

THE HEALTH BENEFITS AND COST-EFFECTIVENESS OF SCREENING AND TREATMENT FOR MENTAL ILLNESS

Mental illnesses include, but are not limited to, schizophrenia, panic attacks, depression, obsessive/compulsive disorders, post-traumatic stress disorder, phobias, eating disorders, and personality disorders.

- At least 40 million adults in the United States suffer annually from diagnosable mental disorders (Scully, 1993).
- Between 11 and 36 percent of all general care physician visits involved patients with diagnosable psychiatric disorders (Eisenberg, 1992).

HEALTH BENEFITS OF SCREENING & TREATMENT FOR MENTAL ILLNESS

Mental illnesses can be treated successfully.

- Treatment success rates are between 60 and 80 percent for panic disorder, bipolar disorder, major depression, schizophrenia, and obsessive compulsive disorder (DuPont et al., 1993; Scully, 1993).
- Treating mental illnesses improves patients' employability and productivity, as well as their ability to function in society (Bond, 1984; Greenberg et al., 1993a; Lantican, 1993; Moreau and Weissman, 1992).

✓ Women are more likely than men to suffer from certain mental illnesses including depression, eating disorders, and multiple personality disorders.

✓ Success rates for treating most mental illnesses are between 60 and 80 percent.

✓ Identifying and treating mental illness could reduce the \$148 billion the nation spends on its direct and indirect costs each year.

Depression

- **Diagnosis and treatment of depression can prevent suicides, the third leading cause of death for youths between the ages of 15 and 24.** It is estimated that in 1990, 15,000 men and 3,400 women killed themselves in the United States as a result of an affective disorder (Greenberg et al., 1993b).

- **Diagnosing and treating depression can reduce mortality in nursing homes.** Independent of other health conditions, major depression increased patients' risk of death by 59 percent, according to a study of 454 admissions to eight Baltimore nursing homes (Rovner et al., 1991).

- **Treatment can shorten the length of a depressive episode.** A study of 45 patients suffering a repeat episode of depression found that early treatment shortens the length of the depressive episode by approximately 4 to 5 months (Kupfer et al., 1989).

WOMEN ARE DISPROPORTIONATELY AFFECTED BY CERTAIN MENTAL ILLNESSES

- **The female/male ratio of individuals with multiple personality disorder is nine to one** (Ross and Dua, 1993).

- **Major depression affects women approximately twice as often as men,** according to consistent findings from epidemiological, family, and clinical studies (Weissman and Klerman, 1985).

- **Young women are overrepresented among patients with anorexia and bulimia** (Freund et al., 1993).

- **Diagnosis and treatment of depression can reduce disability.** A study of 11,000 outpatients in Boston, Chicago, and Los Angeles found that depressed patients are more impaired in their physical and social functioning and spend more days in bed than similar patients without symptoms of depression (Wells et al., 1989).

- **Successfully treating depression reduces work loss.** A study involving 2,980 participants in North Carolina found that workers with major and minor depression had 5 to 6 percent more disability days than their asymptomatic counterparts (Broadhead et al., 1990).

Multiple Personality Disorders

- **Diagnosing and treating patients with multiple personality disorder can improve their quality of life and their ability to function in society** (Ross and Dua, 1993).

Eating Disorders

- **Diagnosis and treatment of eating disorders, such as bulimia and anorexia nervosa, can prevent severe associated complications,** such as electrolyte imbalances, gastrointestinal bleeding, the erosion of dental enamel, esophageal rupture, and heart failure (Freund et al., 1993; Herzog et al., 1993).

Treating mental illness reduces the utilization of medical services and improves the patients' productivity.

- **Mental health treatment reduces overall utilization of medical services**, according to the results of 85 percent of the 58 controlled studies reviewed in a meta-analysis (Mumford et al., 1984). Treating panic disorders can reduce physician visits, since these patients have **seven times as many visits** as the general population (DuPont et al., 1993).

- **Psychotherapy shortens hospital stays, improves job performance, and prevents disability days**, according to a review of the literature (Krupnick and Pincus, 1992).

- **Psychotherapy can improve mentally ill patients' ability to care for dependents**, by discouraging alcohol and drug use, and by reducing costs to the police and court system according to a literature review (Krupnick and Pincus, 1992).

TREATMENT FOR MENTAL ILLNESS BENEFITS THE WHOLE FAMILY

- When a mentally-ill relative begins treatment, **other family members' use of medical services also decreases**, according to a study based on the Aetna claims forms of 43,383 families (Holder and Blose, 1987).

- **Treating schizophrenia reduces the burden on family members**, who spend about 800 hours a year caring for the schizophrenic relative (McGuire, 1991).

