

# Health Care Utilization in Veterans With and Without PTSD and Depression: A Preliminary Analysis

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## INTRODUCTION

Posttraumatic stress disorder (PTSD) and depression are conditions known to affect a patient's overall health status. Patients with PTSD or depression often employ the help of various health care providers at a rate much higher than those without these problems. Few if any studies have evaluated whether those with comorbid presentations of these conditions use more health care resources than those without. The current study was designed to provide a preliminary analysis of this issue.

#### METHOD

473 United Nations Peacekeeping veterans from Canada were divided into four groups (no PTSD/no depression, PTSD/no depression, no PTSD/depression, PTSD/depression) and compared on total number of visits to any health care professional in the past year. Between groups comparisons of visits to specific categories of health professionals were also conducted.

## RESULTS

ANOVA revealed that the groups significantly differed on total visits to any health professional, F(3, 469) =27.44, p< .001 (see Figure 1). Tukey's post hoc analyses indicated that veterans in the PTSD/depression group had more visits than all other groups. Further, those with PTSD alone and depression alone made more visits to a health care provider than veterans in the no PTSD/no depression group. Analyses revealed that the groups also significantly differed on visits to general practitioners, F(3, 463) =15.80, p < .001, specialists, F(3, 466) =17.84, p < .001, pharmacists, F(3, 453)= 18.48, p< .001, and mental health professionals, F(3, 466) = 18.63, p< .001. Means and standard deviations are shown in Table 1.

# DISCUSSION

Results show that health care utilization is a factor that should be considered when planning treatment for veterans with and without depression and PTSD. Assessments of veterans with and without depression and PTSD should include an assessment of the need for a multi-disciplinary team approach to treatment. As the number of health care visits is significantly increased by the comorbidity of depression and PTSD, health care providers need to be aware of their clients' special needs, as well as how these demands affect the health care system.

Figure 1. Mean number of total visits to all types of health care professionals.

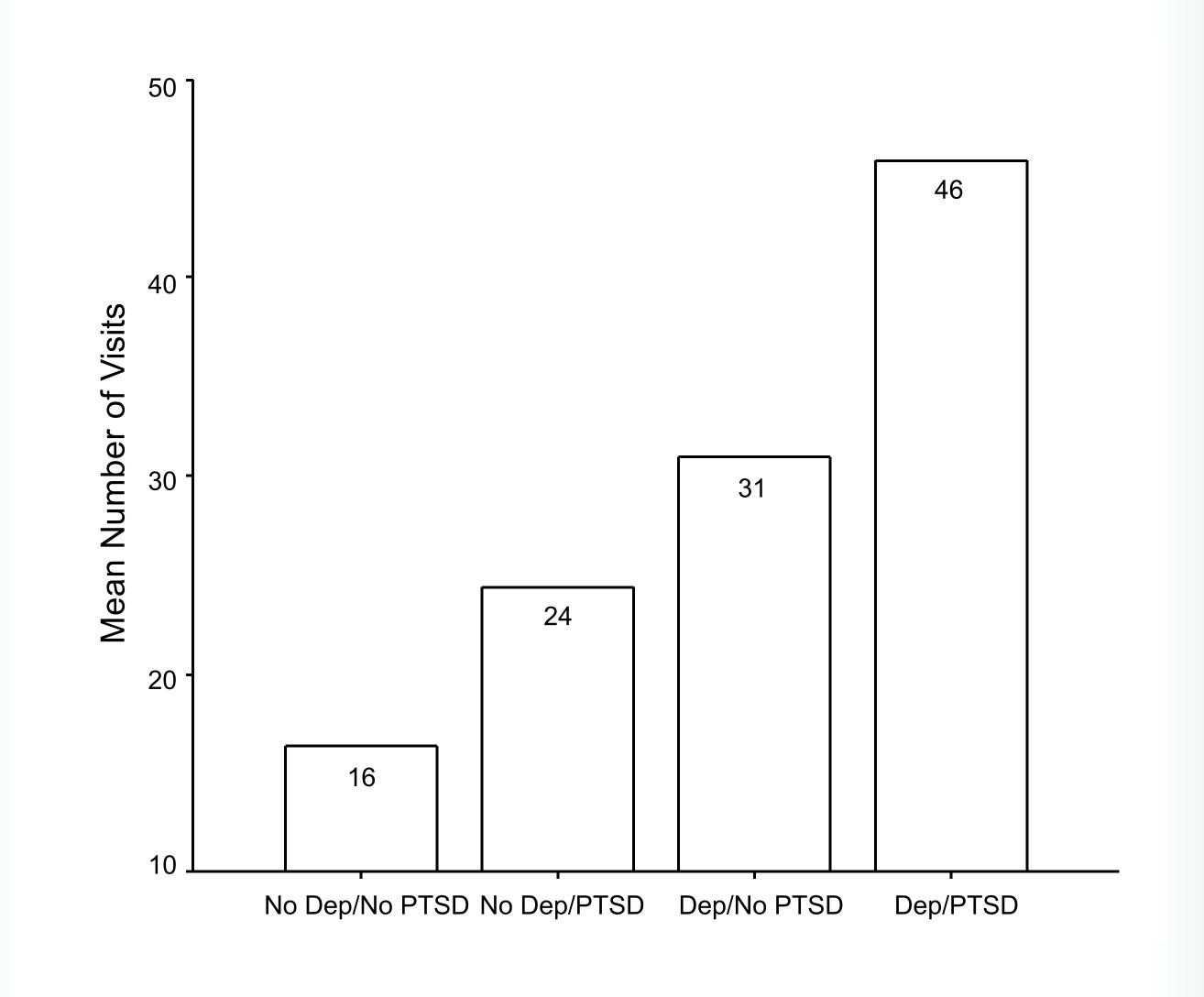


Table 1. Mean and standard deviation of trips to different health care professionals across all groups (Highlighted columns are where significant differences exist).

	General Practitioner	Specialist	Nurse	Dentist	Optometrist	Pharmacist	Physiotherapist	Chiropractor	Mental Health Professional	Alternative Health Practitioner	Other Health Professional
Group											
No Dep/No PTSD	4.01(3.21) <sup>1</sup>	1.70(4.59) 1	0.67(2.89)	1.20(1.57)	0.54(1.07)	4.48(4.36)	1.63(4.35)	0.81(3.23)	0.74(5.54) 1	0.45(2.68)	0.24(0.98)
No Dep/PTSD	6.26(4.16) <sup>1</sup>	2.26(2.85) 1	0.83(2.88)	1.58(3.20)	0.42(0.61)	$6.26(3.92)^{1.2}$	0.89(2.40)	1.63(5.82)	$3.26(7.09)^{1}$	0.95(2.12)	0.11(0.46)
Dep/No PTSD	7.25(7.6) <sup>1,2</sup>	$2.60(4.03)^{1}$	1.31(3.84)	1.56(2.33)	0.84(1.98)	$8.58(8.15)^{2,3}$	3.21(9.13)	2.19(5.92)	1.28(3.23) 1,2	2.21(6.45)	0.70(2.15)
Dep/PTSD	10.14(10.32) <sup>2</sup>	6.93(9.92) <sup>2</sup>	1.88(4.28)	1.45(1.99)	0.81(1.21)	11.41(10.11) <sup>3</sup>	3.57(8.70)	1.71(4.99)	6.38(10.78) <sup>2</sup>	2.56(6.78)	0.64(1.51)

Columns with different superscripts are significantly different at p < .05