Major Depressive Disorder (MDD) is a severe mental health condition affecting a substantial proportion of the adult population, reaching approximately 340 million people worldwide, and is a leading cause of disability, with disproportionate impact on women. Because depression primarily experienced subjectively, and the severity of MDD symptoms is directly related to the degree of impact that patients experience, the assessment of depressive symptoms is an essential endpoint for clinical studies, particularly where the clinical indicators will be limited. By contrast, patients with MDD through qualitative interviews, it is possible to better understand and document the specific depression-related concepts that are relevant to the patient as well as understand the patient’s assessment of improvement in his or her condition. 1, 2

Ultimately, a well-developed instrument that has fully established content validity (supported by qualitative data) will be expected to demonstrate greater sensitivity in clinical studies of treatment benefit.

Prior to conducting the qualitative interview a systematic review was conducted to evaluate existing depression symptom instruments 3 as well as previously published qualitative data. 4

The systematic review of qualitative data helped to inform the development of the qualitative interview.

The systematic review of existing instruments helped to assure their content validity, measurement properties, and explored the extent to which existing measures were developed with direct input from patients. Systematic reviews of existing instruments could provide the basis for qualification or modification.

Objectives:

- Complete qualitative concept elicitation and cognitive interviews with subjects diagnosed with major depressive disorder (MDD) and to support preliminary development of a patient-reported outcome (PRO) measure to assess treatment benefit in MDD clinical trials.

Methods:

Study Population
- Recruitment was designed to enroll a diverse sample of patients similar to that which will be enrolled in the PRO instrument in future clinical trials of MDD treatments.

- No formal recruitment quotas were employed, each site targeted recruitment of a mixed sample of patients with varying degrees of MDD treatment histories, as well as broad representation across demographic characteristics including age, race, ethnicity, marital status, and educational attainment and employment status.

- Subjects were recruited from 6 U.S. clinical sites (CT; N, OK, WI).

- The eligibility criteria for the target population were designed to reflect common criteria for clinical trials in major depression:

  - Inclusion Criteria: Males and females between the ages of 18 to 65 inclusive, who met DSM IV-TR criteria for MDD; and were being treated on an outpatient basis; had experienced a major depressive episode within the previous 6 months; and had a Hamilton Rating Scale for Depression (HAM-D) score of 18 at the time of screening

- Exclusion Criteria: Current or past history of a personality disorder; schizophrenia or other psychotic disorder; or post-traumatic stress disorder; significant risk of suicide; urine drug screen or clinically significant alcohol abuse or drug use.

- Concept elicitation (CE) Interviews

- Semi-structured qualitative interviews 5 were conducted by trained research staff with a representative sample of adult MDD patients whose the recent experience a major depressive event.

- Interviews followed a pre-approved interview guide and used an open-ended, semi-structured design to encourage subjects to spontaneously report symptoms of impact/concepts.

- Subsequent interviews were conducted to ensure that no new symptoms were spontaneously reported by subjects. Subjects were asked about the severity and level of bother or difficulty for reported symptoms and impacts.

- To guide item development, subjects were asked about the frequency and severity of the symptoms, or duration of each concept.

- Content Analysis

- All interview sessions were audio recorded and transcribed.

- The concept elicitation interview transcripts were analyzed and trained by guiding concepts using Atlas.ti. It was, and were summarized by-like content using an iterative coding framework.

- Codes were grouped by similarity of content and analyzed to identify the most relevant approximations and most common concepts.

- A Saturation Grid was used to track symptoms and impacts expressed during the interviews and assess saturation of concept.

- Transcripts were ordered chronologically in groups of 8 transcripts.

- Qualitative interviews have provided evidence for content validity.

- Other minor instrument formatting and wording modifications were made based on the results of a formal pilot study demonstrating that the instrument was reliable (PRoM is reliable).

- The newly developed PRO instrument is intended for use as an ePRO measure.

- The findings from the TA process were used to make revisions to the PRO measure intended for use as an ePRO measure.

- All interview sessions were audio recorded and transcribed.

- Over the three waves, one item was removed and four others were substantially modified based on cognitive interview findings 6

- The newly developed PRO instrument is intended for use as an ePRO measure.

- The newly developed PRO instrument is intended for use as an ePRO measure.

- The newly developed PRO instrument is intended for use as an ePRO measure.