

National Ambulatory Medical Care Survey

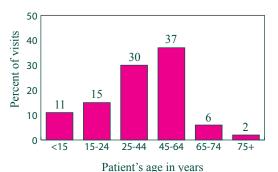
Factsheet

PSYCHIATRY

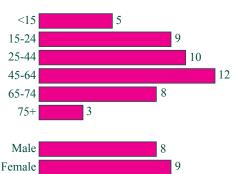


In 2010, there were an estimated 26 million visits to nonfederally employed, office-based psychiatrists in the United States. Two-thirds of the visits were made by persons 25–64 years of age.

Percent distribution of office visits by patient's age: 2010



Annual office visit rates by patient's age and sex: 2010



Number of visits per 100 persons per year

Expected source(s) of payment included:

- Private insurance 39%
- No insurance 24%
- Medicaid/CHIP 17%
- Medicare 15%

The major reason for visit was:

- Chronic problem, routine 83%
- Chronic problem, flare-up 9%
- New problem 4%

The top 4 reasons given by patients for visiting psychiatrists were:

- Medication
- Progress visit
- Depression
- Anxiety and nervousness

The top 5 diagnoses were:

- Major depressive disorder, single episode
- Depressive disorder
- Attention deficit disorder
- Manic depressive psychosis
- General anxiety disorder

Medications were provided or prescribed at 84 percent of office visits. The top 5 generic substances utilized were:

- Clonazepam
- Quetiapine
- Bupropion
- Amphetamine Dextroamphetamine
- Alprazolam

For more information, contact the Ambulatory and Hospital Care Statistics Branch at 301-458-4600 or visit our Web site at <www.cdc.gov/namcs>.



¹ No insurance is defined as having only self-pay, no charge, or charity visits as payment sources.

NAMCS data are widely used in research studies appearing in nationally recognized medical journals, including *JAMA*, *Archives of General Psychiatry* (renamed *JAMA Psychiatry*), and the *American Journal of Psychiatry*. Here are a few recent publications using NAMCS data:

Tran AR, Zito JM, Safer DJ, Hundley SD. National trends in pediatric use of anticonvulsants. *Psychiatr Serv*. Sep 2012. [Epub ahead of print]

Payne TJ, Chen CI, Baker CL, Shah SN, Pashos CL, Boulanger L. National Ambulatory Medical Care Survey: tobacco intervention practices in outpatient clinics. *Psychol Addict Behav.* 26(3):644-648. Sep 2012.

Sclar DA, Robison LM, Schmidt JM, Bowen KA, Castillo LV, Oganov AM. Diagnosis of depression and use of antidepressant pharmacotherapy among adults in the United States: does a disparity persist by ethnicity/race? *Clin Drug Investig*. 32(2):139-144. Feb 2012.

Lukachko A, Olfson M. Race and the clinical diagnosis of depression in new primary care patients. *Gen Hosp Psychiatry*. 34(1):98-100. Jan-Feb 2012.

Reeves WC, Strine TW, Pratt LA, Thompson W, Ahluwalia I, Dhingra SS, McKnight-Eily LR, Harrison L, D'Angelo DV, Williams L, Morrow B, Gould D, Safran MA; Public Health Surveillance Program Office. Mental illness surveillance among adults in the United States. *MMWR Surveill Summ*. 60 Suppl 3:1-32. Sep 2011.

Lagomasino IT, Stockdale SE, Miranda J. Racial-ethnic composition of provider practices and disparities in treatment of depression and anxiety, 2003-2007. *Psychiatr Serv.* 62(9):1019-1025. Sep 2011.

Mojtabai R. Does depression screening have an effect on the diagnosis and treatment of mood disorders in general medical settings? An instrumental variable analysis of the National Ambulatory Medical Care Survey. *Med Care Res Rev.* 68(4):462-489. Aug 2011.

Hankerson SH, Fenton MC, Geier TJ, Keyes KM, Weissman MM, Hasin DS. Racial differences in symptoms, comorbidity, and treatment for major depressive disorder among black and white adults. *J Natl Med Assoc*. 103(7):576-584. Jul 2011.

Rost K, Hsieh YP, Xu S, Menachemi N, Young AS. Potential disparities in the management of schizophrenia in the United States. *Psychiatr Serv.* 62(6):613-618. Jun 2011.

Harrison DL, Miller MJ, Schmitt MR, Touchet BK. Variations in the probability of depression screening at community-based physician practice visits. *Prim Care Companion J Clin Psychiatry*. 12(5). 2010.

Jameson JP, Blank MB. Diagnosis and treatment of depression and anxiety in rural and nonrural primary care: national survey results. *Psychiatr Serv.* 61(6):624-627. Jun 2010.

A complete list of publications using NAMCS data, which includes articles and reports, can be found at our Web site: http://www.cdc.gov/nchs/ahcd/ahcd_products.htm