

1 **National Institute for Health and**
2 **Care Excellence**

3 **Consultation draft**

4
5 **Depression in adults:**
6 **treatment and**
7 **management**

8
9 **Appendix M: Forest plots**

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11 ***NICE Guideline***

12
13 ***Appendices***

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15 ***May 2018***
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Disclaimer

Healthcare professionals are expected to take NICE clinical guidelines fully into account when exercising their clinical judgement. However, the guidance does not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of each patient, in consultation with the patient and/or their guardian or carer.

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Depression in adults: treatment and management
Forest plots

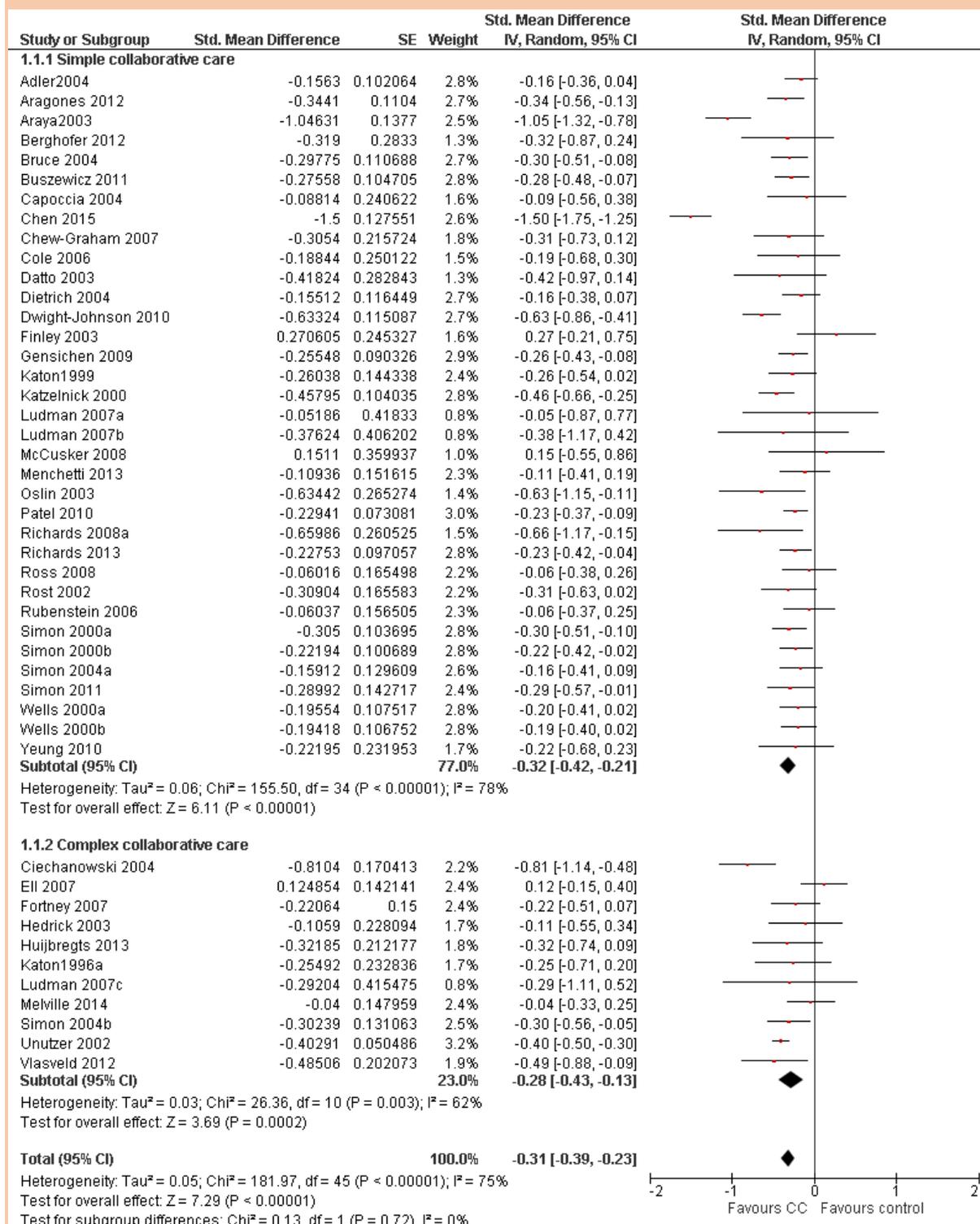
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Organisation and delivery of services (chapter 5)

Service delivery models

Collaborative care versus control

Depression symptoms at follow-up (6 months)

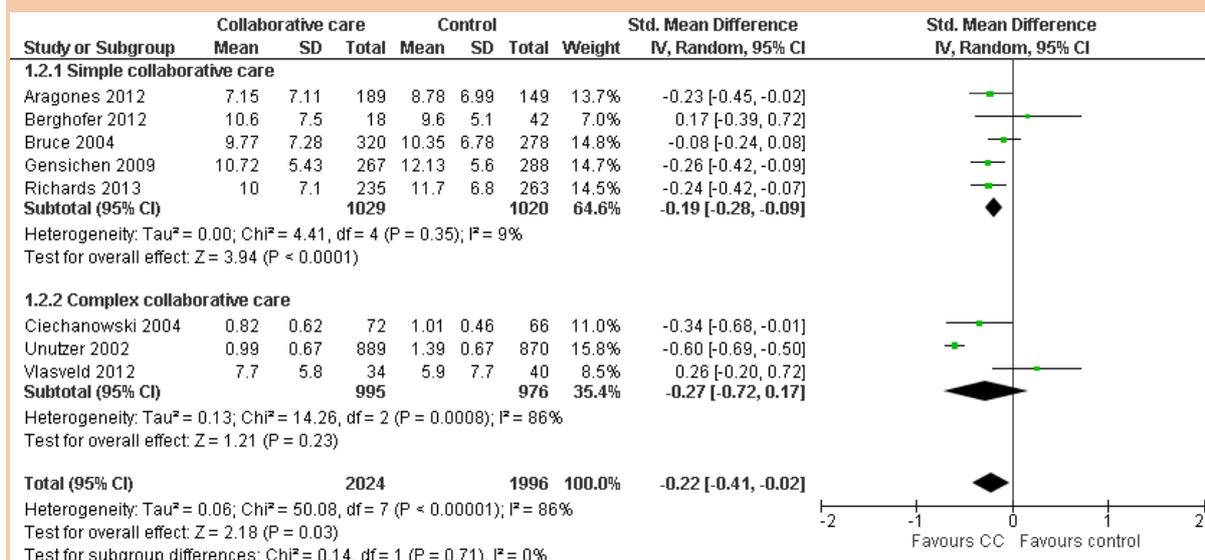


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Depression in adults: treatment and management

