

Tailoring to fit: CIDI-depression in the LIDO study

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Longitudinal Investigation of Depression Outcomes

LIDO

background

To explore the relationship between major depression and quality of life and resource use among primary care patients, a multi-centre, cross-cultural study was started in 1998.

In this study - the *Longitudinal Investigation of Depression Outcomes (LIDO)* - respondents from sites in Israel, Spain, Russian Federation, Brazil, Australia and United States are selected for enrolment when qualifying for current major depression. For this purpose the *CIDI* is used.

The CIDI - *Composite International Diagnostic Interview* - is a fully structured psychiatric interview, assessing clinical disorders according to the definitions and criteria of the Diagnostic and Statistical Manual of Mental Disorders (DSM) and International Classification of Diseases (ICD). Since its first publication (WHO, 1990), the CIDI has undergone several revisions to accommodate the changes in the classification systems and to better fit its users needs, by providing:

- DSM-IV and ICD-10 coverage
- lifetime and 12-month versions
- paper-and-pencil and computerised format

Recent initiatives include the development of a CIDI Short Form and a version assessing "current" psychopathology.

At present the CIDI 2.1 (WHO, 1997) is available in 25 languages, supported by 10 centres around the world. These centres conduct standardised training programs, using comprehensive training materials developed under supervision of the World Health Organization. In previous studies (see Andrews & Peters, 1998) the inter-rater reliability, test-retest reliability and validity of the CIDI have been demonstrated to be good to excellent.

The use of the CIDI for assessing current depression in the LIDO study required augmenting existing CIDI materials.

methods

Using the CIDI 2.1 12-month Depression section for the LIDO study meant:

- expanding the section to assess current depressive symptoms
- adapting the data entry program, diagnostic algorithms and training
- devising a procedure for enhancing and monitoring quality control across sites.

references

Andrews, G. & Peters, L. (1998).

The psychometric properties of the Composite International Diagnostic Interview. *Social Psychiatry and Psychiatric Epidemiology*, **33**, 80-88.

World Health Organization (1990).

Composite International Diagnostic Interview - Core Version 1.0. Geneva: Author.

World Health Organization (1997).

Composite International Diagnostic Interview - Core Version 2.1. Geneva: Author.

results

CIDI Depression section:

Preserving the original structure and questions of the CIDI 2.1 12-month Section E, adaptations for the LIDO Study were made by:

- adding a column to assess last month symptoms
- adding interviewer instructions where necessary
- adding questions assessing history of prior treatment for depression
- developing of a hand-scoring form for inclusion/exclusion of subjects.

CIDI data entry and diagnostic algorithms:

Adaptations for data entry and scoring included:

- expanding the data entry program to include added questions
- developing SPSS syntax and system files to facilitate data entry
- extending the original 12-month algorithms to score current depression.

Quality control:

To enhance and control the quality of the interviews and of the collected data, several steps were taken:

- controlled multi-site translation process
- using original CIDI translations if available
- developing new translations according to CIDI Advisory Committee guidelines
- keeping augmentations in line with original structure/questions
- standardised CIDI training, including
 - one WHO-qualified CIDI trainer for all sites
 - official WHO-CIDI training materials
 - live practice scenarios focussing on the Depression section
 - interviewer manual and instruction tapes for reference
- site designated quality control monitor
 - reviewing audio-taped interviews of all interviewers on a regular basis
 - correcting discrepancies
 - reporting to co-ordinating centre on a regular basis
 - regular intra-site feedback/discussion sessions
- inter-site CIDI quality monitor meetings
- CIDI helpdesk.

conclusions

Many studies require a tailoring of the instruments selected to better fit the study's purposes. Recent advances in the CIDI show a development of computerised and 12-month versions, and initiatives towards a "Short Form" and a "current" version. Anticipating these new developments and to fit the study's need to assess current major depression, in the LIDO study the CIDI 2.1 12-month Depression section and its related materials were augmented and adapted. All materials were extensively checked and tested before the actual data collection started and proved to be adequate. As such, the results of this study show that it is possible and useful to adapt original CIDI materials and standardised training to fit a study's specific purposes.

Combining CIDI data and data gathered with other instruments used in the LIDO study will be used to investigate the validity of this "current depression" module, and of CIDI's operationalisation of DSM-IV and ICD-10 criteria for Major Depression and Dysthymia.



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