POTENTIAL REDUCTIONS IN DIRECT AND INDIRECT COSTS OF SCREENING FOR AND TREATING MENTAL ILLNESS

- **Diagnosis and treatment of mental illness can reduce its annual cost. In 1990, that cost was \$148 billion:** \$67 billion in direct expenditures, \$75 billion in morbidity and mortality, and \$6 billion in other related costs, such as family caregiving (Rice et al., 1992; Scully, 1993). Data for this study was obtained from hospital and nursing home records, the National Institute for Mental Health and other organizations.

- **Diagnosis and treatment of depression can reduce its annual cost. In 1990, that cost was \$43.7 billion:** \$23.8 billion in absenteeism and lost productivity, \$7.5 billion in loss of earnings from depression related suicides, and \$12.4 billion in direct costs (Greenberg et al., 1993b). This study used data from psychiatric units and non-psychiatric facilities, the 1990 Census, and the consumer price index.

- **Diagnosis and treatment of anxiety disorders can reduce its annual cost. In 1990, that cost was \$46.6 billion:** lost productivity accounted for \$34.2 billion of these costs (DuPont et al., 1993; Rice et al., 1992).

- **Diagnosis and treatment of schizophrenia can reduce its \$32.5 billion annual cost (1990 dollars)** (Rice et al., 1992; Scully, 1993).

WOMEN BENEFIT FROM TREATMENT

- Twenty-four bulimic women who received an intensive two-day group treatment session on eating patterns, self-esteem, and binge/purge behaviors showed significant improvements in their behavior and attitudes compared to a control group (Gendron et al., 1992).
- Individual and group therapy, assertiveness training, and victim survivor therapy were among the treatments that improved women's self-esteem and ability to work, according to a survey of 26 women in a private Texas psychiatric hospital (Lantican, 1993).

SAVINGS IN DIRECT AND INDIRECT COSTS OF SCREENING FOR AND TREATING MENTAL ILLNESS

Properly diagnosing and treating mental illnesses saves money by treating the underlying disorders that can be at the root of medical overutilization (Shemo, 1986).

Early diagnosis and treatment of patients with Multiple Personality Disorder (MPD) saves money:

A Canadian study (Ross and Dua, 1993) of 15 women with MPD conducted between 1985 and 1989 found that:

- Diagnosing and treating patients with multiple personality disorder

resulted in net savings of \$84,900 per patient, in direct costs alone, during the first ten years following treatment.

- Earlier diagnosis of patients with multiple personality disorder could save \$250,000 per case in direct costs alone if the disease is identified within the first year of the patient's utilization of medical care.
- If the 15 women had been treated at the age of ten, soon after they developed MPD, savings of \$10,000,000 could have been realized from a reduced use of social services.

Community-based care can be cost-effective where appropriate.

- Covering halfway house stays for patients with schizophrenia and other severe mental health disorders reduced hospitalization costs for 32 patients in Maryland by 59 percent, by reducing each patient's annual average hospital stay from 83 to 18 days (Coursey et al., 1990).
- Community care for schizophrenics can be more cost-effective than hospital stays, according to a review of American, Australian, and Canadian studies (Goldberg, 1991).

Psychosocial rehabilitation programs save money.

According to studies of a Chicago-based psychosocial rehabilitation program, which targeted schizophrenics and other mentally ill patients in the late 1970s (Bond, 1984):

- **Savings of \$1,880 per client** were realized when medication management, prevocational training, and other support services were offered to 102 mentally ill patients.
- **Savings of \$5,000 per client** were achieved by a home visit program, which prevented an average of 50 days of hospitalizations for each of the 40 participants.

This Research-in-Brief is part of IWPR's Research and Resource Kit on *Preventive Health Services for Women: Benefits and Cost Effectiveness*, produced by Stephanie Aaronson and Nicoletta Karam with the assistance of Ellen Cutler in August 1994. The project was funded by the Nathan Cummings Foundation, with additional funds for dissemination provided by The Ford Foundation. A related annotated bibliography is available from the Institute for Women's Policy Research, describing the studies cited in this fact sheet as well as information about additional studies that are of interest.

IWPR has produced eight fact sheets and annotated bibliographies on the benefits and cost-effectiveness of women's preventive health services relating to breast cancer, cervical cancer, domestic violence, family planning, mental health, prenatal care, osteoporosis, and sexually transmitted diseases. Each fact sheet/bibliography is available from IWPR for \$5.00; the entire Kit, which includes all topics and comes in a three-ring binder, is available from IWPR for \$20.00. Members of IWPR receive discounts on this kit and all publications. A variety of memberships are available for individuals and organizations. Please contact IWPR for information on membership and bulk discounts.