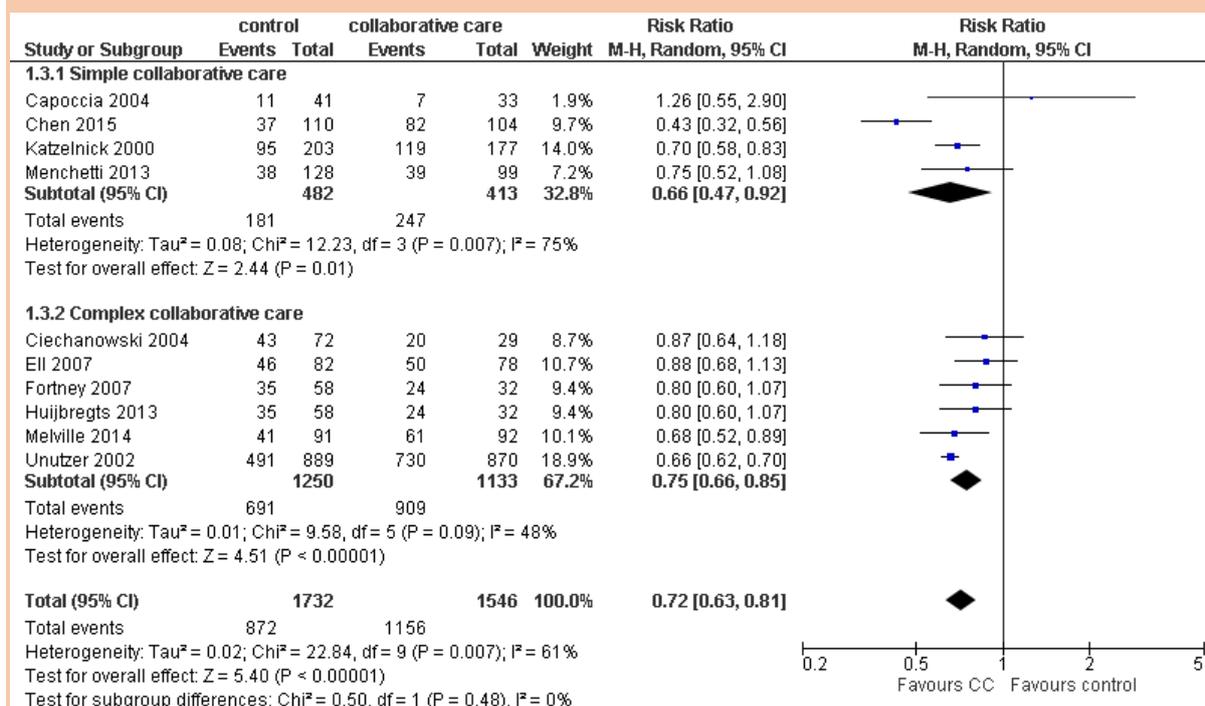
Forest plots

1 Depression symptoms at endpoint



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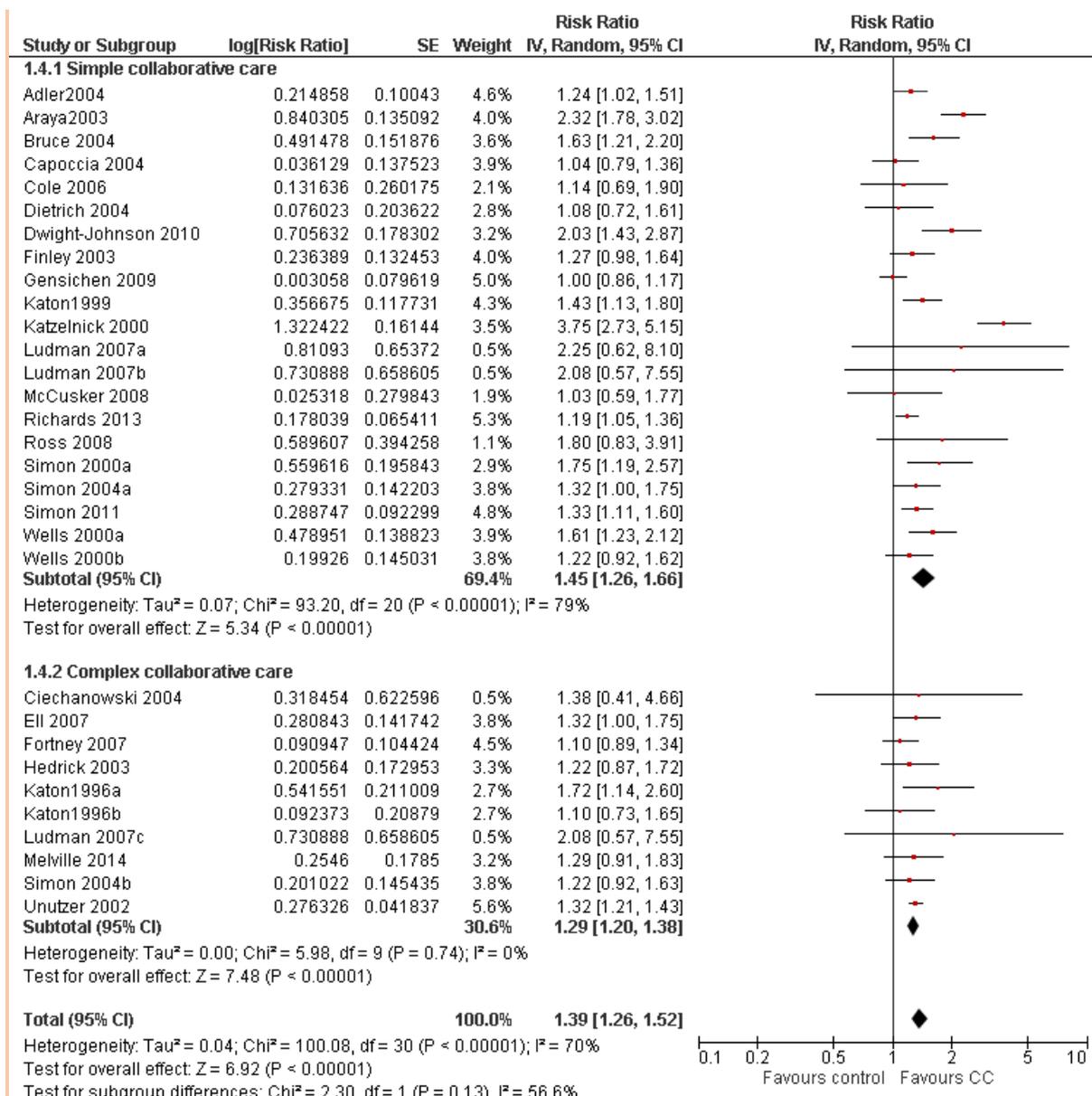
3 Non-response at endpoint



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5 Antidepressant use at follow-up (6 months)

Depression in adults: treatment and management
Forest plots



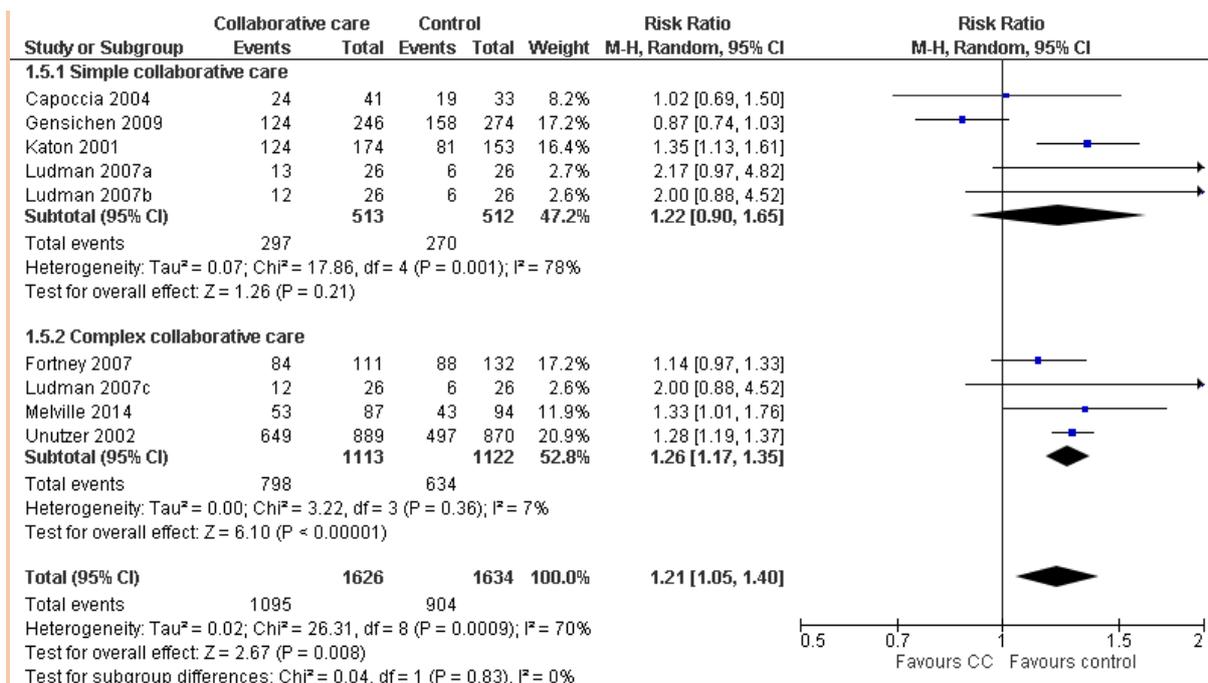
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Antidepressant use at endpoint

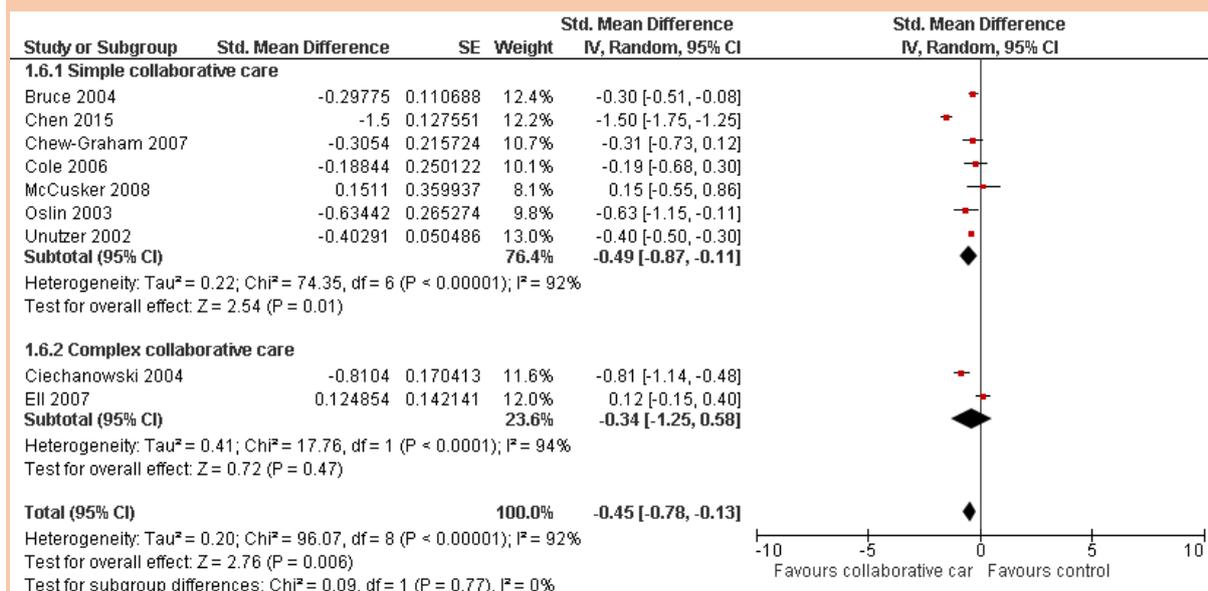
Depression in adults: treatment and management

Forest plots



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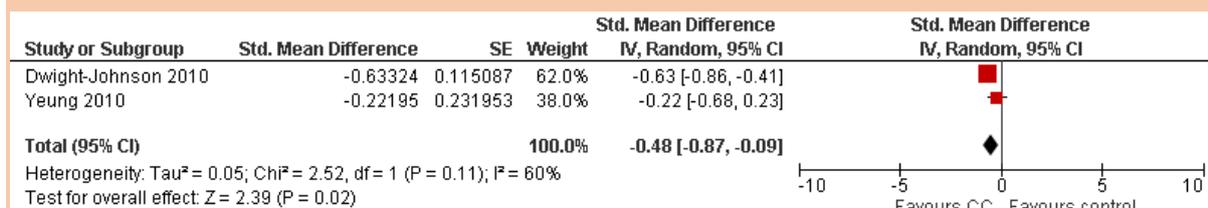
2 Sub-analysis: depression symptoms at follow-up (6months) in older people



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5 Sub-analysis: depression symptoms at follow-up (6 months) in BME individuals

