Survey

Adolescent depression and side effects of Selective Serotonin Reuptake Inhibitors

Depression is now recognized as a leading cause of morbidity and even mortality (in its relationship to suicide) in Canadian youth. Selective Serotonin Reuptake Inhibitors (SSRIs)* are an important tool in treating major depressive disorders and have recently received a ‘black box’ warning.

This survey aims at documenting if paediatricians diagnose and treat depression, have witnessed adverse effects of SSRIs or have changed their approach since this recent warning.

1. During the past two years, have you diagnosed depression in children and adolescent patients?
   - No • Yes
   If yes: How many? • <5 • 5–10 • 10–20 • >20
   Have you initiated SSRIs for depression on your own? • No • Yes

2. Have you followed paediatric patients on SSRIs for depression?
   - No • Yes
   If yes: How many? • <5 • 5–10 • >10

3. Are you aware of the ‘black box’ warning for SSRIs? • No • Yes

If “No” to questions 1, 2 and 3, you do not need to answer any further questions.

4. Did any of your patients on SSRIs experience any of the following adverse effects? (Check all that apply.)
   - Agitation
   - Aggressive behaviours
   - Worsening of depression
   - New onset of suicidality
   - Worsening suicidality
   - Headache
   - Leg pain
   - Other (please specify) _________________________________

5. How did the ‘black box’ warning on SSRIs affect your management of depression? (Check all that apply.)
   - Made no changes
   - Followed patient(s) more frequently
   - Changed SSRI:
     __ dosage __ medication
   - Stopped SSRI
   - Patient(s) stopped medication on own
   - Patient(s) needed hospitalization
   - Referred back to psychiatrist

* Fluoxetine (Prozac®), fluvoxamine (Luvox®), paroxetine (Paxil®), sertraline (Zoloft®), citalopram (Clexa®), escitalopram (Lexapro®).

Please return this survey with your monthly reporting form.
Thank you for your participation.

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