

# ULIGHED I SUNDHED

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# Ph.d.-afhandling

- **Knudsen SV: Inequalities in quality of care and clinical outcomes among Danish inpatients with major depressive disorder. Ph.D.-thesis. Aalborg University Press. 2021**

<https://vbn.aau.dk/en/publications/ulighed-i-behandlingskvalitet-og-kliniske-outcomes-blandt-patient>

INEQUALITIES IN QUALITY OF CARE  
AND CLINICAL OUTCOMES AMONG  
DANISH INPATIENTS WITH MAJOR  
DEPRESSIVE DISORDER

BY  
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DISSERTATION SUBMITTED 2021



AALBORG UNIVERSITY  
DENMARK



SUNDHEDSSTYRELSEN

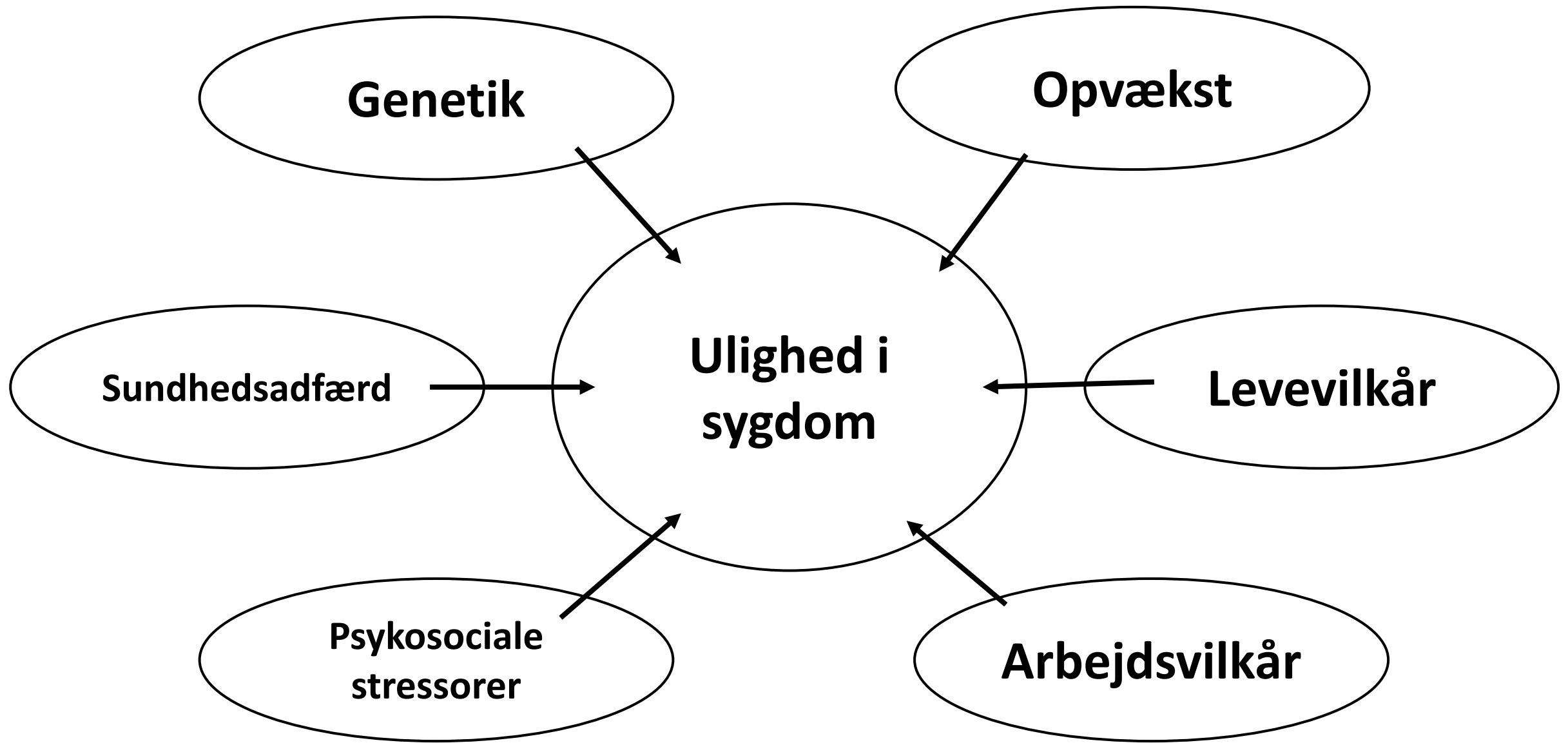
# Social ulighed i sundhed og sygdom

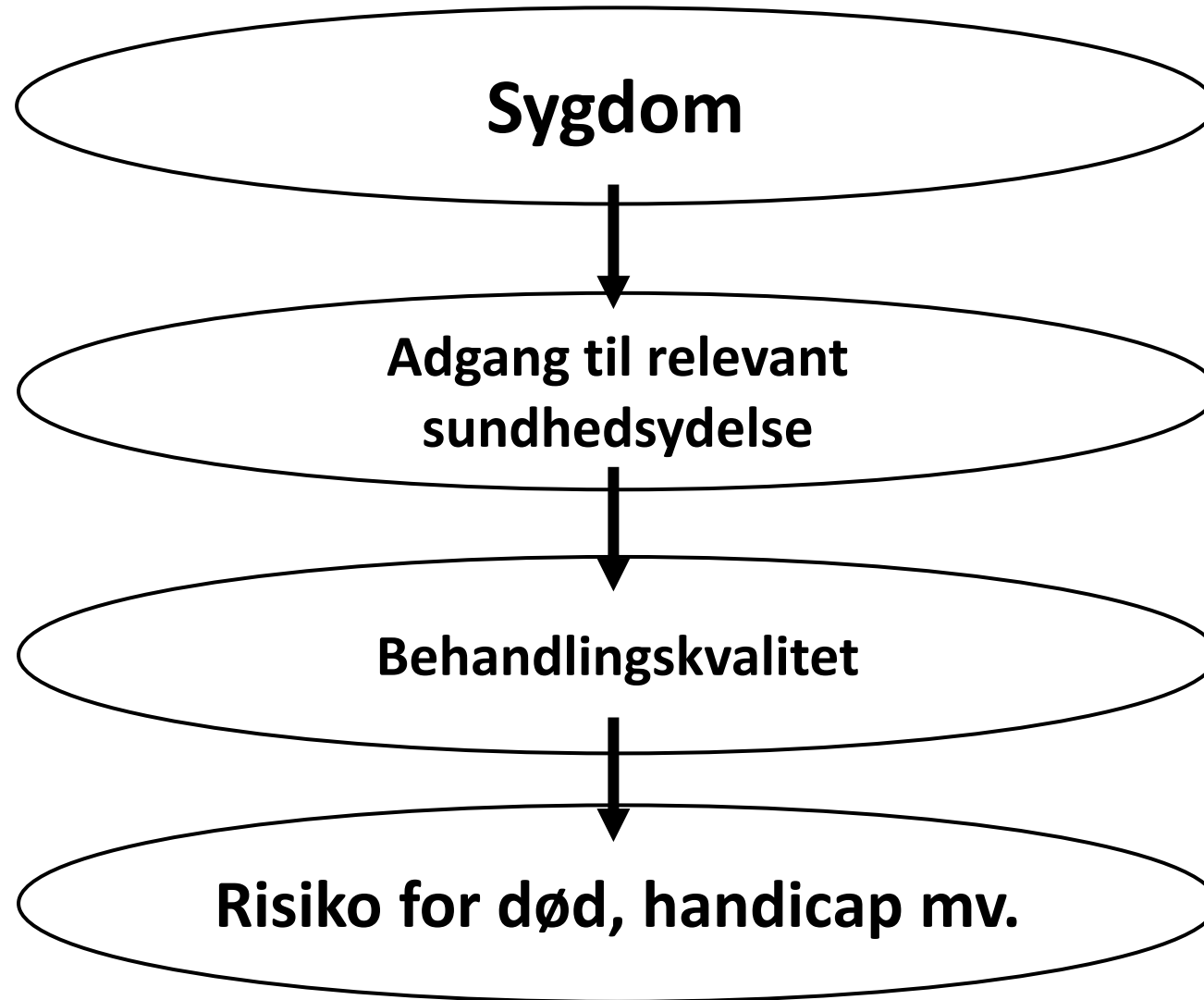
Udviklingen i Danmark  
i perioden 2010 - 2017



