



National Institute for Health and Clinical Excellence

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PRESS RELEASE

NICE issues updated guidance on the treatment and management of depression

The National Institute for Health and Clinical Excellence (NICE) has today (28 October) published guidance on the treatment and management of depression in adults. This new guideline updates previous NICE guidance on depression (CG23) issued in 2004.

Depression is a common condition. It affects nearly 1 in 6 people in the UK at some point in their lives. Depression may have no obvious cause, or it can be set off for a variety of reasons (such as physical illness, or difficult things that happened in the past or may be happening now, like bereavement, family problems or unemployment). People may have just one episode of depression. However, about half of people who have had an episode of depression will go on to have further episodes. Most people will feel better within 4 to 6 months of an episode of depression, while others experience symptoms for much longer.

The main symptoms of depression are loss of pleasure in things that were once enjoyable and loss of interest in other people and usual activities; it is often accompanied by irritability or tiredness, feelings of worthlessness and suicidal thoughts, and problems with sleep, concentration and memory. It is a serious illness which results in more deaths than any other psychiatric disorder, can have a significant impact on a person's quality of life and presents a significant burden for individuals, families and society.

This guideline, produced for NICE by the National Collaborating Centre for Mental Health, makes recommendations on the identification, treatment and management of depression in adults in both primary and secondary care.

Recommendations for those involved in the treatment and management of depression include:

- **Case identification and recognition** - Be alert to possible depression (particularly in people with a past history of depression or a chronic physical health problem).
- **Low-intensity psychosocial interventions** - For people with persistent sub threshold depressive symptoms or mild to moderate depression, consider offering one or more of the following interventions, guided by the person's preference:
 - individual guided self-help based on the principles of cognitive behavioural therapy (CBT)¹
 - computerised cognitive behavioural therapy (CCBT)
 - a structured group physical activity programme.
- **Drug treatment** - Do not use antidepressants routinely to treat persistent sub threshold² depressive symptoms or mild depression, but consider them for people with: a past history of moderate or severe depression **or** initial presentation of sub threshold depressive symptoms that have been present for a long period (typically at least 2 years) **or** sub threshold depressive symptoms or mild depression that persist(s) after other interventions.
- **Treatment for moderate or severe depression** - For people with moderate or severe depression, provide a combination of antidepressant medication and a high-intensity psychological intervention such as Cognitive Behavioural Therapy (CBT).
- **Continuation and relapse prevention** - Support and encourage a person who has benefited from taking an antidepressant to continue medication for at least 6 months after remission of an episode of depression. Discuss with the person that this greatly reduces the risk of relapse and antidepressants are not associated with addiction.
- Counselling is now only recommended for people with persistent sub threshold depressive symptoms or mild to moderate depression who decline

an antidepressant, CBT, IPT, behavioural activation and behavioural couples therapy

Professor Steve Pilling Director, National Collaborating Centre for Mental Health; Director, Centre for Outcomes Research and Effectiveness, University College London said: "Depression is a complex disorder which for many people can become chronic with serious long-term consequences for their mental and physical health. This is clearly acknowledged in the guideline, which recommends an increased range of effective treatment options. By updating the NICE guideline on the treatment and management of depression, we aim to ensure that patients continue to receive the best possible care, by improving identification of the condition and increasing the choice of treatment."

Professor Ian Anderson, Professor of Psychiatry, University of Manchester and Chair of the Guidance Development Group (GDG) said: "The treatment of depression can be difficult. Everyone who has depression has their own story and their treatment needs to be individually tailored for them. These guidelines offer choice and will support doctors and those with depression to find the best treatment for them. Good communication between doctors and their patients is essential and the decision as to which treatments to use should be a decision made in partnership."

Dr David Kessler, GP and Walport Clinical Lecturer in Primary Care, Bristol University said: "Depression is a common condition and 1 in 6 people in the UK will be affected by it. However, there are things that can help, from increasing activity and exercise, through psychological treatment and drug treatment. What this guidance recommends is a broad approach, ensuring that the treatment offered is the most suitable for the individual. "

Ends

For more information call Alice Law on 020 7045 2176 or the NICE press office on 0845 003 7782 or 07775 583 813.

Notes to Editors

About the guidance

1. The guidance 'Depression: the treatment and management of depression in adults' is available at: www.nice.org.uk/CG090 .
2. NICE has also published today (28 October) guidance on the treatment and management of depression in adults with chronic physical health problems. www.nice.org.uk/CG091.
3. Depression definitions (taken from DSM-IV)

² Sub threshold depressive symptoms: Fewer than 5 symptoms of depression.

Mild depression: Few, if any, symptoms in excess of the 5 required to make the diagnosis, and symptoms result in only minor functional impairment.

Moderate depression: Symptoms or functional impairment are between 'mild' and 'severe'.

Severe depression: Most symptoms and the symptoms markedly interfere with functioning. Can occur with or without psychotic symptoms.

4. ¹ Cognitive Behaviour Therapy - CBT is based on the idea that the way we feel is affected by our thoughts and beliefs and by how we behave. People with depression tend to have negative thoughts (such as 'I am a failure'), which can lead to negative behaviour (such as stopping doing things that used to be pleasurable). CBT encourages people to engage in activities and to write down their thoughts and problems. It helps them to identify and counteract negative thoughts.
5. This guideline covers people whose depression occurs as the primary diagnosis; the relevant NICE guidelines should be consulted for depression occurring in the context of other disorders:
 - Borderline personality disorder. NICE clinical guideline 78 (2009). www.nice.org.uk/CG78
 - Antenatal and postnatal mental health. NICE clinical guideline 45 (2007). www.nice.org.uk/CG45
 - Dementia. NICE clinical guideline 42 (2006). www.nice.org.uk/CG42
 - Bipolar disorder. NICE clinical guideline 38 (2006). www.nice.org.uk/CG38
 - Obsessive-compulsive disorder. NICE clinical guideline 31 (2005). www.nice.org.uk/CG31
 - Depression in children and young people. NICE clinical guideline 28 (2005). www.nice.org.uk/CG28
 - Post-traumatic stress disorder (PTSD). NICE clinical guideline 26 (2005). www.nice.org.uk/CG26
 - Anxiety (amended). NICE clinical guideline 22 (2004; amended 2007). www.nice.org.uk/CG22

About NICE

6. The National Institute for Health and Clinical Excellence (NICE) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health.
7. NICE produces guidance in three areas of health:
 - **public health** – guidance on the promotion of good health and the prevention of ill health for those working in the NHS, local authorities and the wider public and voluntary sector
 - **health technologies** – guidance on the use of new and existing medicines, treatments and procedures within the NHS
 - **clinical practice** – guidance on the appropriate treatment and care of people with specific diseases and conditions within the NHS.