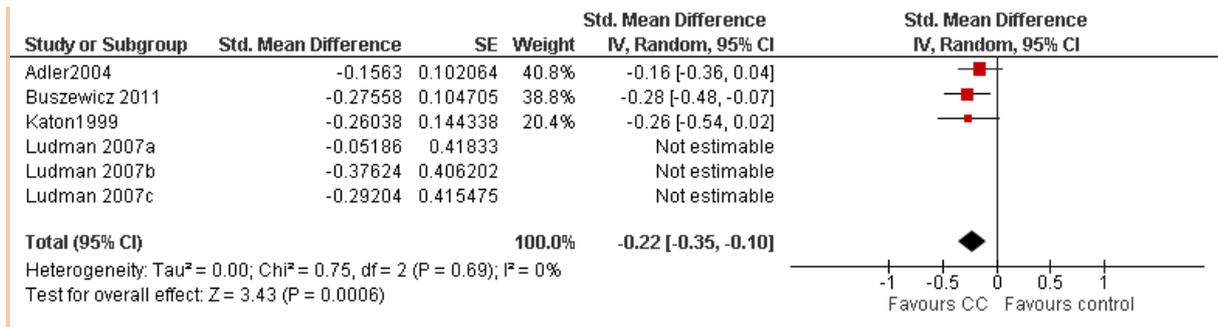


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8 Sub-analysis: depression symptoms at follow-up (6 months) in chronic depression individuals

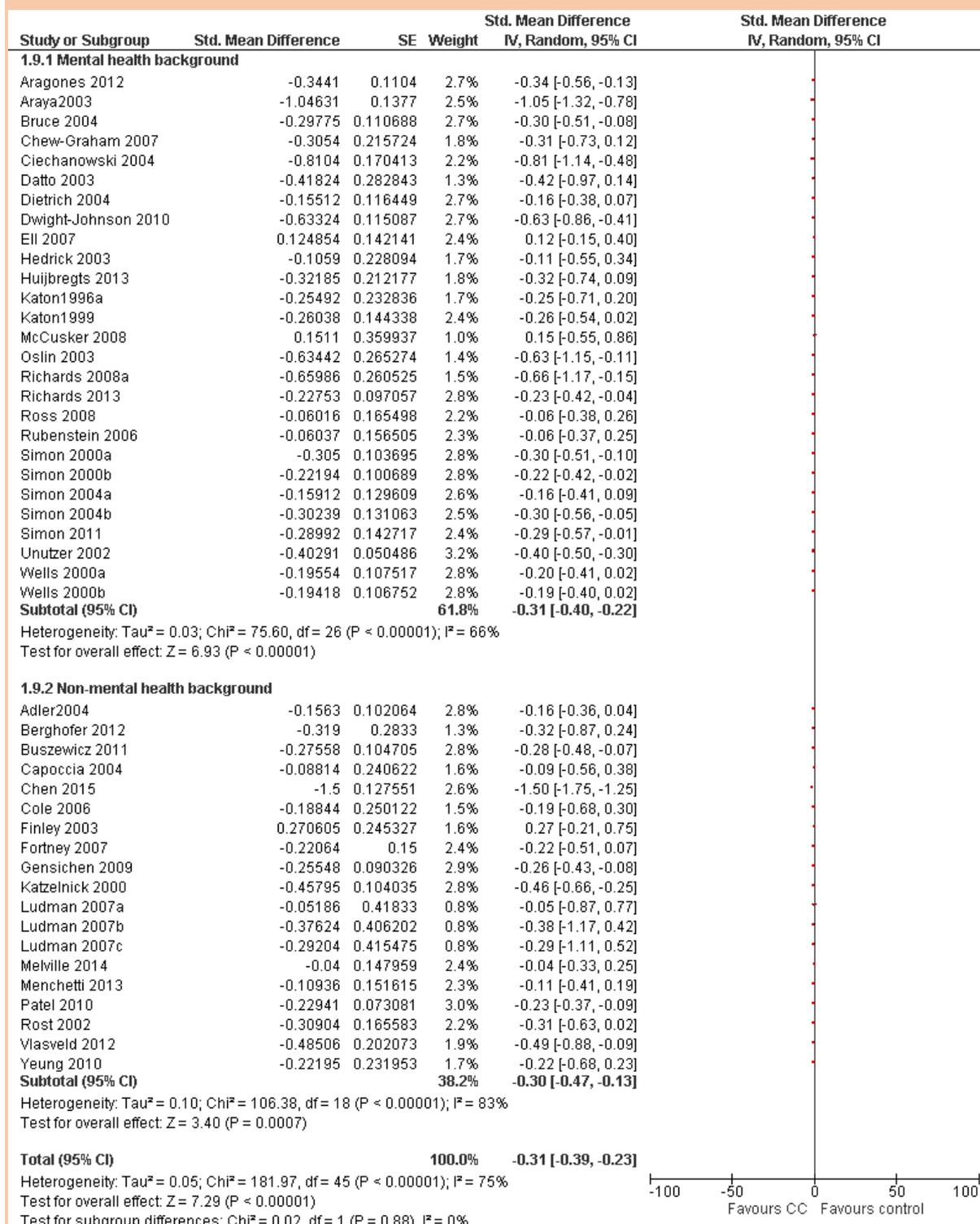
Depression in adults: treatment and management
Forest plots



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Depression in adults: treatment and management
Forest plots

1 Sub-analysis: depression symptoms at endpoint by case-manager background



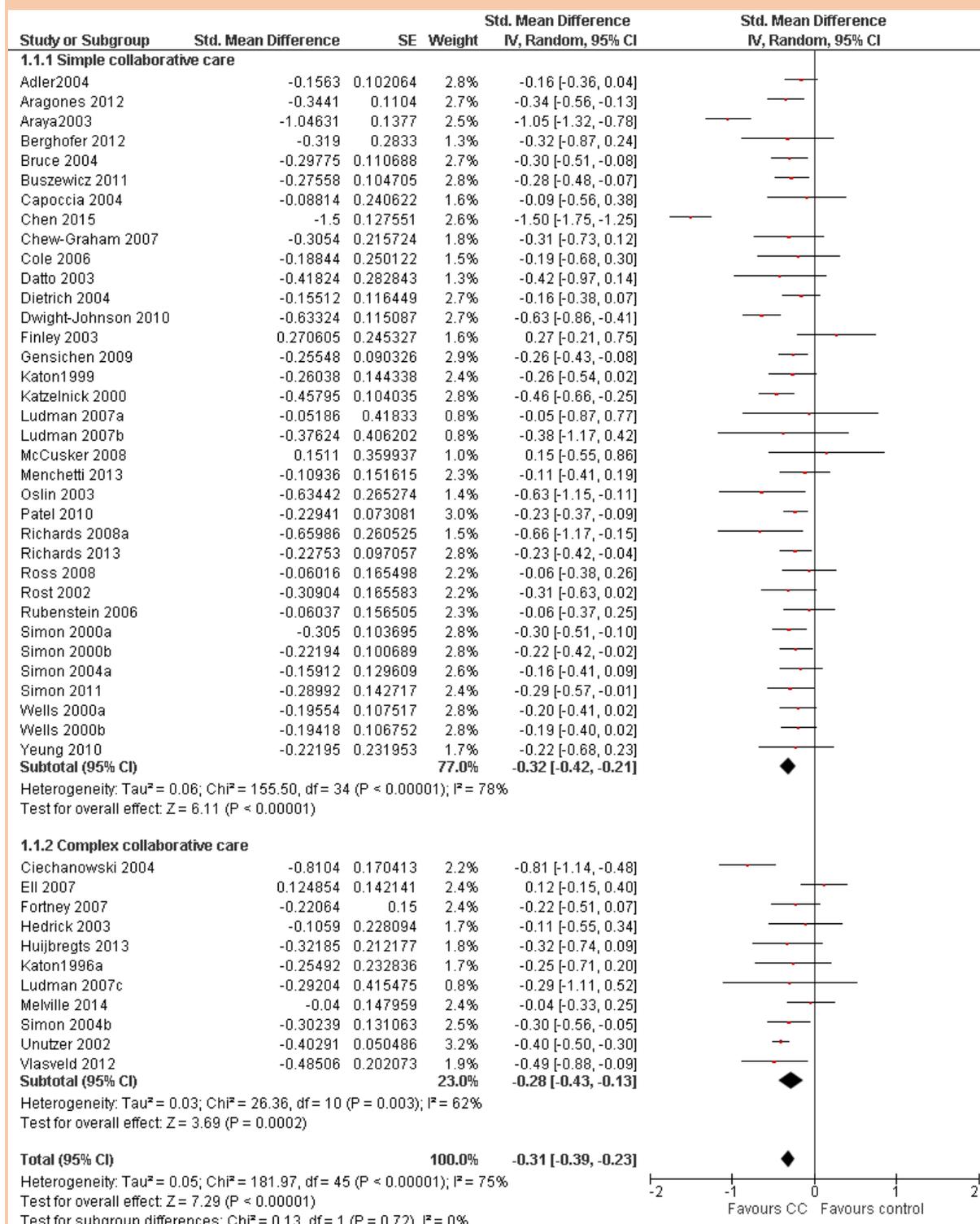
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Depression in adults: treatment and management