SDU 

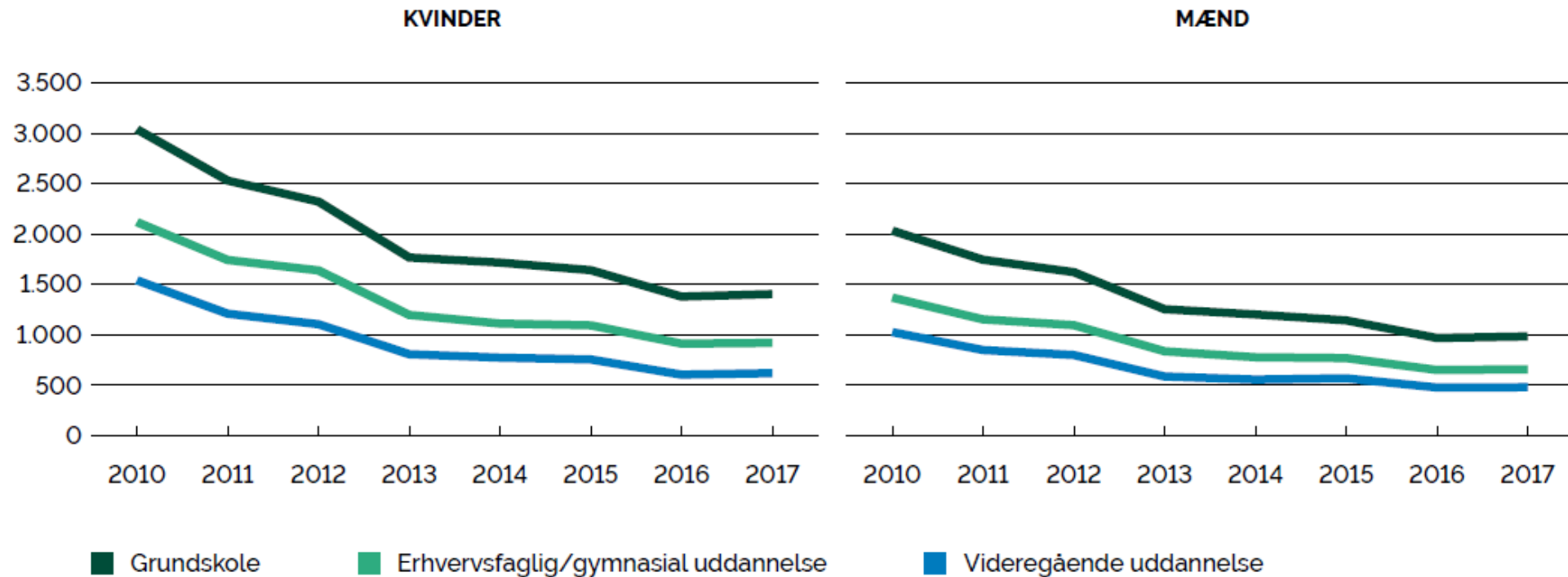






# Sygdom

Antallet af nye tilfælde pr. 100.000 af depression, fordelt på højest fuldførte uddannelsesniveau blandt kvinder og mænd på 30 år eller derover i perioden 2010-2017.



# Unmet Need for the Treatment of Depression in Atlantic Canada

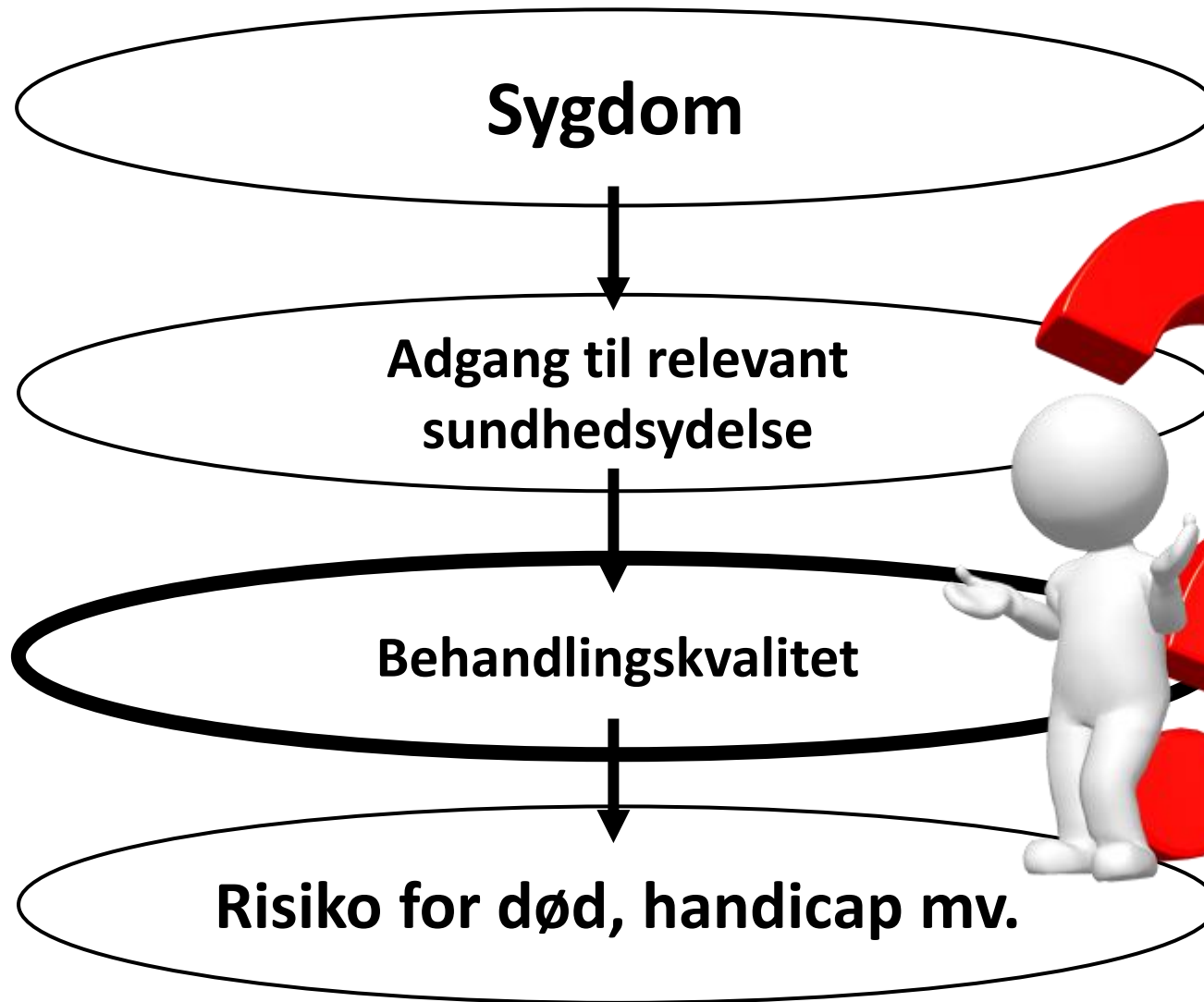
Jill M Starkes, MSc<sup>1</sup>, Christiane C Poulin, MD, MSc, FRCPC<sup>2</sup>,  
Stephen R Kisely, MD, MSc, FRANZCP, FRCPC, FAFPHM<sup>3</sup>

**Results:** Of the respondents, 7.3% experienced major depression in the previous year, as measured by the Composite International Diagnostic Interview Short Form. Individuals with the following characteristics were at increased risk for depression: female sex; widowed, separated, or divorced marital status; low income; and 2 or more comorbid medical conditions. Only 40% of respondents with probable depression reported any consultation about their condition with a general practitioner or mental health specialist. Less than one-quarter of Atlantic Canadians with depression reported receiving levels of care consistent with practice guidelines. Vulnerable groups, including older individuals, people with low levels of education, and those living in rural areas, were significantly less likely to receive treatment in either primary or specialty care.

