



# Incidence trends for 37 mental disorders in adults in outpatient care – developments between 2015 and 2022 with a focus on schizophrenia, depression, tobacco-related and somatoform disorders as well as sleep and personality disorders

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## Abstract

### Background

Mental disorders are increasingly leading to incapacity for work and reduced earning capacity pensions and therefore have not only individual but also considerable economic consequences. There is little data on the population-related risk of newly diagnosed mental disorders or on the entire spectrum of these diagnoses and their development over time. The aim of this study was to close this gap by using a standardized approach and thus provide both nationwide and small-scale incidence trends for Germany for a broad spectrum of mental and behavioral disorders for the period 2015 to 2022.

### Methods

The crude and age-standardized cumulative incidence per 10,000 persons with statutory health insurance (SHI) aged 18 and over was calculated for 37 diagnosed mental and behavioral disorders after a two-year diagnosis-free observation period on the basis of the billing data from SHI-accredited physicians and psychotherapists in accordance with Section 295 of the Fifth Book of the German Social Code (SGB V; Q1/2013-Q3/2023). The populations at risk for ICD-10 subsections F1-F6 for each reporting year (2015-2022) were SHI-insured persons aged 18 and over for whom no diagnosis from the respective ICD-10 subsection was documented in the previous two-year observation period. The diagnoses were validated either via a diagnosis marked as “assured” and at least one confirmatory diagnosis coding in one of the three patient-related follow-up quarters or in connection with a specific billed service of the Uniform Value Scale. For the years 2020 to 2022, the observed incidence was also compared with the expected incidence trend based on the values of the pre-pandemic period. Crude and age-standardized incidence values are also reported at the level of the Associations of Statutory Health Insurance Physicians (N=17) as well as of districts and independent cities (N=401, as of 31.12.2016). The standard population for the direct age standardization was the German population aged 18 and over (reference date: 31.12.2022).

## Results

In 2022, around 7.5 out of 60.9 million SHI-insured persons aged 18 and over had at least one mental or behavioral disorder from the F10-F99 diagnosis range documented for the first time after two years without a diagnosis. Special focus was given to the most common disorders of the ICD-10 subsections F1-F6. In 2022, the crude cumulative incidence of the 37 diagnoses or diagnosis groups examined ranged from 3.3 for acute transient psychotic disorders (F23) to 598.2 for reactions to severe stress and adjustment disorders (F43) per 10,000 SHI-insured persons aged 18 and over at level of the ICD-10 three-digit codes. The crude cumulative incidence for the six mental disorders in the focus of the report was as follows in 2022: For tobacco-related mental and behavioral disorders (F17), it was 133/10,000 SHI-insured persons aged 18 and over (+7.5 % compared to 2015), for schizophrenia (F20) 7 (-12 %), for depressive disorders (F32, F33) 434 (-11 %), for somatoform disorders (F45) 567 (-15 %), for non-organic sleep disorders (F51) 56 (+27 %) and for specific personality disorders 28 (-26 %). For almost all diagnoses under study, there were both sex- and age-group-specific differences in the risk of newly diagnosed cases. In addition, there were considerable regional differences for some of the diagnoses or diagnosis groups, respectively.

## Conclusion

This study is the first to provide findings on incidence trends over an eight-year period for a broad spectrum of mental and behavioral disorders for the adult population with statutory health insurance in Germany. Against the background of a lack of evidence about the population-related risk of new cases of mental disorders from primary surveys over the last decade, the results close a knowledge gap about the development of mental health in the population. The results at hand can form a basis for discussion for the further development of psychotherapeutic care in particular.

## Keywords

adaptive disorders; affective disorders; alcohol; anorexia; anxiety disorders; bipolar disorders; bulimia; cannabis; claims data; delusional disorders; depressive disorders; eating disorders; gambling addiction; impulsive control disorder; incidence; insomnia; mania; mental disorders; mood disorders; pain disorders; personality disorders; phobia; schizophrenia; sleep disorders; somatoform disorders; stress disorders; substance-related disorders; tobacco, trend

## Citation

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