Forest plots

1 Sub-analysis: depression symptoms at endpoint by psychological intervention



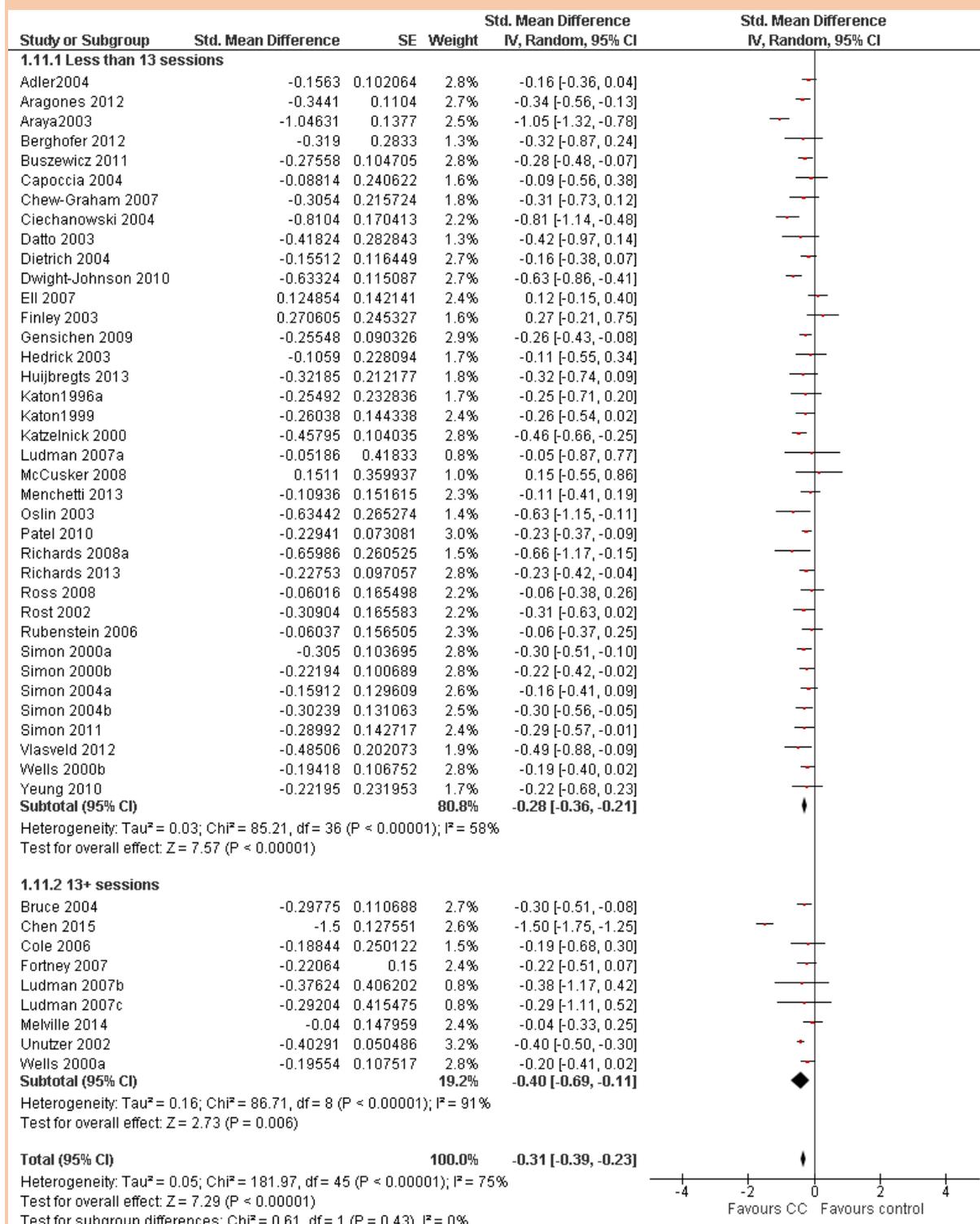
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Depression in adults: treatment and management

Forest plots

1 Sub-analysis: depression symptoms at endpoint by number of contacts

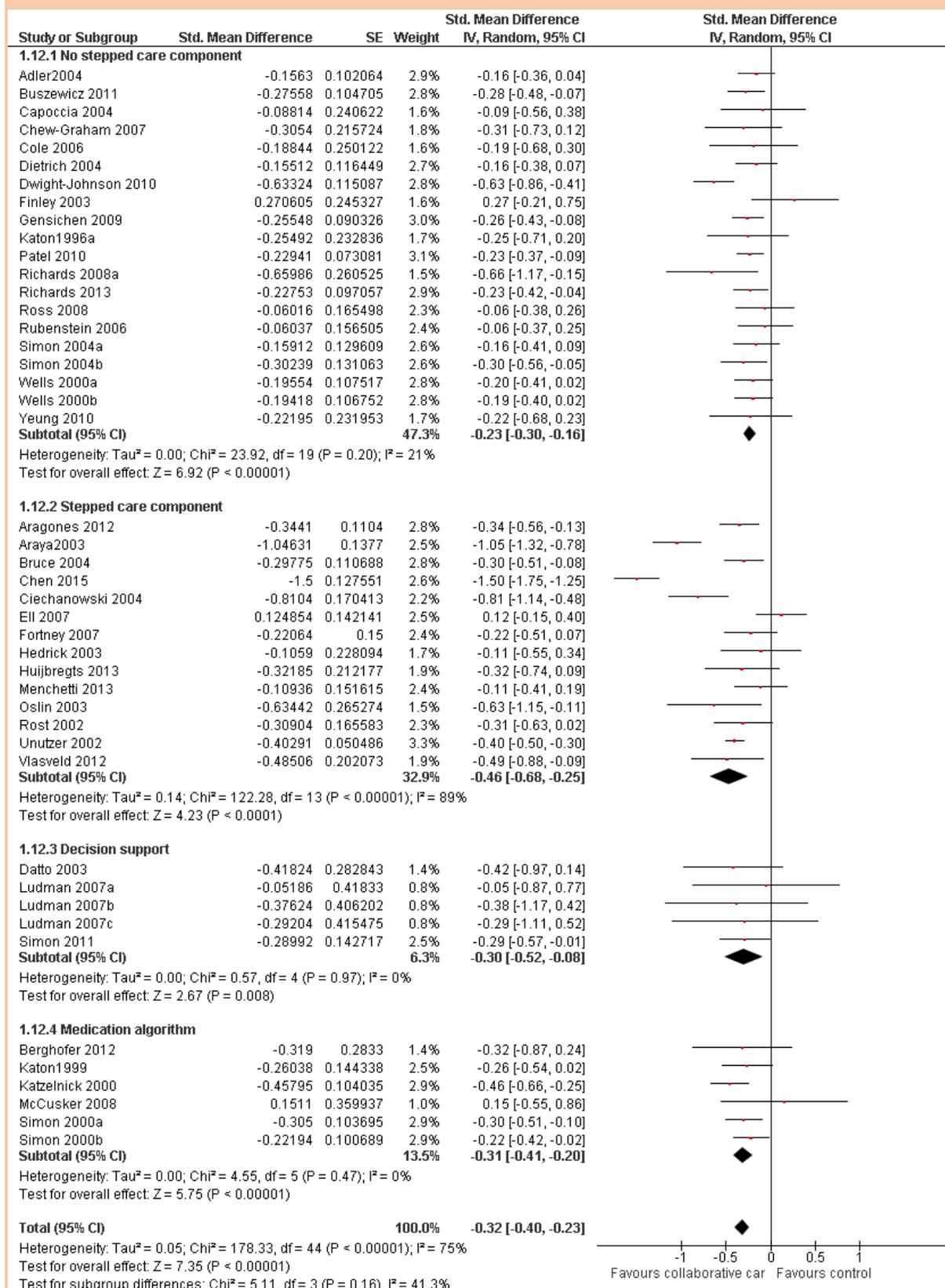


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Depression in adults: treatment and management

Forest plots

1 Sub-analysis: depression symptoms at endpoint by stepped care algorithm

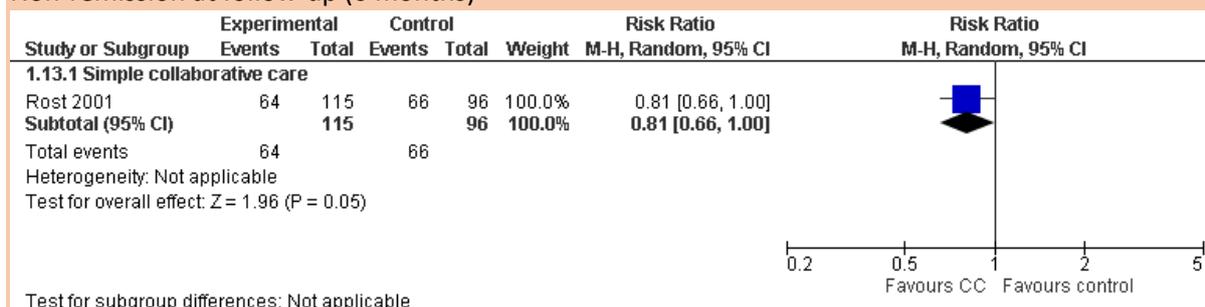


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Depression in adults: treatment and management

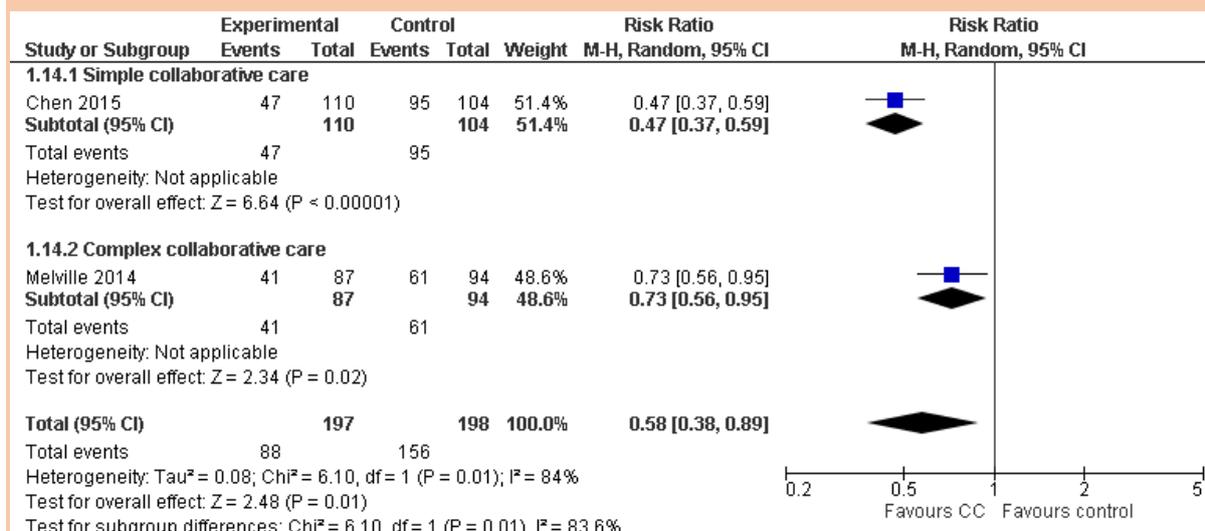
Forest plots

1 Non-remission at follow-up (6 months)



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3 Non-remission at endpoint



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6 Collaborative care versus other active intervention

