

Depression program in primary health care: The Chilean experience

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Chile is a middle income country in the process of demographic transition, where mental health problems contribute significantly to the disease burden. In 2001, Chile introduced gradually the Program of Treatment for Depression in Primary Health Care (PTDPHC), which includes a multicomponent care model according to the severity of the medical profile: integral evaluation by a team of professionals, antidepressant drug treatment, individual psychotherapy, psychoeducational group intervention, and monitoring visits. In 10 years of operation, this program has attended more than 1 million adults. We have conducted several evaluations of this program, and our results show that PTDPHC is effective in decreasing depressive symptoms and comorbidity, has positive effects on the patient and their partners, and is independent of the center; the greatest threat to achieving effectiveness is the rate of treatment dropout. In the future, the manager of this policy must meet the following challenges: