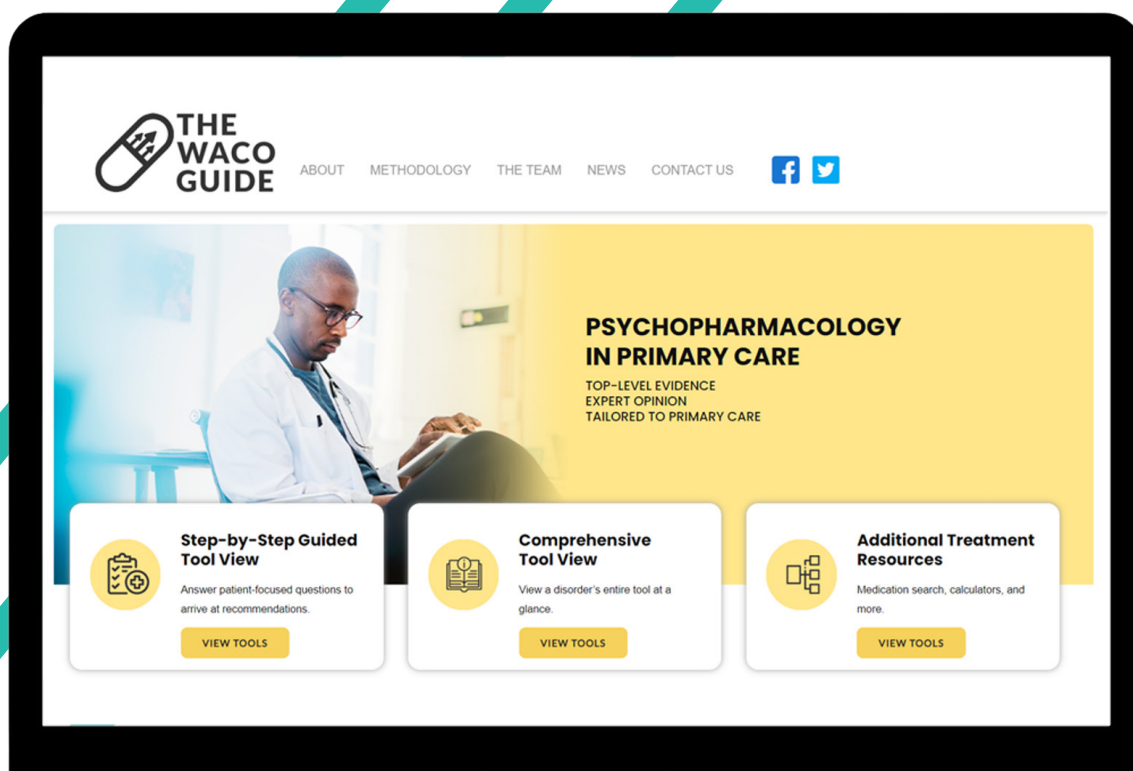




THE WACO GUIDE

TO PSYCHOPHARMACOLOGY IN PRIMARY CARE



**TOP-LEVEL EVIDENCE.
EXPERT OPINION.
TAILORED TO PRIMARY CARE.**

The Waco Guide to Psychopharmacology in Primary Care addresses the growing need for behavioral healthcare delivery by offering an extensive library of 100+ clinical decision support tools for the psychopharmacologic treatment of common and complex mental and behavioral health disorders, including substance use disorders. These tools are designed to complement clinical practice by providing busy primary care clinicians with the best available evidence to make impactful treatment decisions. The Waco Guide was developed entirely free of pharmaceutical industry funding by faculty of the Waco Family Medicine Residency in consultation with faculty of the Massachusetts General Hospital Psychiatry Academy.

Behavioral Health Needs in Primary Care

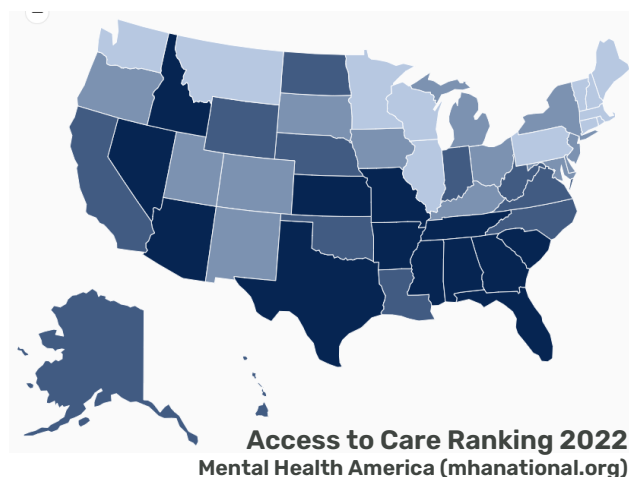
Primary care is the de facto mental health system in the United States. Primary care clinicians serve most patients who receive treatment for mental illness and prescribe a majority of psychotropic medications (1, 2). An epidemic level of mental and behavioral health disorders exists, with one in five individuals receiving a diagnosis of mental illness yearly (3, 4). The volume of mental illness is increasing and will accelerate further due to the impact of the COVID-19 pandemic (5,6).