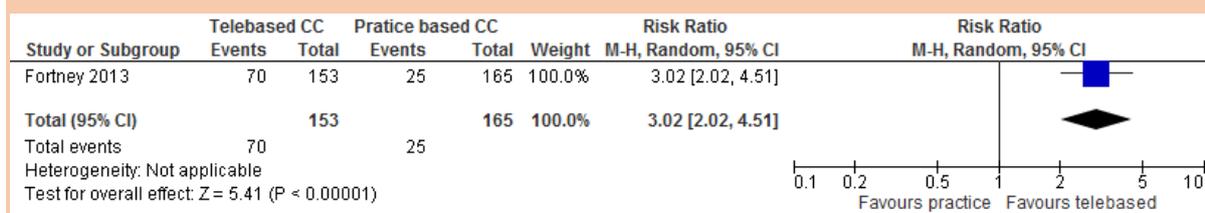
7

8 Simple collaborative care: standard versus patient-centred



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10 Response at endpoint: tele-based versus practice based



11

12 Response at follow-up: tele-based versus practice-based

Depression in adults: treatment and management

Forest plots

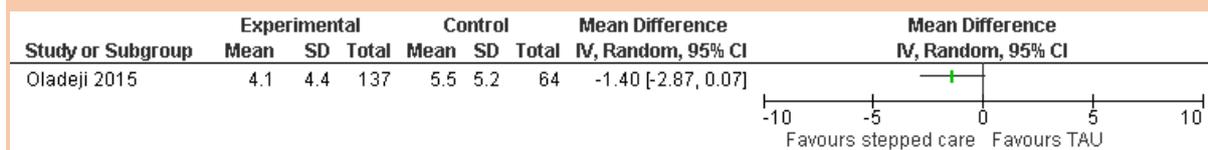


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Stepped care versus control

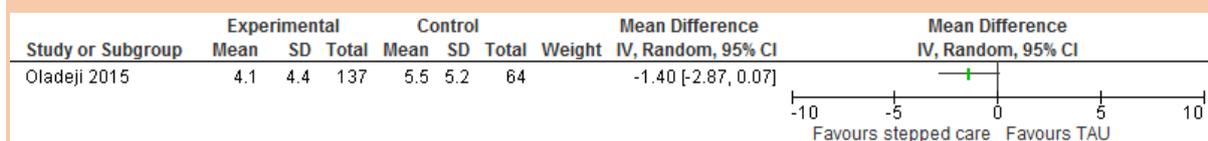
Depression symptoms at follow-up (6 months) (PHQ-9)



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Depression symptoms at endpoint (PHQ-9)



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Remission at endpoint



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Antidepressant use

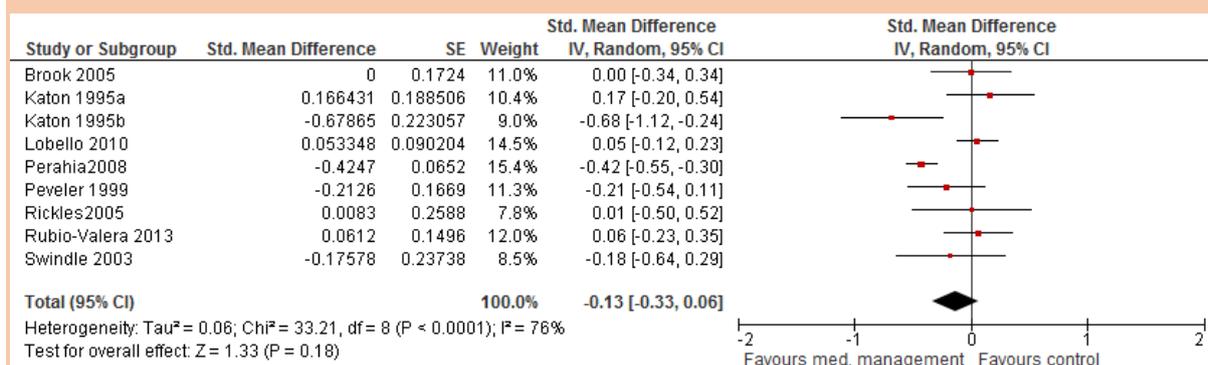


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Medication management versus control

Mean change in depression scores at endpoint

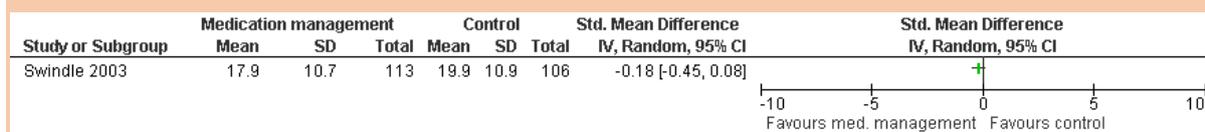


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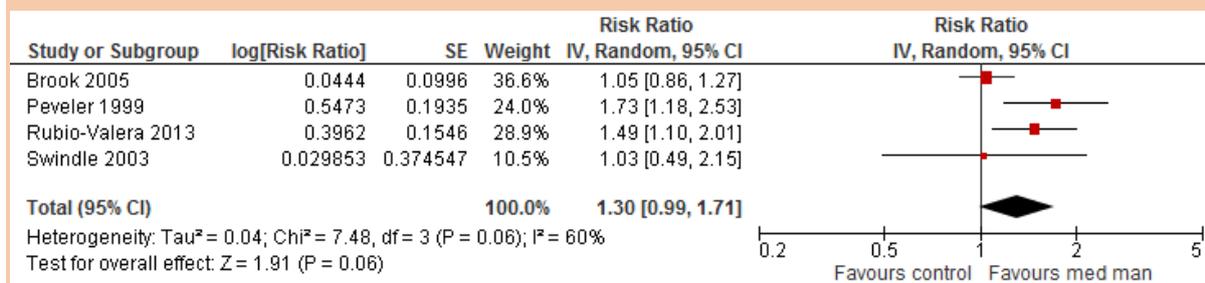
Depression in adults: treatment and management

Forest plots

1 Mean change in depression scores at follow-up (12 months)

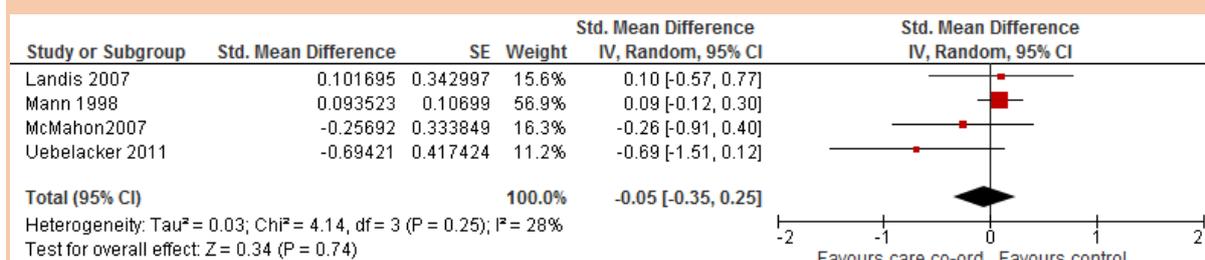


2 Antidepressant use at endpoint

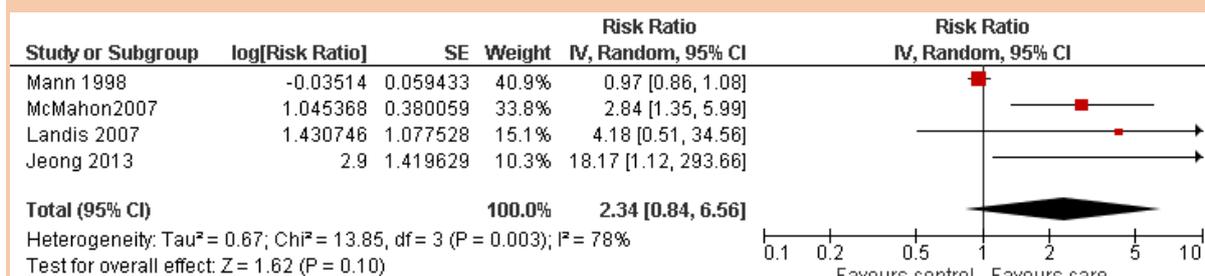


6 Care co-ordination versus control

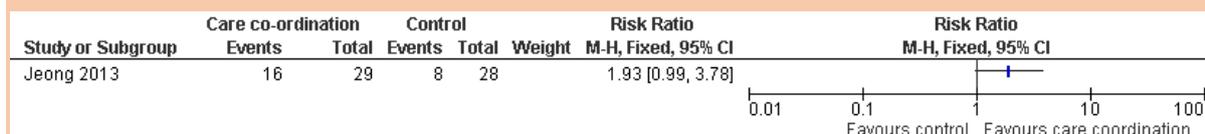
8 Mean change in depression scores at endpoint