**Behandlingskvalitet**

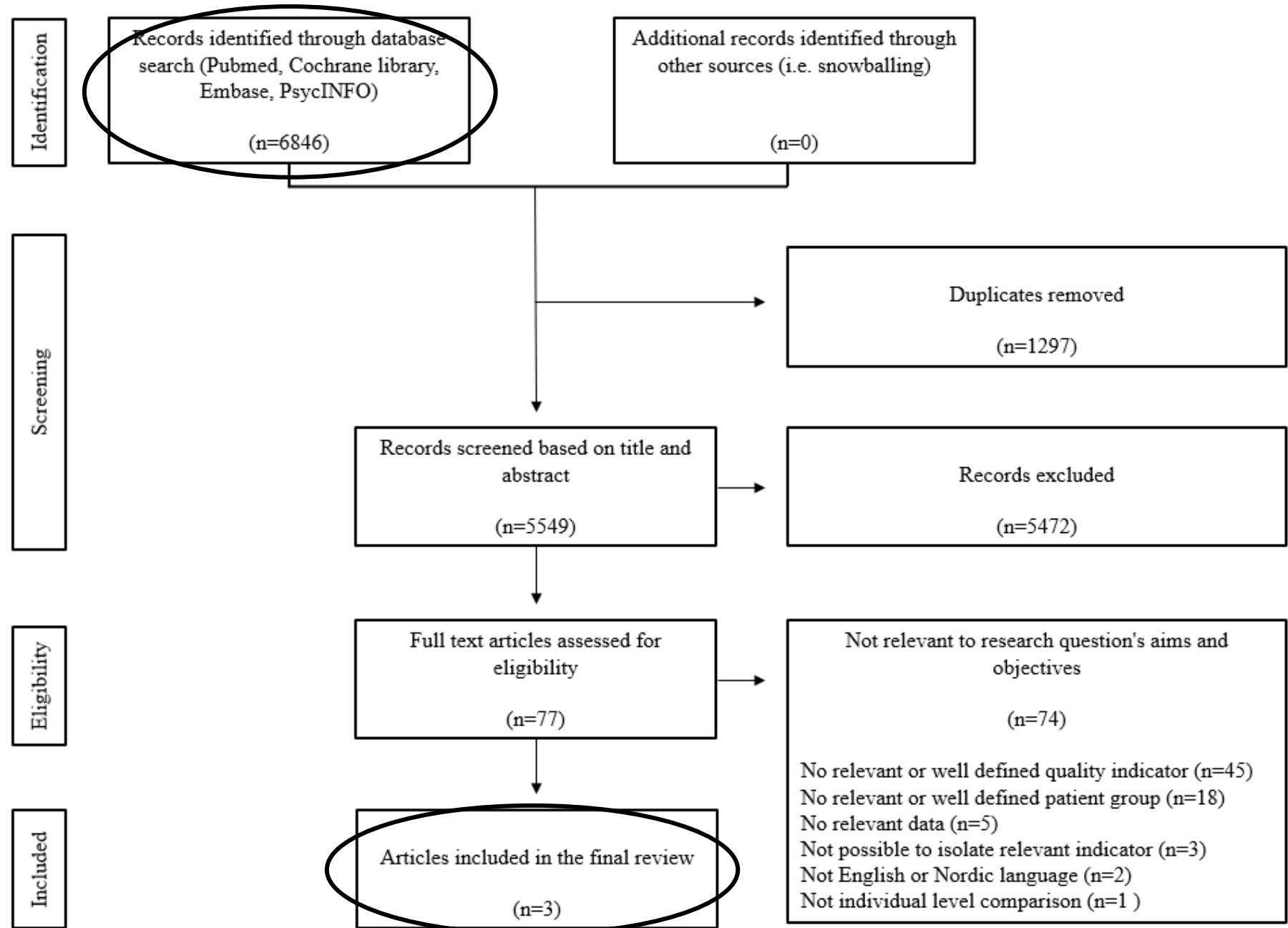


**Risiko for død, handicap mv.**



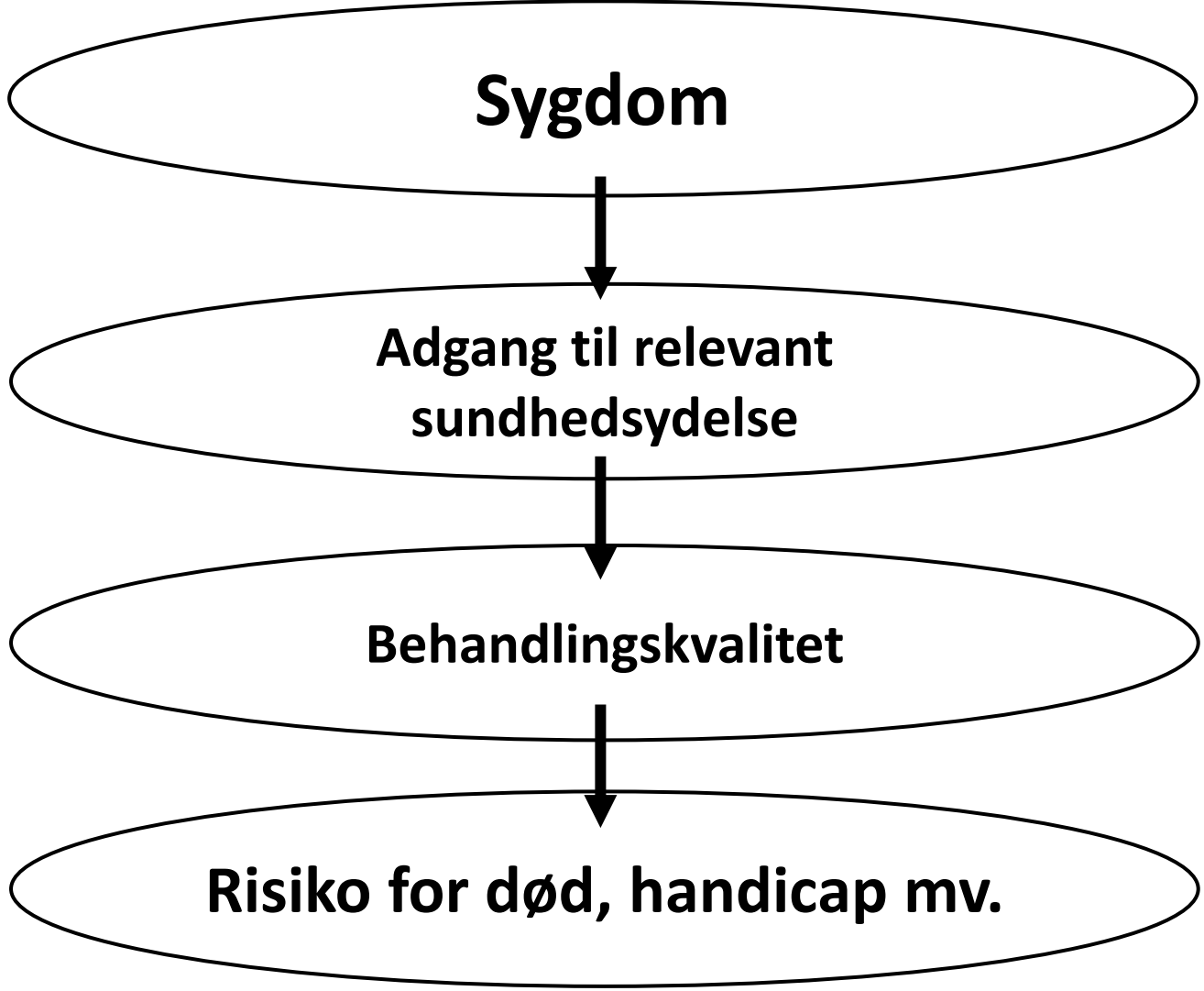


# Systematisk review



# Konklusion

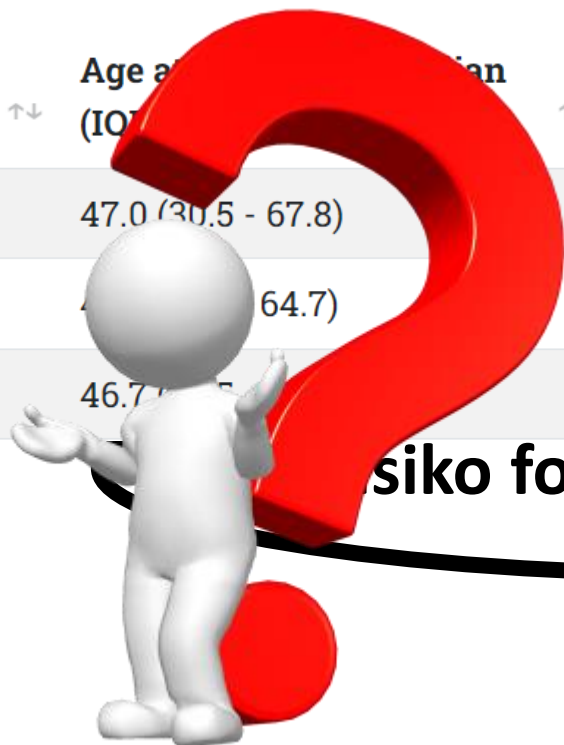
- Reviewet viser at forskningen om ulighed inden for behandlingskvaliteten på det psykiatriske område er meget begrænset



