n=733) were deteriorating and volatile; 237, or 16% had persistent impairment; 19% (291) had stable good functioning; 16% (249) were improving, then late recurrence. The less favourable trajectories (deteriorating and volatile; persistent impairment) were associated with physical comorbidity, not being in education, employment, or training, having substance-related disorder, having been hospitalised, and having a childhood onset mental disorder, psychosis-like experiences, or a history of self-harm or suicidality.

"Only 35% had good functional outcomes over two years; that is, only one in three people maintained an initially good level of function or substantially improved from a lower level of function," Iorfino and colleagues reported.

"In contrast, functional impairment persisted in nearly two-thirds of participants, or their level of function deteriorated and was volatile.

"Our findings suggest that the current primary care-based model meets the needs of only a minority of young people seeking care, and that most require more comprehensive and multidisciplinary approaches because of substantial comorbidity, ambiguous or attenuated symptomatology, and social or occupational complexity.

"Our findings highlight the importance of measurement-based care, whereby outcomes are monitored to inform more personalised and responsive treatment, a core component of the chronic care model that supports more informed clinical decisions.

"Despite evidence for its effectiveness and its feasibility in medical disease management, measurement-based care is largely unused in youth mental health care."



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Iorfino and colleagues concluded that their findings offered “valuable insights into the limitations of current primary care-based, low intensity, and psychologically focused stepped care provided by early intervention services”.

“The effects in such services of more sophisticated, multidimensional assessment, measurement-based care tools, and more dynamic, personalised and intensive multidisciplinary care packages, should be evaluated.”

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