

Mental Health Medications in the U.S., by the Numbers



Taking a prescription drug to treat a mental health condition is common.

About **1 in 5 U.S.** adults experience a mental health condition in a given year.¹

1 in 6 American adults take a psychiatric drug at least once in a given year.²

There are several key types of psychiatric medications.



Of U.S. adults taking mental health medications:

- **12.7%** report taking an antidepressant like Zoloft, Celexa, or Prozac, in a given month.⁵
- **8%** take a sedative, hypnotic, or anti-anxiety drug like Xanax, Valium, or Klonopin.
- **1.6%** take an antipsychotic medication such as Abilify, Seroquel, or Zyprexa.



Employers pick up the tab.

Large U.S. employers spent at least **\$6 billion** on members’ psychiatric medications in 2016.

Employer-based health plans comprise the largest share of spending on prescription drugs in the U.S., at **42%**.⁹

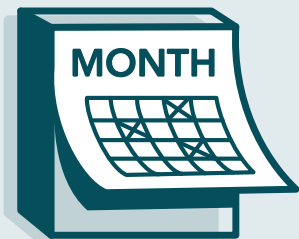


Getting an appointment with a trained mental health doctor is tough.

4 out of 5 patients get a psychiatric RX from a primary care doctor, whose mental health training may be limited.³

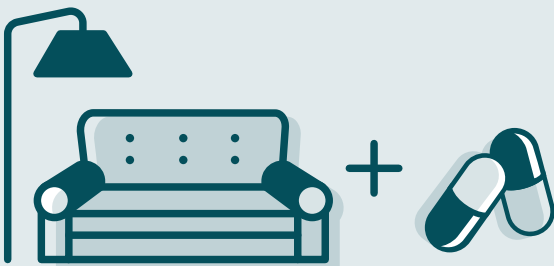
Just 7% of psychiatrists in large health networks take new patients and have appointments available in 2 weeks.⁴

Many patients don’t take antidepressants as prescribed.



Anywhere from **33-53%** of patients stop taking medication before the drugs are fully effective.^{6, 7}

Positive attitudes toward medications, plus better doctor-patient communications, can improve adherence.⁸



A combination of therapy and medication appears to work better than medication alone.

In one study, combining therapy & medications was **30%** more effective in treating depression.¹⁰

¹ National Institute of Mental Health, Mental Illness, Mental Health Information Statistics, Retrieved Jan. 17, 2020 from <https://www.nimh.nih.gov/health/statistics/mental-illness.shtml>

² Moore, T.J. & Mattison, D.R. (2017). Adult Utilization of Psychiatric Drugs and Differences by Sex, Age, and Race. JAMA Intern Med. 177(2):274-275.Retrieved Jan. 17, 2020 from <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2592697>

³ Faghri, N.A., Boisvert, C.M, & Faghri, S. (2010). Understanding the expanding role of primary care physicians: enhancing the assessment and treatment of psychiatric conditions. Ment Health Fam Med. 7(1): 17–25. Retrieved Jan. 17, 2020 from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2925161/>

⁴ Blech, B., West, J.C., Yang, Z., Barber, K.D., Wang, P, & Coyle, C. (2017). Availability of Network Psychiatrists Among the Largest Health Insurance Carriers in Washington, D.C. Psychiatr Serv. 68(9):962-965. Retrieved Jan. 17, 2020 from <https://www.ncbi.nlm.nih.gov/pubmed/28457210>

⁵ Pratt, L.A., Brody, D.J., Gu, Q., (2017). Antidepressant Use Among Persons Aged 12 and Over: United States, 2011–2014. NCHS Data Brief No. 283. Retrieved Jan. 17, 2020 from <https://www.cdc.gov/nchs/products/databriefs/db283.htm>

⁶ Pampallona, S., Bollini, P., Tibaldi, G., Kupelnick, B., Munizza, C. (2002). British Journal of Psychiatry,180(2), 104-109. Retrieved Jan. 17, 2020 from <https://www.cambridge.org/core/journals/the-british-journal-of-psychiatry/article/patient-adherence-in-the-treatment-of-depression/D1E0018DE9F9FB948E13B668FA8B817C/core-reader>

⁷ Demyttenaere, K., Enzlin, P., Dewé, W., Boulanger, B., De Bie, J., De Troyer, W, Mesters, P. (2001). Compliance with antidepressants in a primary care setting, 1: Beyond lack of efficacy and adverse events. J Clin Psychiatry. 22:30-3. Retrieved Jan. 17, 2020 from <https://www.ncbi.nlm.nih.gov/pubmed/11599645>

⁸ Samples, H., & Mojtabai, R. (2015). Antidepressant self-discontinuation: results from the collaborative psychiatric epidemiology surveys. Psychiatr Serv, 66(5), 455-462. Retrieved Jan. 17, 2020 from <https://www.ncbi.nlm.nih.gov/pubmed/25930223>

⁹ Cuijpers, P., Dekker, J., Hollon, SD, & Andersson, G. (2009). Adding psychotherapy to pharmacotherapy in the treatment of depressive disorders in adults: a meta-analysis. J Clin Psychiatry. (9):1219-29. Retrieved Jan. 17, 2020 from <https://www.ncbi.nlm.nih.gov/pubmed/19818243>

¹⁰ Cubanski, J., Rae, M., Young, K., & Damico, A., (2019). How does prescription drug spending and use compare across large employer plans, Medicare Part D, and Medicaid? Peterson-Kaiser Health System Tracker. Retrieved Jan. 17, 2020 from <https://www.kff.org/medicare/issue-brief/how-does-prescription-drug-spending-and-use-compare-across-large-employer-plans-medicare-part-d-and-medicaid/>