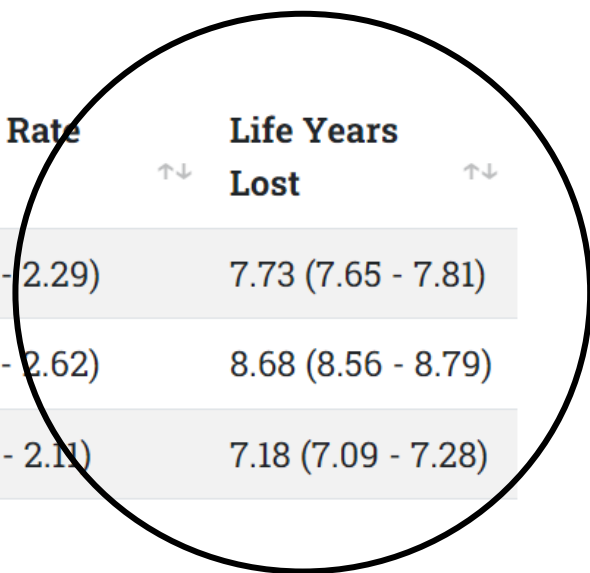
Sygdom

Adgang til relevant  
sundhedsydelse

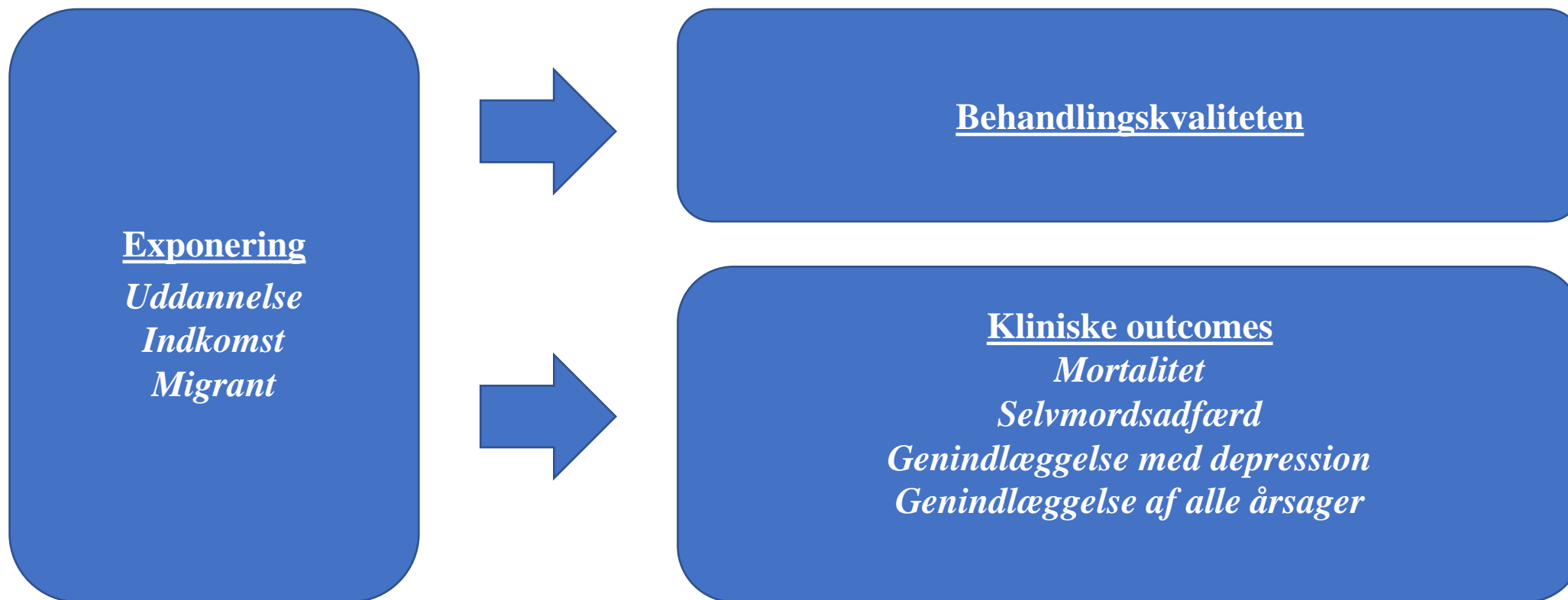
Sex <sup>↑↓</sup>	Diagnosed <sup>↑↓</sup>	Age at <sup>↑↓</sup>	Age at Death [Median (IQR)] <sup>↑↓</sup>	Deaths <sup>↑↓</sup>	Mortality Rate Ratio <sup>↑↓</sup>	Life Years Lost <sup>↑↓</sup>
Persons	316,890	47.0 (30.5 - 67.8)	80.4 (69.2 - 87.5)	92,334	2.27 (2.26 - 2.29)	7.73 (7.65 - 7.81)
Men	116,367	46.7 (30.5 - 64.7)	76.2 (64.0 - 84.4)	36,066	2.60 (2.57 - 2.62)	8.68 (8.56 - 8.79)
Women	200,523	46.7 (30.5 - 67.8)	82.8 (73.1 - 89.0)	56,268	2.09 (2.07 - 2.11)	7.18 (7.09 - 7.28)



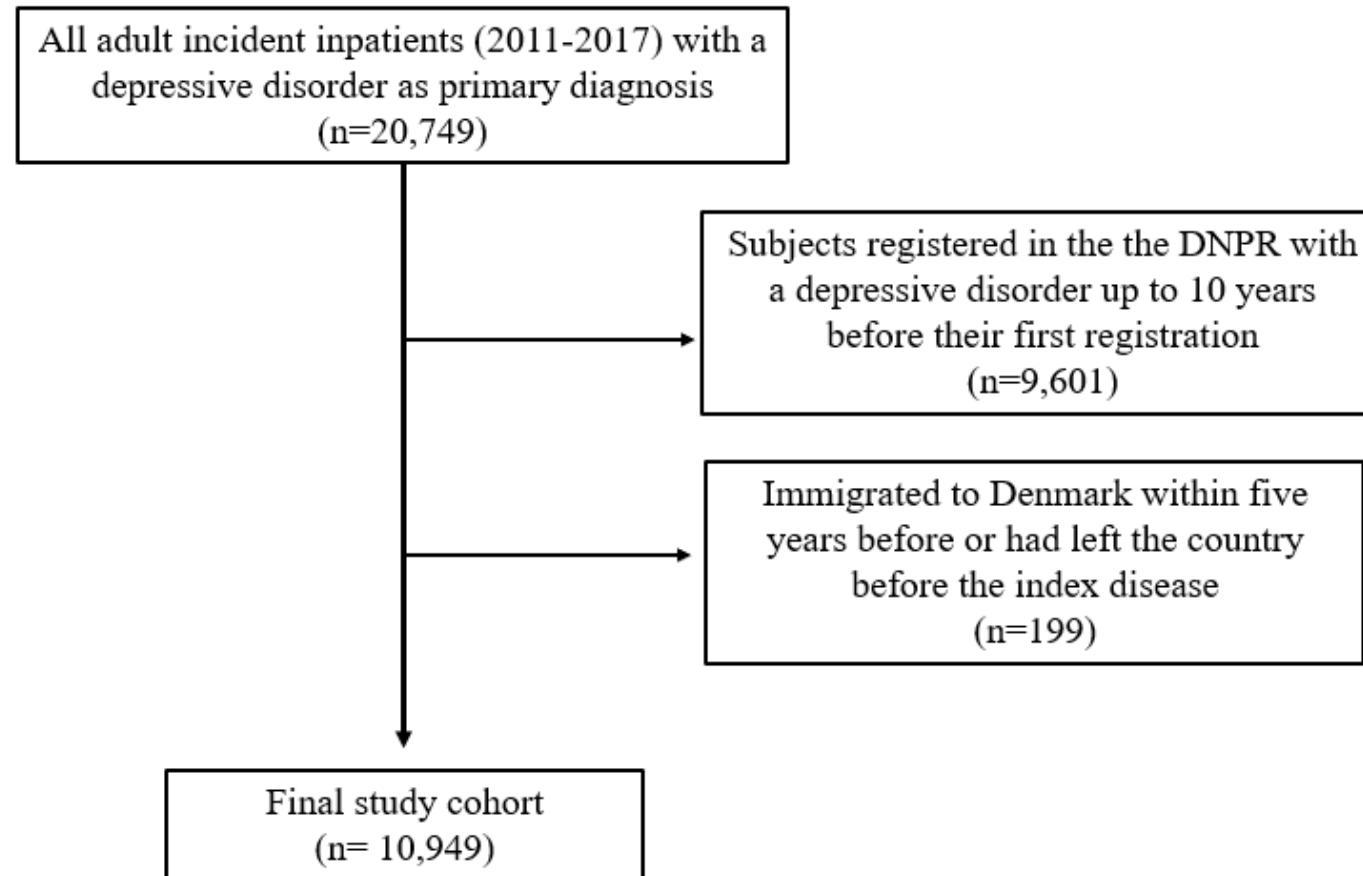
siko for død, handicap mv.