Despite the enormity of the mental health burden, two-thirds of family medicine clinicians lack access to mental and behavioral specialty services (7). This care gap is amplified further in rural and underserved communities where specialty support is in critical shortage (8). Moreover, there are concerns regarding the quality of care in this context. Primary care clinicians are less likely to deliver guideline-concordant care and more likely to report discomfort with prescribing psychotropic medications (9-11).

Care Shortages in Texas

In Texas, access to mental health care is in critical shortage:

- Texas ranks last in the U.S. for access to mental health treatment (12)
- Two-thirds of counties do not have a psychiatrist
- 43 border region counties are federally designated as medically underserved areas (13)



Waco Family Medicine's Behavioral Health Innovation

Waco Family Medicine recognized the discrepancy between mental health needs and primary care providers' ability to manage this need, particularly in the realm of psychopharmacology. To address this challenge, there are two resources from which inspiration was drawn:

1

The Institute of Medicine provides a blueprint for high-quality care in their report *Crossing the Quality Chasm*, which includes advocacy for clinical practice tools that allow practitioners to apply the best available knowledge to medical decision making (14).

2

A vital element of the chronic care model developed by E.H. Wagner is the improved application of evidence-based clinical guidelines. This element focuses on increasing access to expert-level knowledge by integrating guidelines into the fabric of clinical practice (15-17).

Drawing from the principles of these models, Waco Family Medicine developed a growing library of 100+ clinical decision support tools for the psychopharmacologic treatment of common and complex mental and behavioral health disorders. These tools, collectively deemed *The Waco Guide to Psychopharmacology in Primary Care*, complement clinical practice and provide primary care clinicians with the best available evidence to make treatment decisions.

TOOL FEATURES

Patient-centered algorithms based on age, comorbidities, and other special populations.

Recommendations for first-, second-, and third-line pharmacotherapy; augmentation options; titration schedules; and potential side effects.

Strength of recommendation ratings assigned for specific areas of the tools using the strength of recommendation taxonomy (SORT) (18)

Key Priorities for The Waco Guide

Reliable	top-level evidence and expert opinion, informed by real world primary care experience
Succinct	without compromising quality
Cost	respect to clinician cost and funding sources
Scope	adult, pediatric, perinatal, geriatric, and special populations
Ethical	not pharmaceutical industry funded

Featured by Major Medical Associations

The Waco Guide has been featured by the American Medical Association (AMA) Behavioral Health Integration (BHI) Collaborative. The AMA along with seven other leading physician organizations established the BHI Collaborative to catalyze effective and sustainable integration of behavioral and mental health care into clinical practices. The American College of Physicians (ACP) has also featured The Waco Guide on its website as a resource for effectively integrating behavioral healthcare into the primary care context.



Empirically Supported

Decision support tools such as The Waco Guide have shown promise in research studies as a means to implement evidence-based prescribing practices for behavioral health disorders (19). In fact, a 2024 study published in *Academic Psychiatry* demonstrates the effectiveness of The Waco Guide in improving clinician's confidence and comfort in treating behavioral health disorders (20).



Goals for Continued Development

Continuous tool review

- full review of each tool every two years
- continuous review consultation with Massachusetts General Hospital
- Visiting biweekly

New tool development

- nonpharmacologic protocols
- neurocognitive symptoms of dementia
- stimulant side effect management
- neonatal opioid withdrawal syndrome

"The Waco Guide is the most comprehensive and evidence-based clinical decision tool for primary care I've seen. I frequently use it when discussing cases with primary care physicians. A job well done to the [Waco Guide team] for their efforts in improving behavioral health treatment in this area."

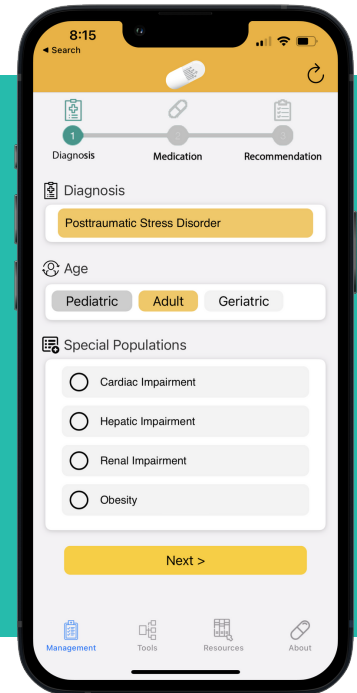
JOSHUA J. WARREN, MD

Child and Adolescent Psychiatry, Providence DePaul Clinic

"I am impressed by the depth, breadth, and comprehensibility of the Waco Guide."

GREGORY ACAMPORA, MD, PSYCHIATRY

Massachusetts General Hospital Psychiatry Academy
Assistant Professor of Psychiatry, Harvard Medical School



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