10 Antidepressant adherence



12 Remission (HAMD ≤ 7) at endpoint

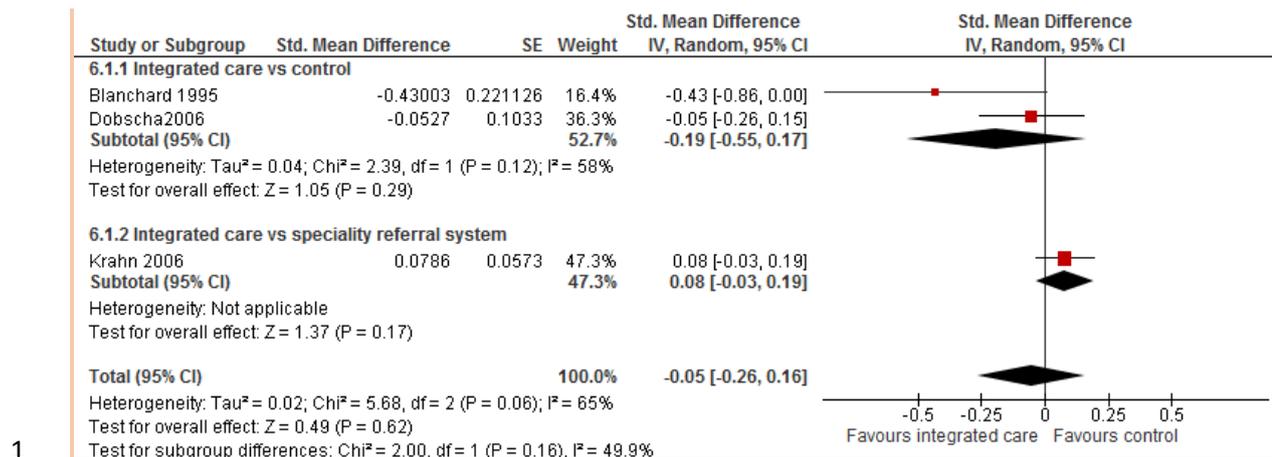


14 Integrated care versus control

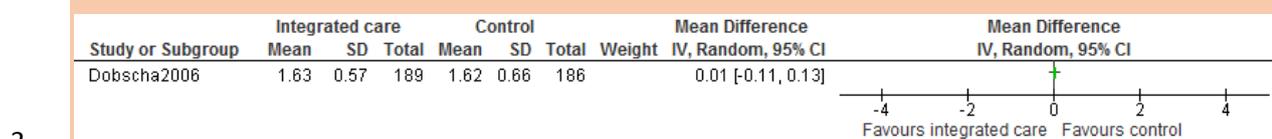
15 Mean change in depression scores at endpoint

Depression in adults: treatment and management

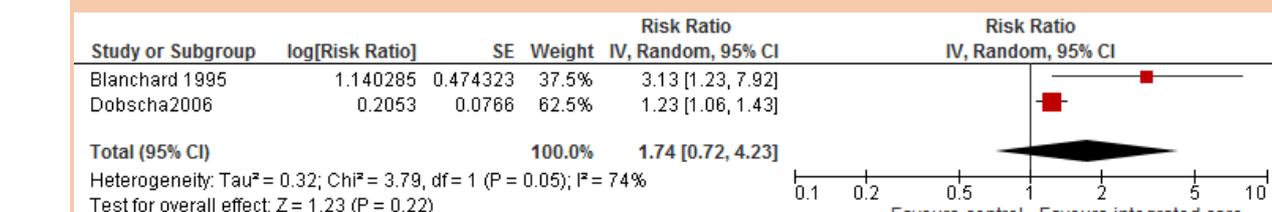
Forest plots



2 Mean change in depression scores at follow-up (12 months)

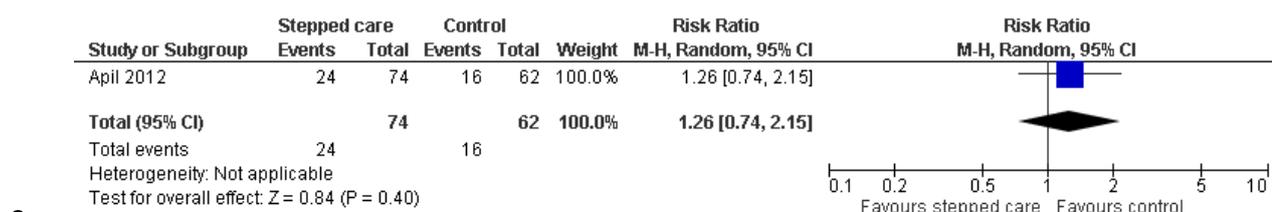


4 Antidepressant adherence

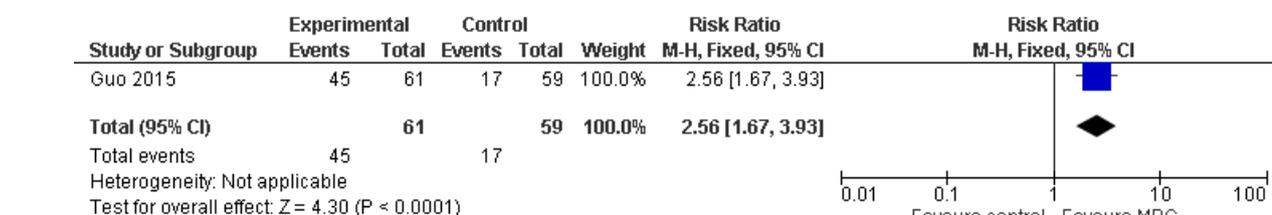


6 Measurement-based care versus control

7 Response at endpoint (HAMD ≥50% improvement)



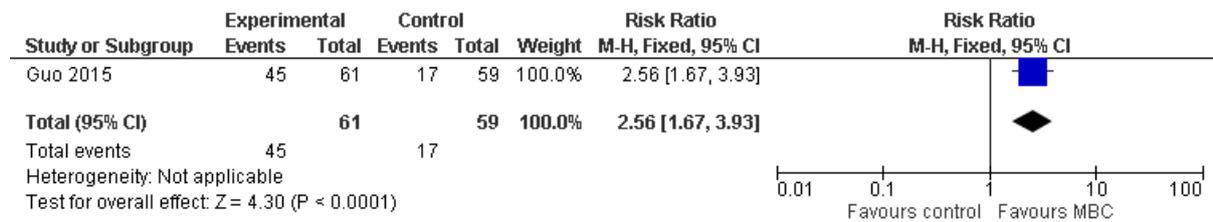
9 Remission at endpoint (HAMD ≤ 7)



11 Depression symptoms at endpoint (HAMD change score)

Depression in adults: treatment and management

Forest plots



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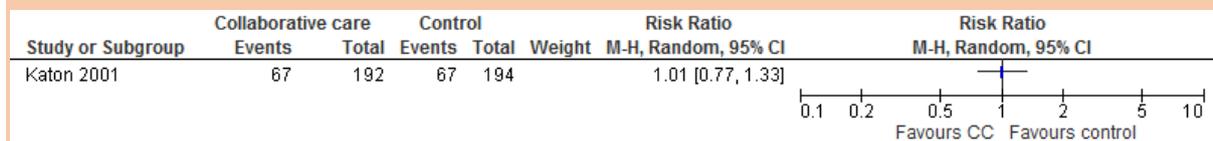
Service delivery models for relapse prevention

Depression symptoms (collaborative care)



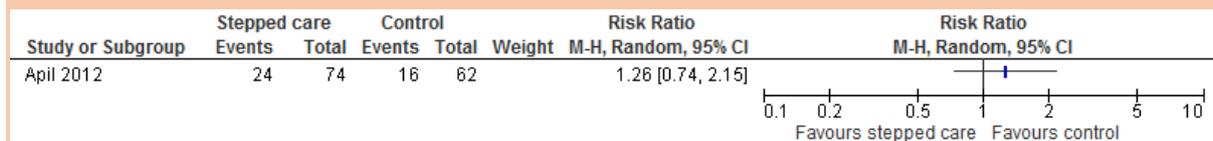
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Relapse (collaborative care)



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Relapse (stepped care)



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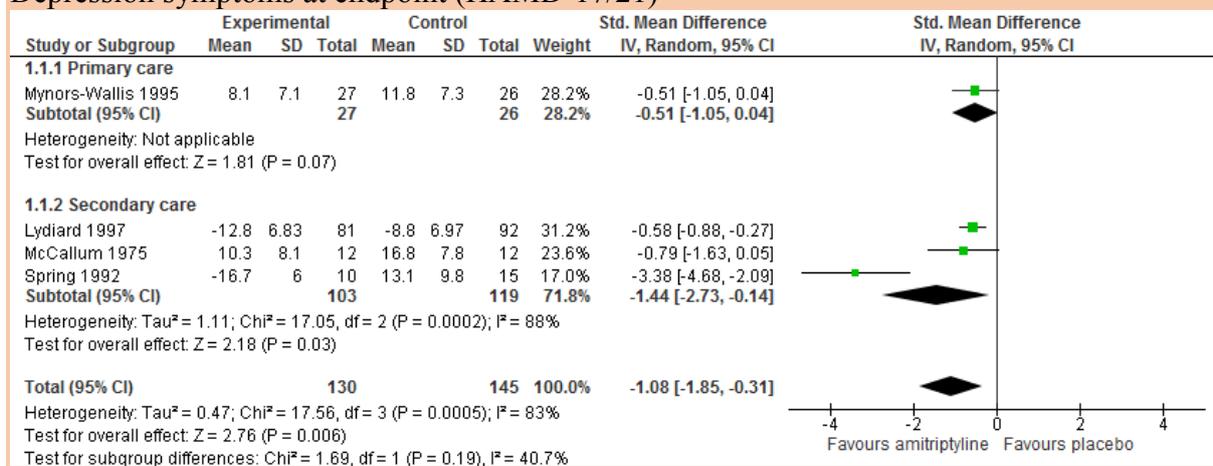
Settings of care

Primary care versus secondary care for acute treatment (NMA sub-analysis)

Amitriptyline versus placebo

13

Depression symptoms at endpoint (HAMD-17/21)