# Eksponering og outcomes



# Studiepopulationen

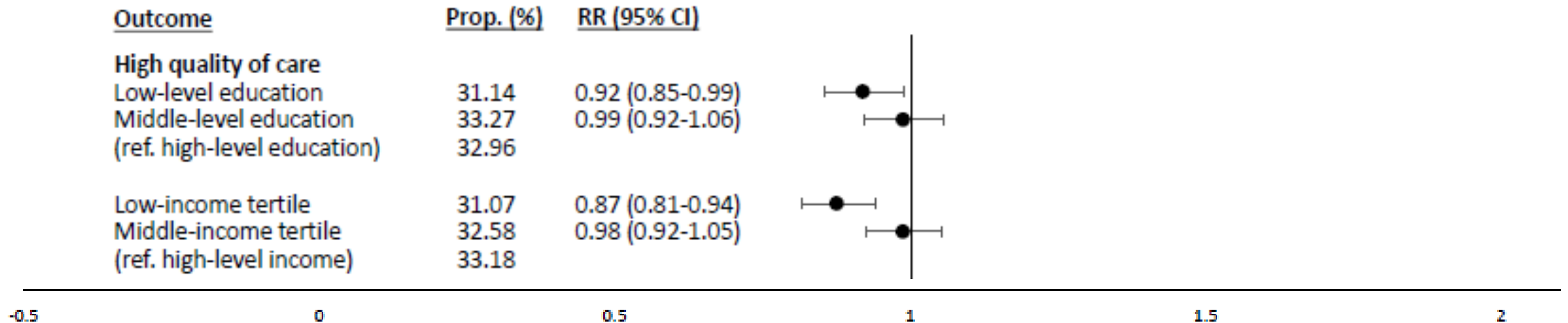


# **Indikatorer i Dansk Depressionsdatabase**

- **Vurdering af speciallæge i psykiatri inden 7 dage**
- **Somatisk udredning inden 2 dage**
- **Sværhedsgrad af depression (ind)**
- **Sværhedsgrad af depression (ud)**
- **Selvmondsrisikovurdering ved forløbsopstart**
- **Selvmondsrisikovurdering ved udskrivelse**
- **Vurdering af sociale støttebehov**
- **Inddragelse af pårørende**
- **Planlagt opfølgning (sammenhængende patientforløb)**

# Socioøkonomisk status og behandlingskvalitet

Kort uddannelse og lav indkomst var associeret med lavere behandlingskvalitet

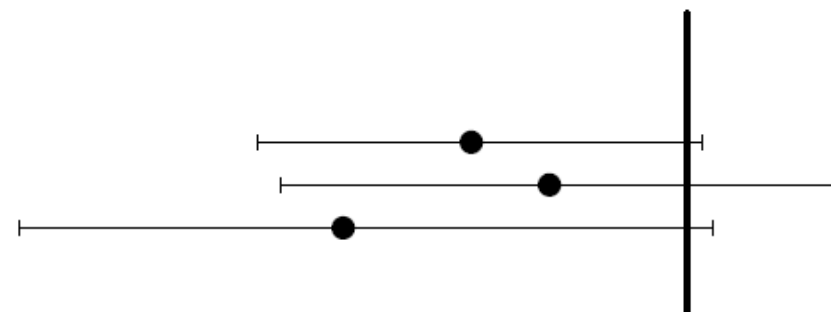




# Migrant status og behandlingskvalitet

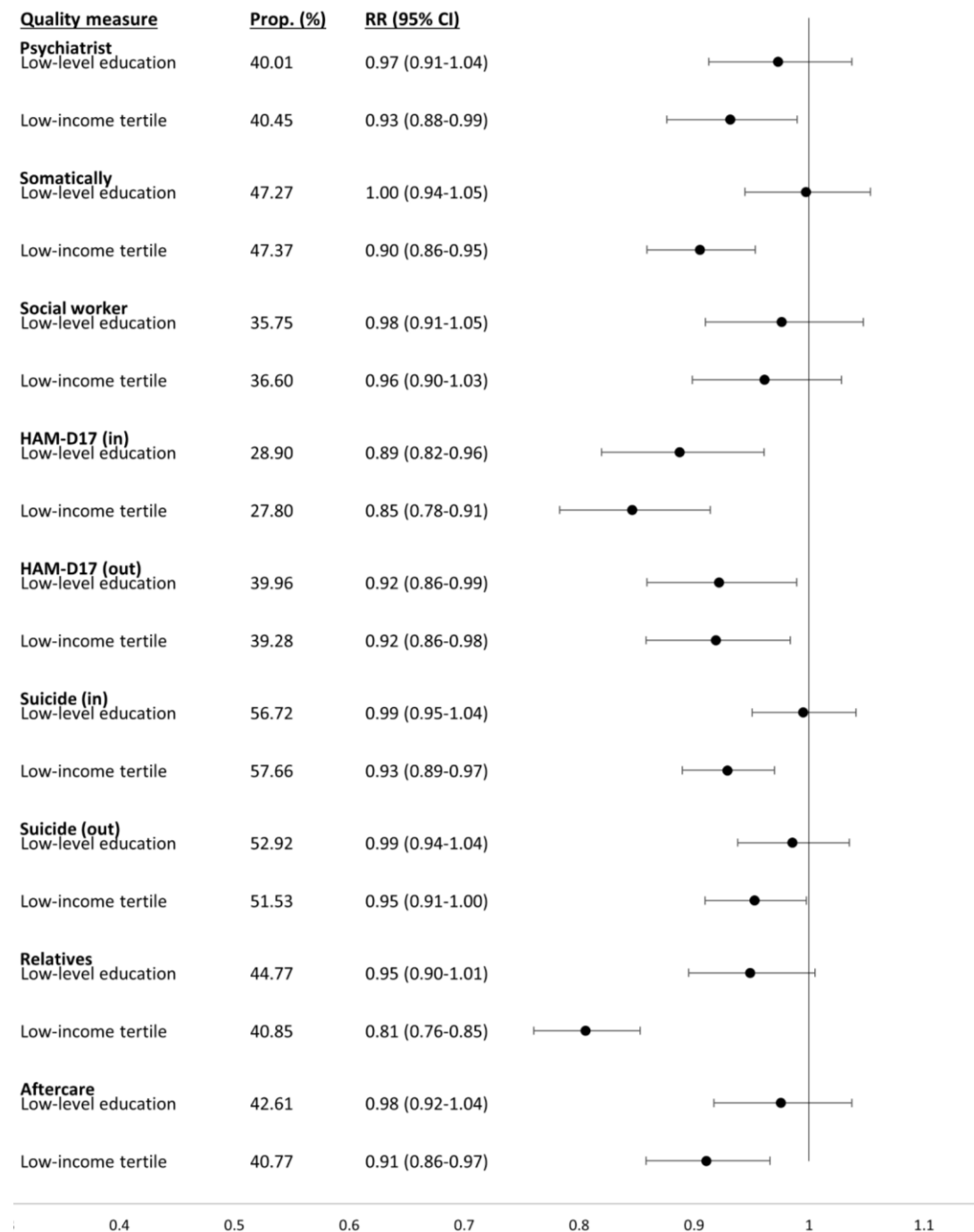
At være migrant var associeret med en lavere behandlingskvalitet

Quality measure	Proportion	Risk difference	RR (95% CI)
<b>High Quality (70%)</b>			
Immigrant (all)	28.21%	3.36%	0.93 (0.86:1.01)
Non-Western	28.45%	3.12%	0.95 (0.87:1.05)
Western	27.79%	3.78%	0.89 (0.78:1.01)
Danish (ref.)	31.57%		

