

Mode of use

The clinician should discuss the reasons for completing the questionnaire, and the way to fill it out with the patient. On completion of the questionnaire by the patient, it is scored by the clinician.

Scoring and interpretation

Pfizer and others have suggested the use of a simpler proxy system of scoring to estimate diagnostic categories. This is explained by the website created by the MacArthur Initiative on Depression and Primary Care⁹. This site includes also information concerning making a tentative diagnosis, a guide for severity scoring, a provisional diagnosis table, and a treatment response table for primary care clinicians^{10,11,12,13}.

The maximum score is 27 (9 questions x maximum 3 points per question). A patient's score is given out of 27. Depression severity is graded based on the PHQ-9 score:

- | | |
|---------------------|-------|
| ▪ None | 0-4 |
| ▪ Mild | 5-9 |
| ▪ Moderately | 10-14 |
| ▪ Moderately severe | 15-19 |
| ▪ Severe | 20-27 |

Validity and reliability

The PHQ-9 has been tested for validity and reliability in a range of languages. It has been validated also for use in a variety of populations, e.g. systematic sclerosis, depression in HIV/AIDs patients, and depression in diabetes patients^{14,15,16,17}.

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