



Title **Treatment of Depression**

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Reference SBU Report 166, 2004, ISBN: Volume 1 91-87890-87-9, Volume 2 91-87890-88-7, Volume 3 91-87890-94-1, Summary and Conclusions in English, and full text report in Swedish are available on www.sbu.se

Aim

To investigate the evidence for methods of treating depression. Economic aspects were considered.

Conclusions and results

Partial list:

- The treatment goal should be full recovery. This can be accomplished for most patients, provided that the various treatments are applied systematically.
- Many antidepressive drugs and several psychotherapies have well documented effects in treating adults.
- Treatment effects are similar for all antidepressive drugs in treating mild and moderate depression.
- Several psychotherapies are as effective as tricyclic antidepressants and are probably as effective as SSRIs in acute treatment of mild and moderate depression.
- The risk for relapse is high unless treatment is continued at least for 6 months after the disappearance of symptoms.
- Antidepressive drugs are shown to be more effective than psychotherapies in treating dysthymia.
- There is no evidence that phototherapy is more effective than placebo in treating seasonal affective disorder.

Methods

This systematic review covers literature up to summer 2003. A protocol was developed to assess the studies. Only RCTs were included for pharmaceutical studies. Controlled studies without randomization were accepted for psychotherapies. Electronic databases were used in the primary search for literature and were supplemented by manual searches, reference lists, etc. The reviewers followed the protocol to rate the quality and internal validity of each study. The scientific evidence for each conclusion was based on the number of studies with high quality and internal validity.

Further research/reviews required

- Studies of treatment effects in the elderly (>80 years)
- Studies of long-term treatment of children and adolescents (>10 weeks); both psychotherapy and antidepressive drugs
- Studies of maintenance treatment after successful ECT (electroconvulsant therapy)
- Studies of treatment of bipolar disorder.