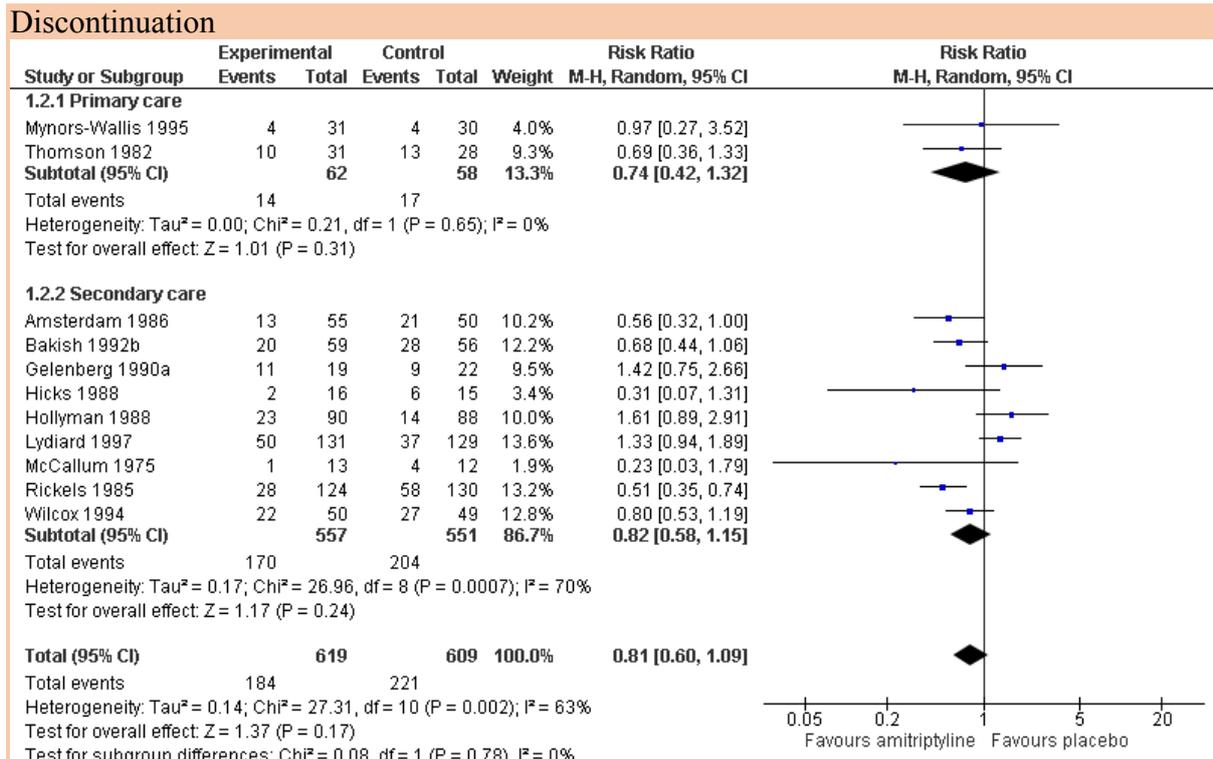
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Depression in adults: treatment and management

Forest plots

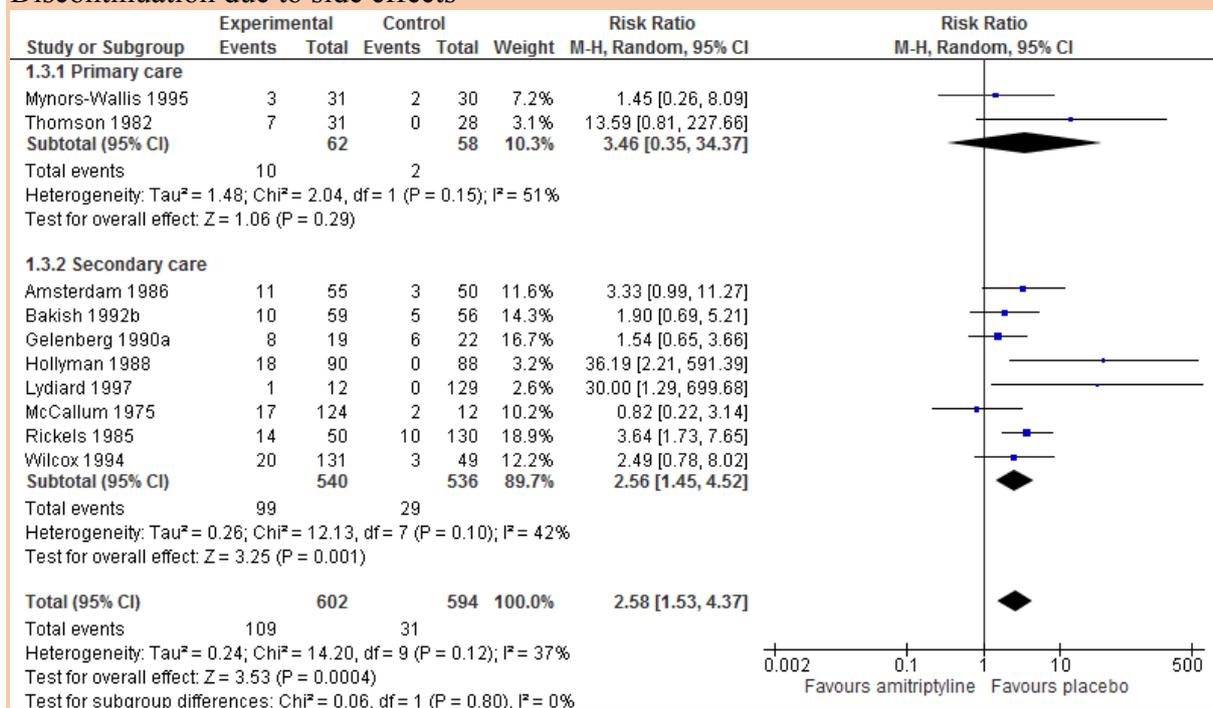
1 Discontinuation



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4 Discontinuation due to side effects



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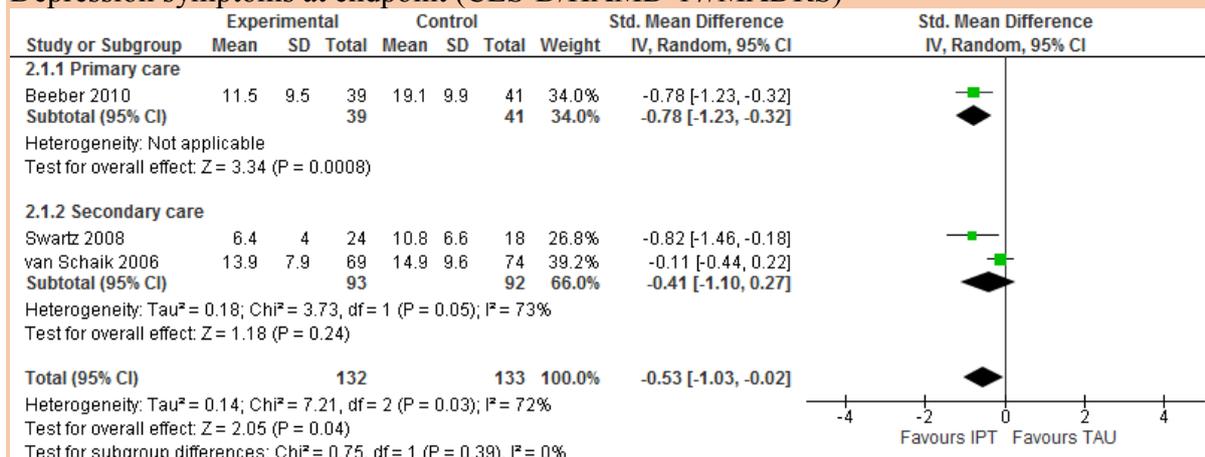
7 IPT versus TAU/waitlist

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Depression in adults: treatment and management

Forest plots

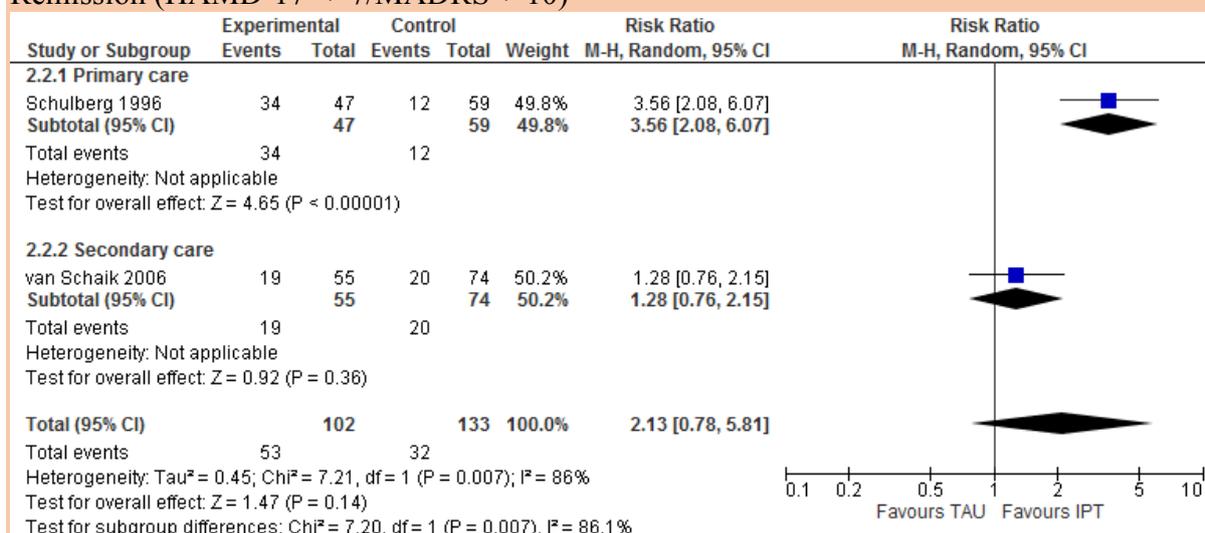
1 Depression symptoms at endpoint (CES-D/HAMD-17/MADRS)