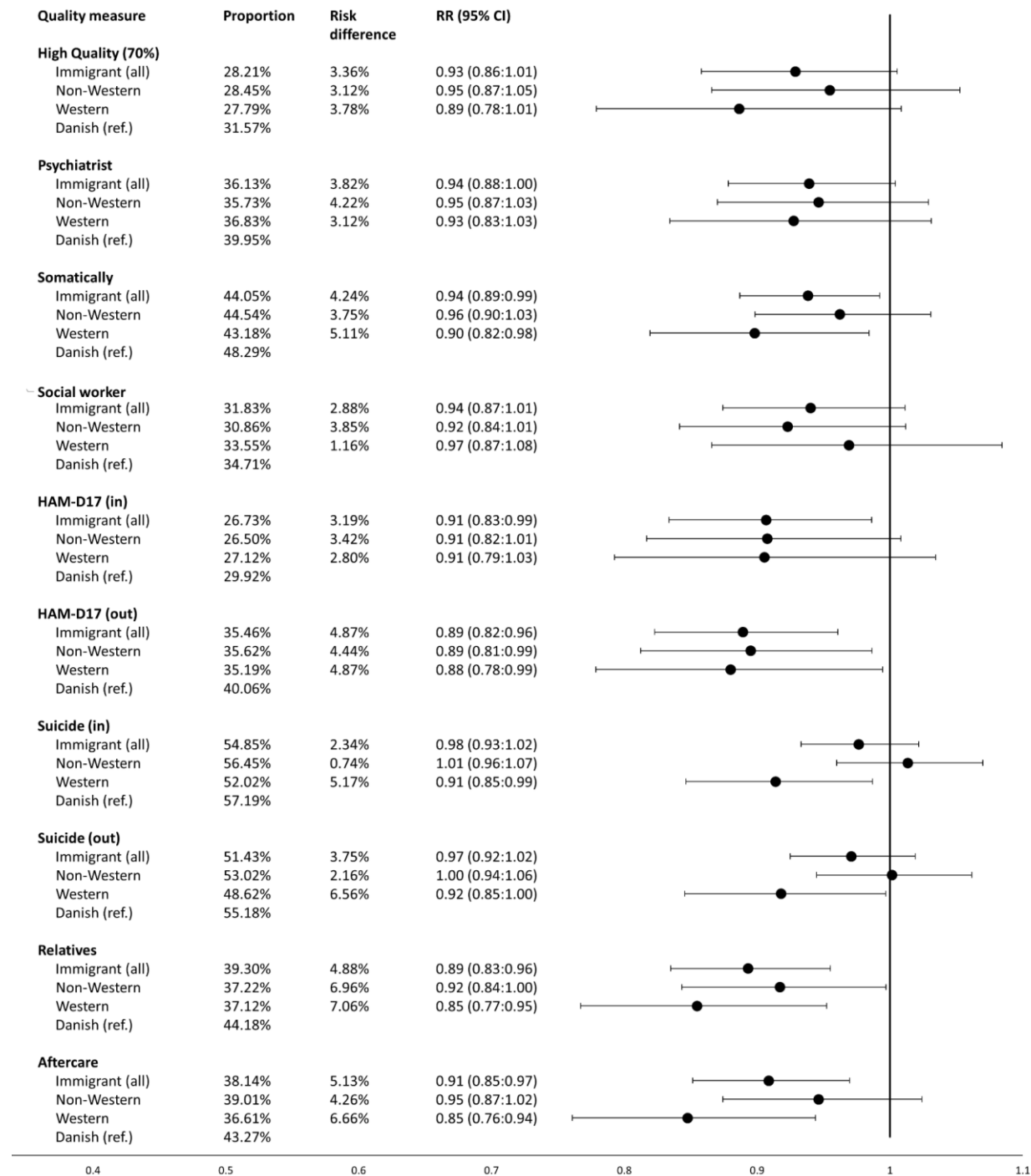


<https://www.cambridge.org/core/journals/european-psychiatry/article/differences-in-quality-of-care-mortality-suicidal-behaviour-and-readmissions-among-migrants-and-danishborn-inpatients-with-major-depressive-disorder/AAD92C73183755A5B1468053E6E51EED>

# Socialøkonomi og de enkelte indikatorer



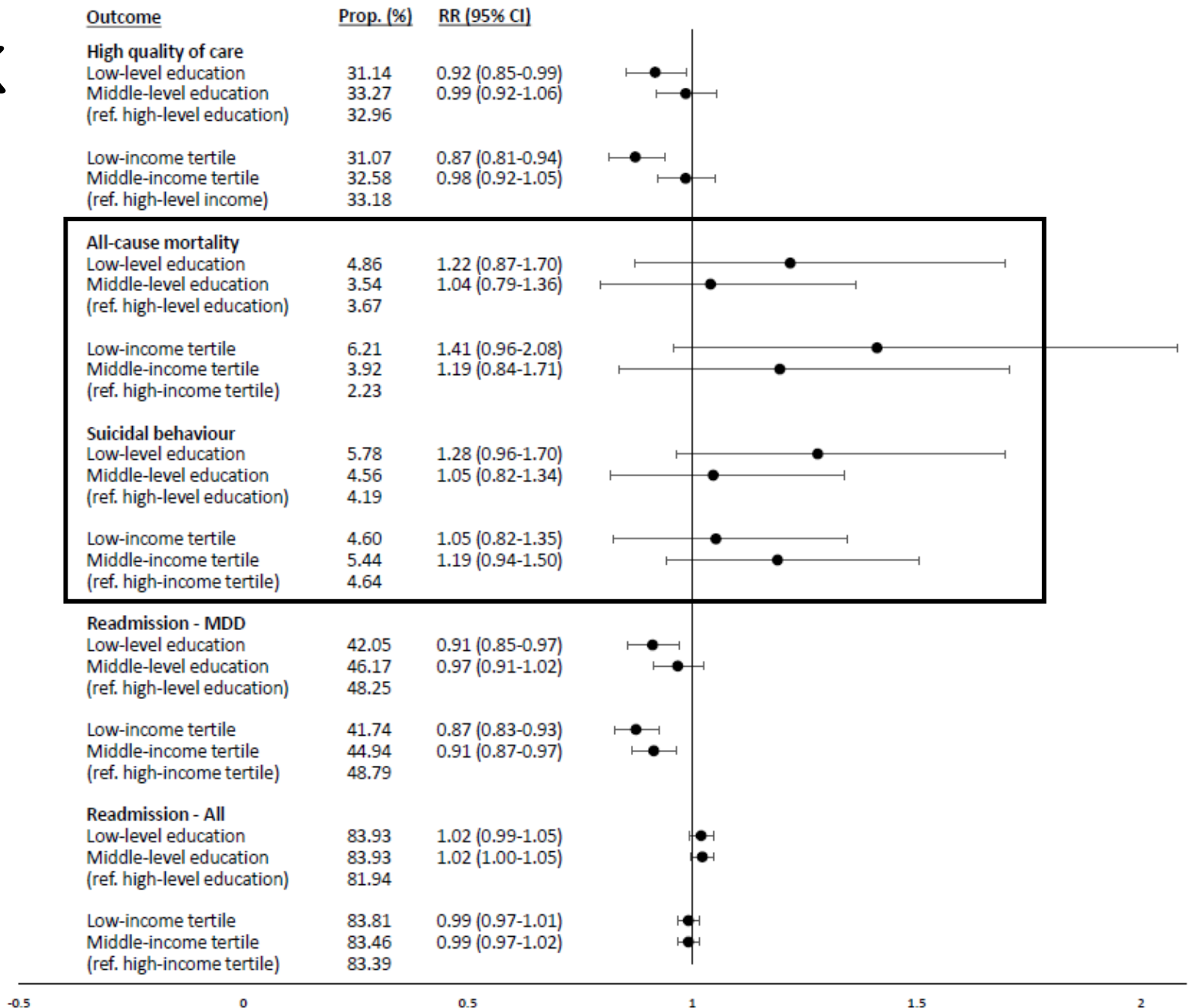
# Migrantstatus og de enkelte indikatorer



