

Population Health:

What further research is needed?

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Primary Prevention

- An unusual aspect of the epidemiological literature is the relative lack of “etiologically” oriented studies
 - The traditional primary goal of epidemiologic research is primary prevention.
 - Traditional epidemiological models may not work well.
- Good focus for future research

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Screening

- May be opportunities to develop useful screening/case finding strategies
- More intensive monitoring may nevertheless be very valuable and is a related goal.

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Treatment

- Much of the past literature has emphasized the issue of access to treatment.
 - Quality and (real world) effectiveness has been relatively neglected.
- Most of the emphasis has been on access to treatment in primary care.
 - May need to think more broadly.
 - The primary care environment itself is evolving.
 - E.g. Primary Care Networks

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Treatment

- Another unusual element is the relative lack of longitudinal studies
 - Exceptions include NEMESIS, the Baltimore ECA follow-up and an Edmonton study.
 - Canadian researchers increasingly making use of the NPHS and NCLSY
 - Time dependent probabilities characterize this condition.
 - Sophisticated decision rules may enhance clinical practice but these depend on supporting evidence.

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Have the epidemiologists “dropped the ball?”

- Innovative ideas for improving clinical treatment guidelines have apparently derived from intuition (e.g. NICE) guidelines.
- The large scale epidemiological studies sometimes seem to be in the role of “awareness raising” rather than exploring the distribution and determinants of depression.

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Centralization of Psychiatric Epidemiology

- Global standards have become a “two edged sword.”
- Unprecedented quality has been achieved, but at the expense of some traditional scientific values.

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Health Policy Research

- Many good ideas for better management
 - But, Canadian primary care systems lack the funding and accountability levers of the NHS or HMO environments.
- Opportunities exist in public/population health – but little action taking place.
- A “stepped care model” fits the evidence but will encounter barriers to implementation.

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Research Needs

- More decisive epidemiologic studies (longitudinal) to inform practice.
- Health policy research to address “Canadian” issues.

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