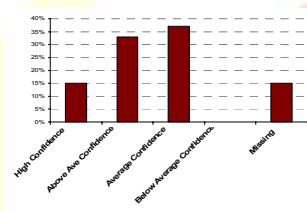


P180 - Does Clinician Confidence Influence Ability to Detect Depression, Anxiety or Distress in a Cancer Setting?

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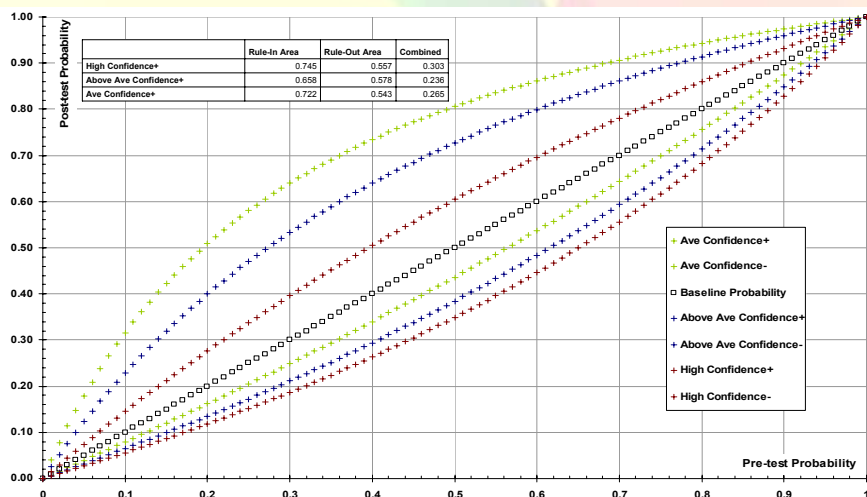
OBJECTIVES It is generally accepted that cancer clinicians are unable to accurately identify distress in routine care. Yet some staff have high confidence and skills whilst others do not. We aimed to examine the influence of staff skills and confidence on their ability to detection patient reported depression, anxiety and distress



METHODS We asked chemotherapy nurses to give us their clinical opinion on 269 patients who also rated their anxiety and depression or distress. Depression and anxiety and distress were defined by a score of 4 or higher on the ET. Clinicians rated their own confidence levels and their own skill levels and returned the data anonymously for blind analysis. We stratified confidence into a 4 point scale: high > above average > average > below average > low.

RESULTS 15% of staff rated their confidence level for psychosocial issues as "high"; 33% of staff rated their confidence level for psychosocial issues as "above average" and 37% as "average" but none as "below average" confidence (fig 1)

Only 9% of staff reported receiving training to improve skills in detection. In those with high confidence, detection sensitivity was 71.4% compared with 49% in the above average group and 27.8% in the average group. However detection specificity was 53.3% in the high confidence group versus 81.6% and 93.3% in the average confidence group. There was insufficient data to analyze skills. The effect on rule-in and rule-out accuracy is shown in figure 2. There is a modest gain in overall accuracy in high confidence groups.



CONCLUSIONS We conclude that confidence levels do influence clinical judgment by improving sensitivity but reducing specificity. In short high confidence staff tend to over-diagnose depression with more false positives whilst under-confidence staff tend to under-diagnose with more false negatives. That said overall accuracy is slightly better for staff with high confidence (AUC)

CLINICAL IMPLICATIONS Training and education that helps improve staff confidence influences detection of distress/anxiety/depression but care must be taken not to reduce specificity. Effects on overall accuracy may be modest