# Socioøkonomisk status og mortalitet

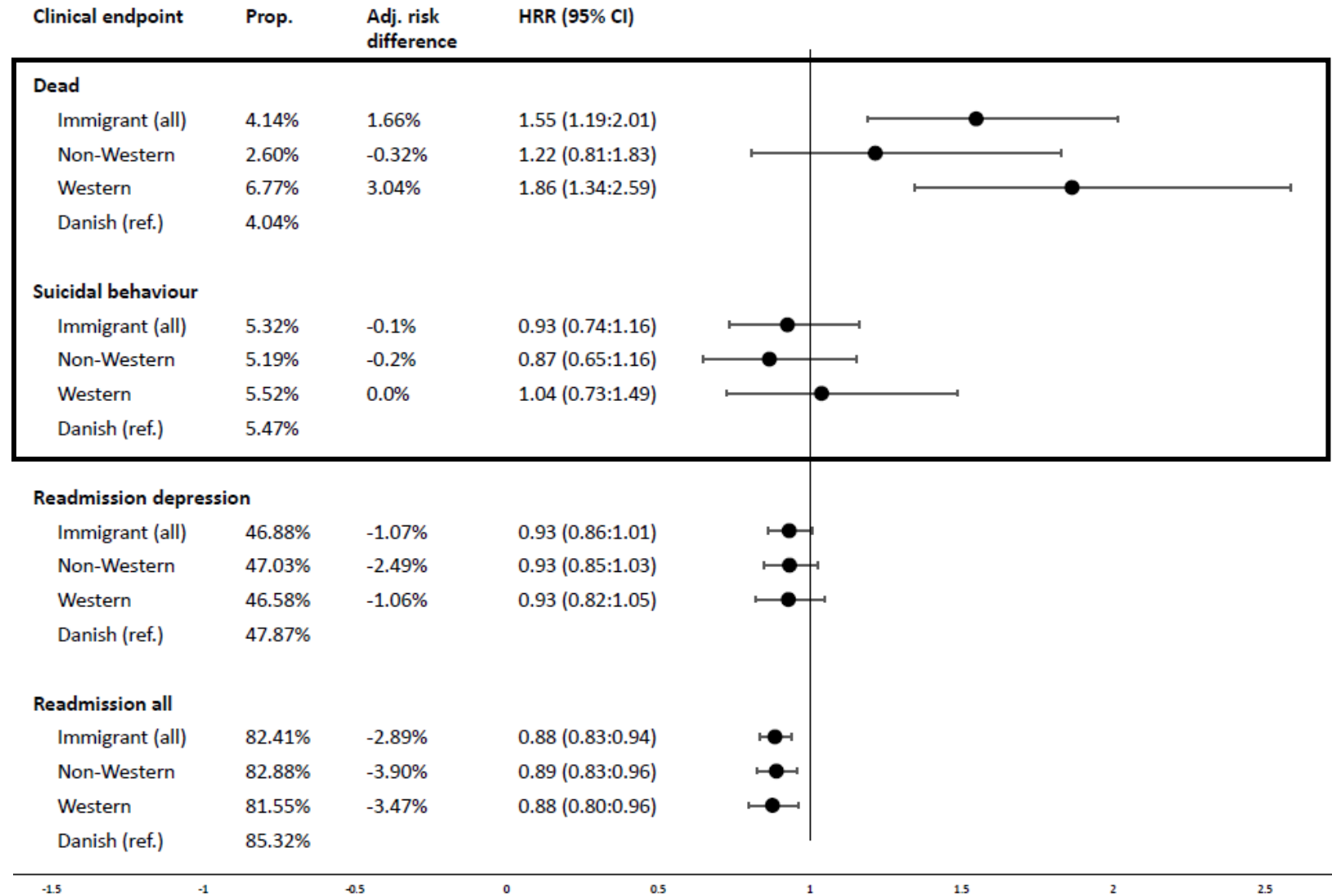
Kort uddannelse og lav indkomst var associeret med højere 1-års mortalitet

Kort uddannelse var associeret med højere risiko for 1-års selvmordsadfærd



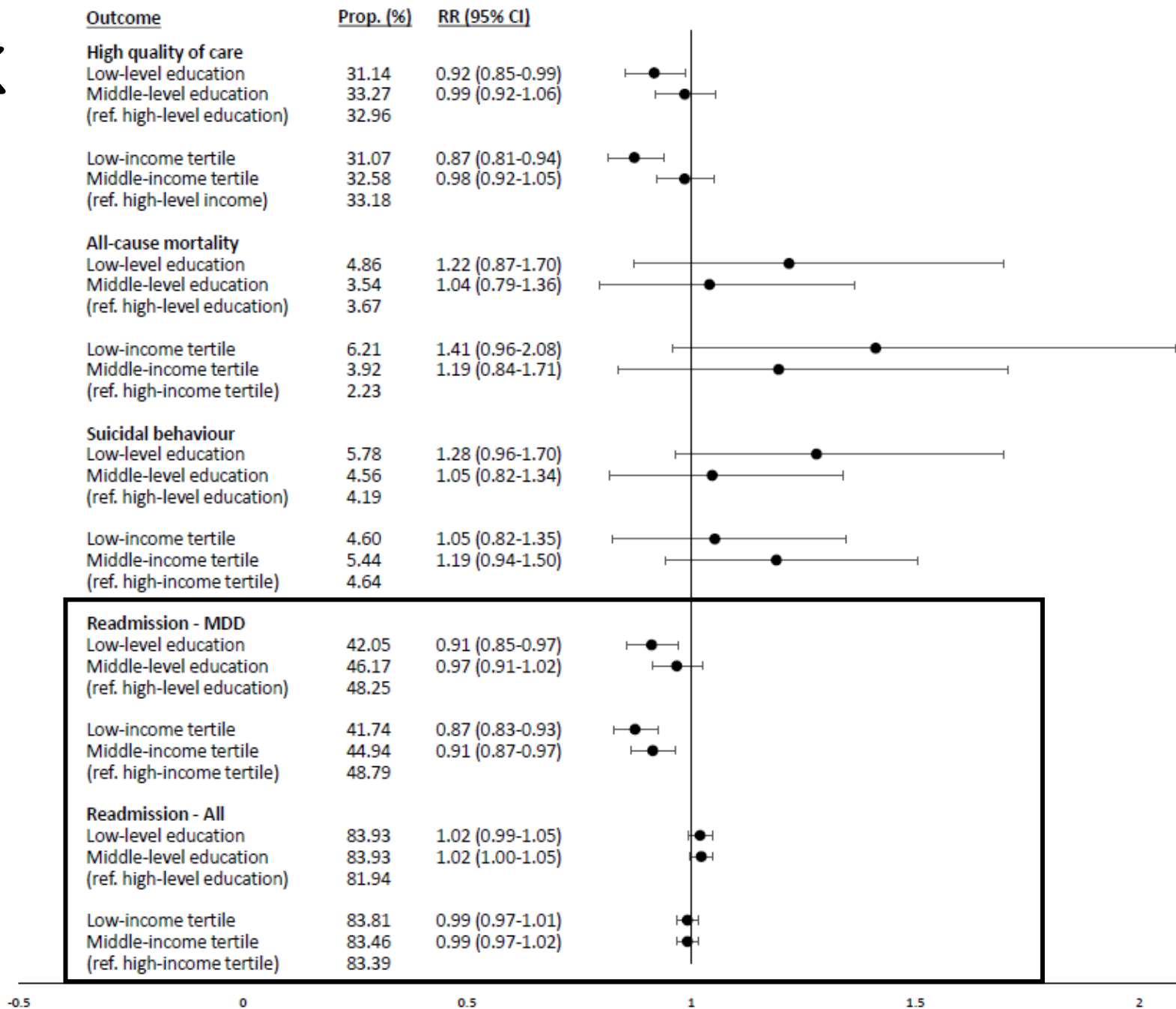
# Migrant status og mortalitet

At være migrant var associeret med en højere risiko for 1-års mortalitet, men ikke med selvmordsadfærd



# Socioøkonomisk status og genindlæggelse

Kort uddannelse og lav indkomst var associeret med en lavere risiko for 1-års genindlæggelse med depression, men ikke med alle slags genindlæggelser



# Migrant status og genindlæggelse

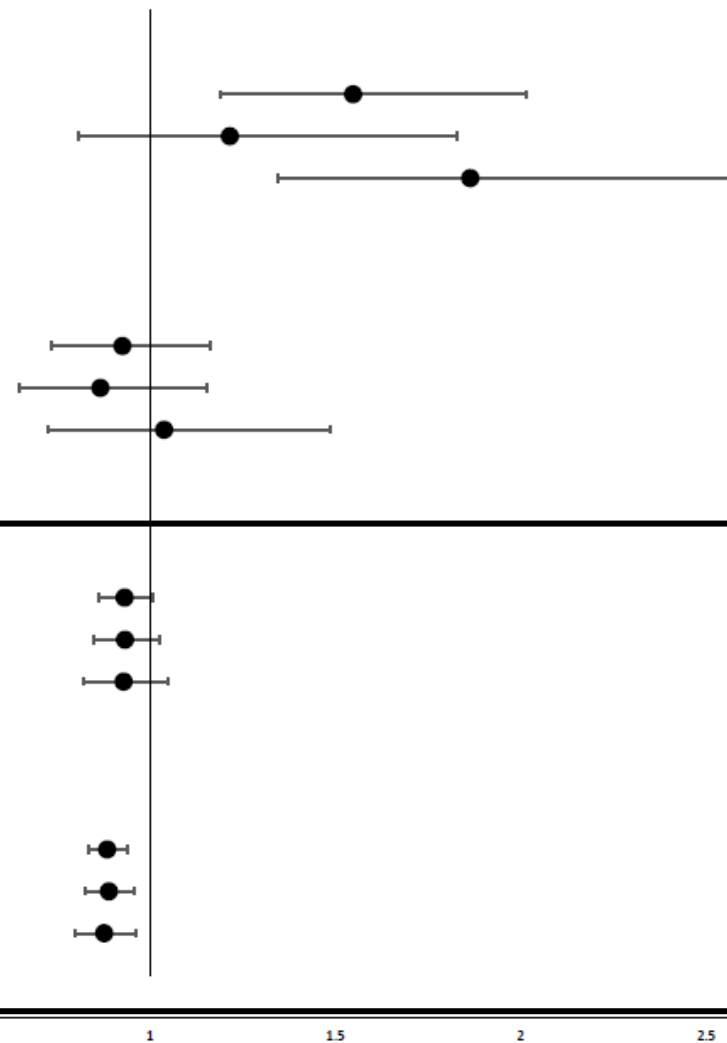
At være migrant var associeret med en lavere risiko for 1-års genindlæggelse med depression og med alle typer genindlæggelse

Clinical endpoint	Prop.	Adj. risk difference	HRR (95% CI)
<b>Dead</b>			
Immigrant (all)	4.14%	1.66%	1.55 (1.19:2.01)
Non-Western	2.60%	-0.32%	1.22 (0.81:1.83)
Western	6.77%	3.04%	1.86 (1.34:2.59)
Danish (ref.)	4.04%		

<b>Suicidal behaviour</b>			
Immigrant (all)	5.32%	-0.1%	0.93 (0.74:1.16)
Non-Western	5.19%	-0.2%	0.87 (0.65:1.16)
Western	5.52%	0.0%	1.04 (0.73:1.49)
Danish (ref.)	5.47%		

<b>Readmission depression</b>			
Immigrant (all)	46.88%	-1.07%	0.93 (0.86:1.01)
Non-Western	47.03%	-2.49%	0.93 (0.85:1.03)
Western	46.58%	-1.06%	0.93 (0.82:1.05)
Danish (ref.)	47.87%		

<b>Readmission all</b>			
Immigrant (all)	82.41%	-2.89%	0.88 (0.83:0.94)
Non-Western	82.88%	-3.90%	0.89 (0.83:0.96)
Western	81.55%	-3.47%	0.88 (0.80:0.96)
Danish (ref.)	85.32%		

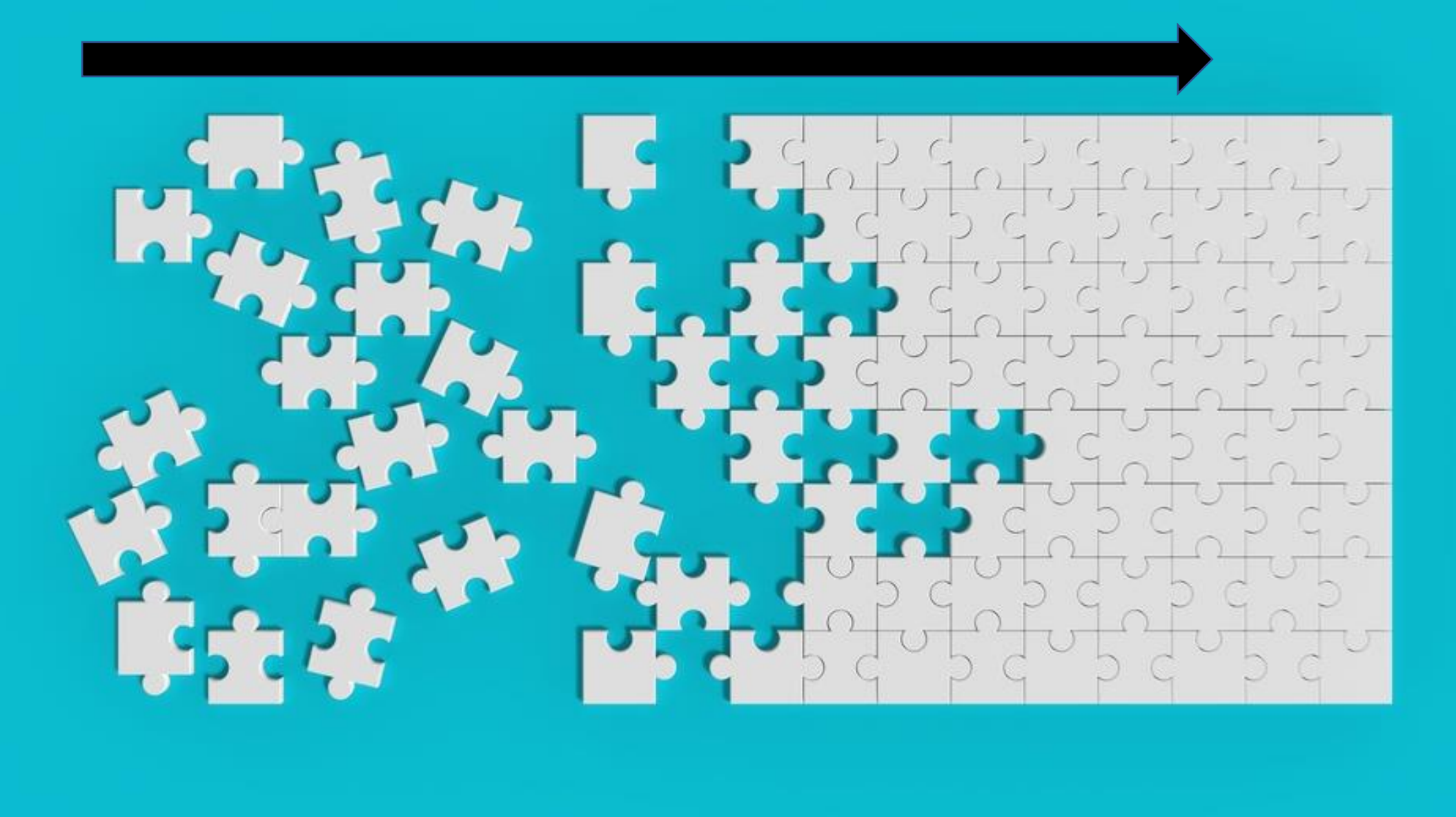


# Perspektiv

- Resultaterne i denne afhandling indskriver sig i et mønster, hvor patienter med lav social position er i større risiko for:
  - At udvikle depression
  - At have flere barrierer i adgang til sundhed
  - At modtage suboptimal behandlingskvalitet på hospitalet
  - At få dårligere opfølgning og rehabilitering
  - At opleve flere barrierer for at blive genindlagt i tilfælde af tilbagefald
  - At få dårligere sociale resultater, fx tilbagevenden til arbejdsmarked
  - At have dårligere kliniske resultater i form af højere risiko for død og selvmordsadfærd.

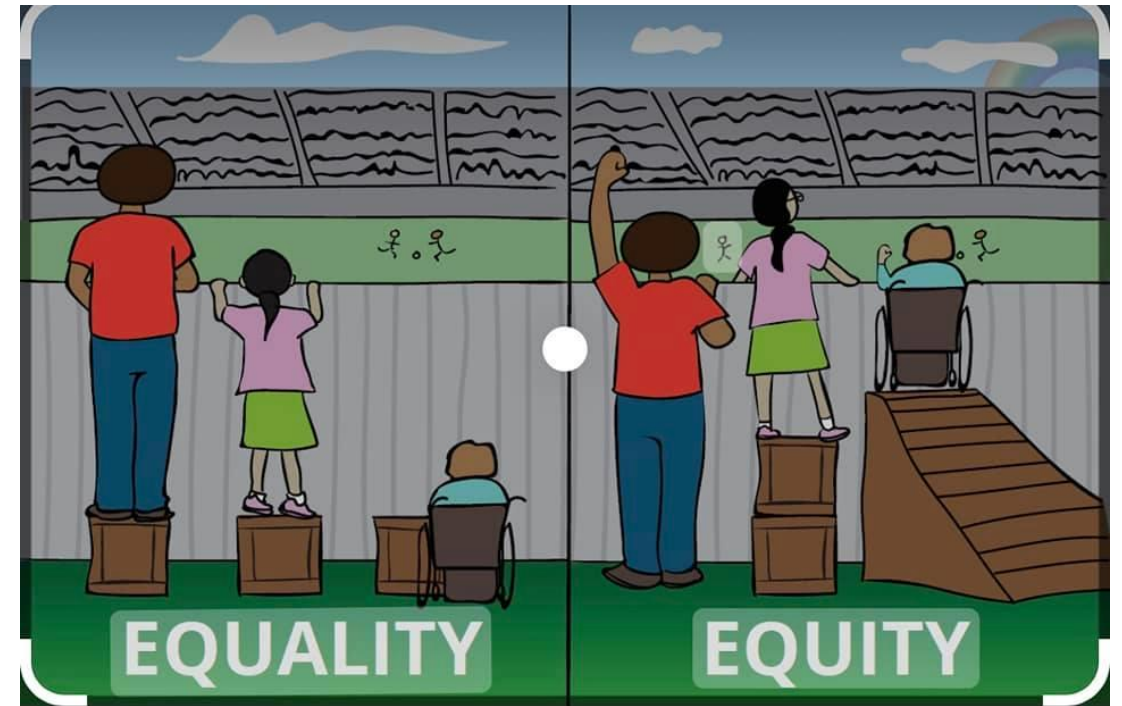


# Perspektiv



# Perspektiv

- Dem som har størst behov for sikkerhedsnettet, er i størst risiko for ikke at modtage de relevante tilbud.



Tak for interessen  
Spørgsmål?