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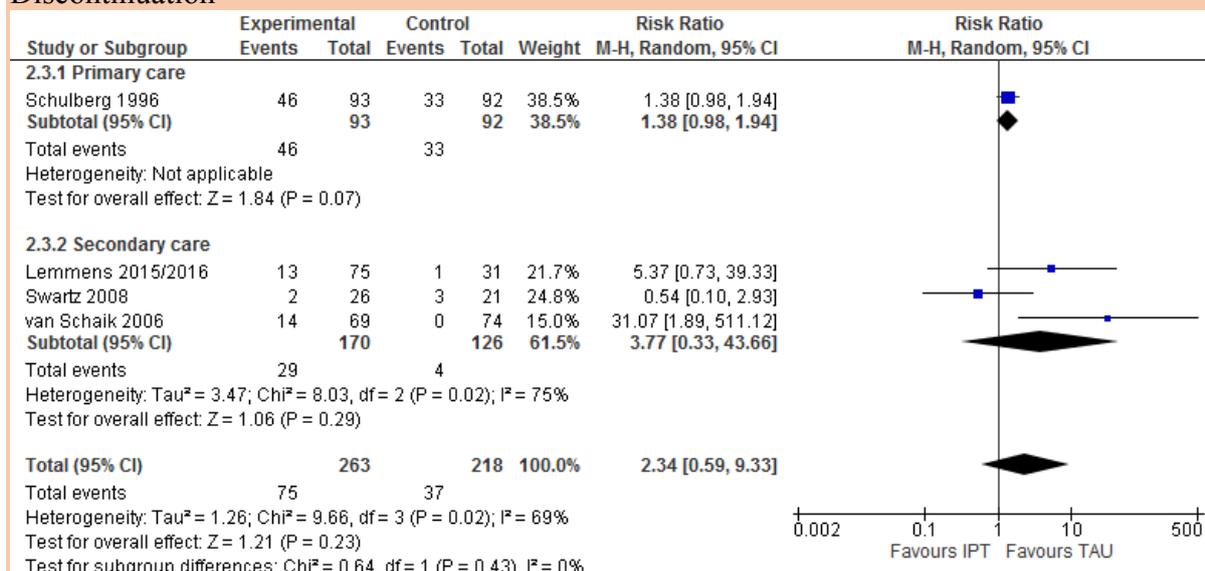
4 Remission (HAMD-17 <=7/MADRS<=10)



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7 Discontinuation



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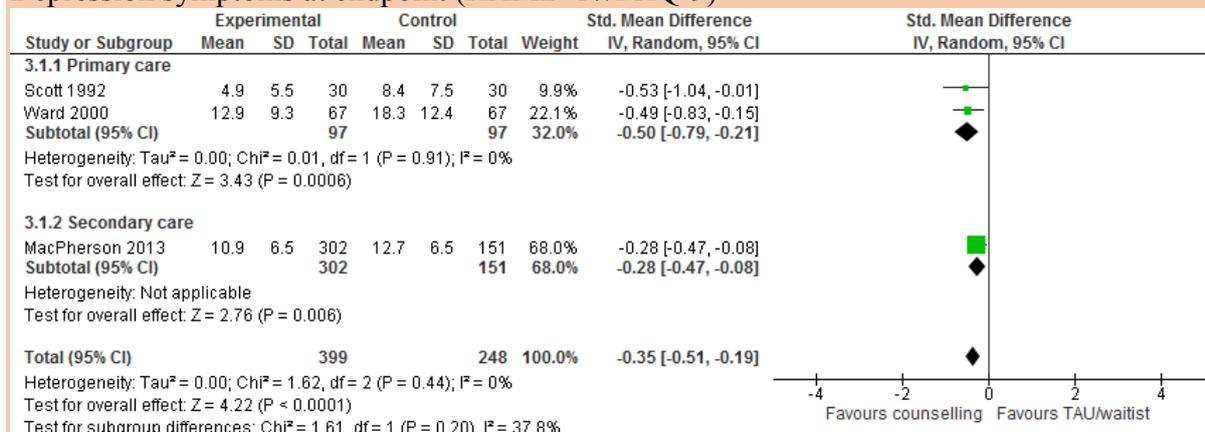
Depression in adults: treatment and management

Forest plots

1 Counselling versus TAU

2

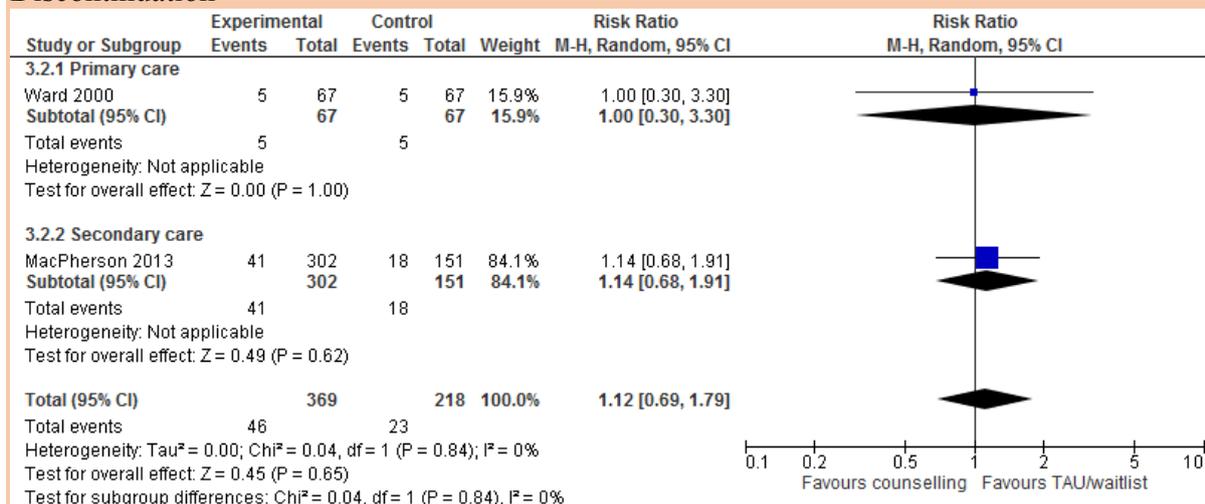
3 Depression symptoms at endpoint (HAMD-17/PHQ-9)



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6 Discontinuation



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9 Behavioural therapies versus TAU/waitlist

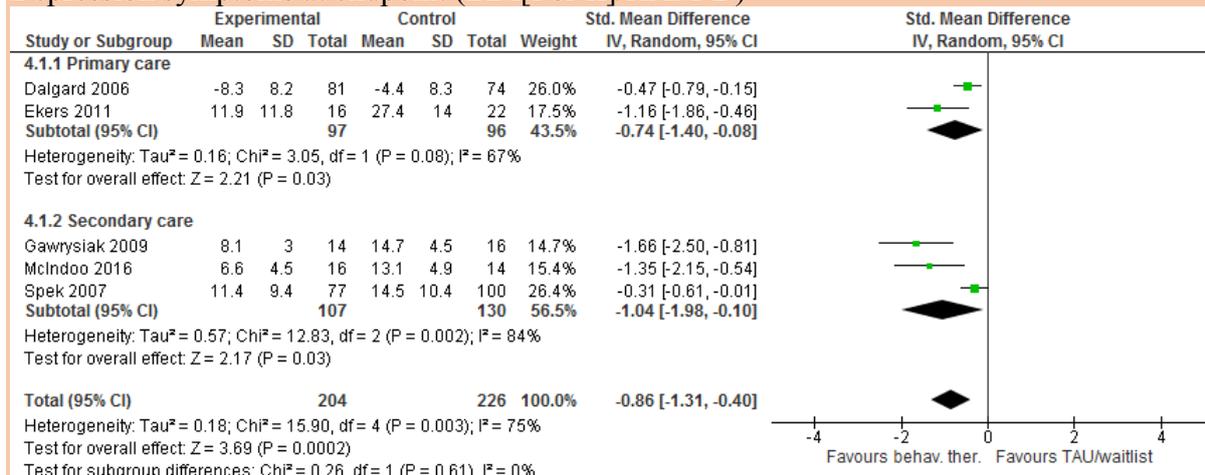
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Depression in adults: treatment and management

Forest plots

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Depression symptoms at endpoint (BDI[I or II]/HAM-D)

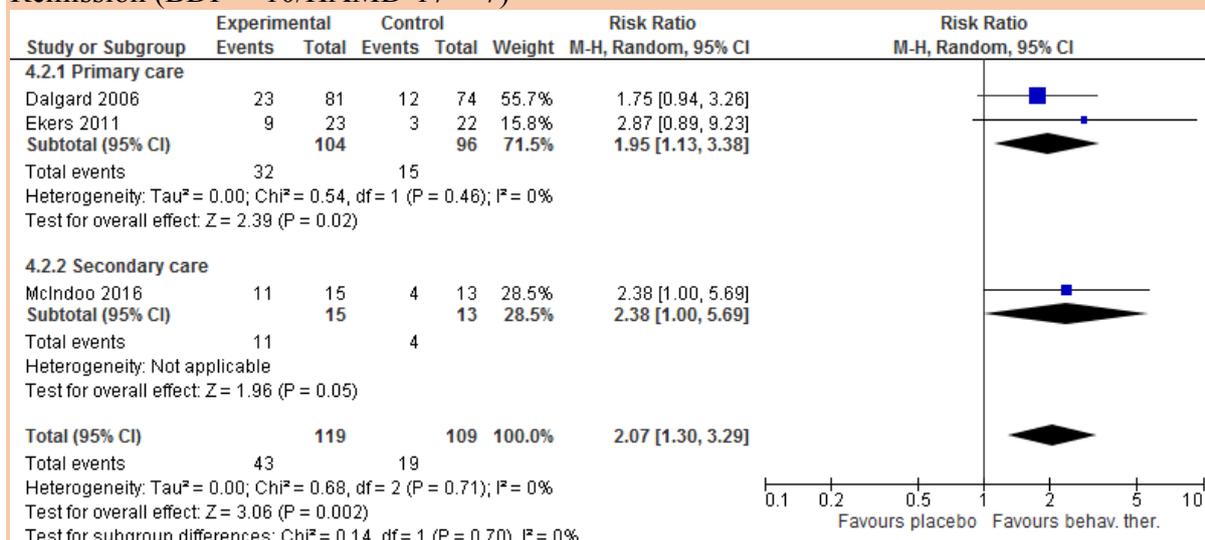


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Remission (BDI <=10/HAMD-17<=7)

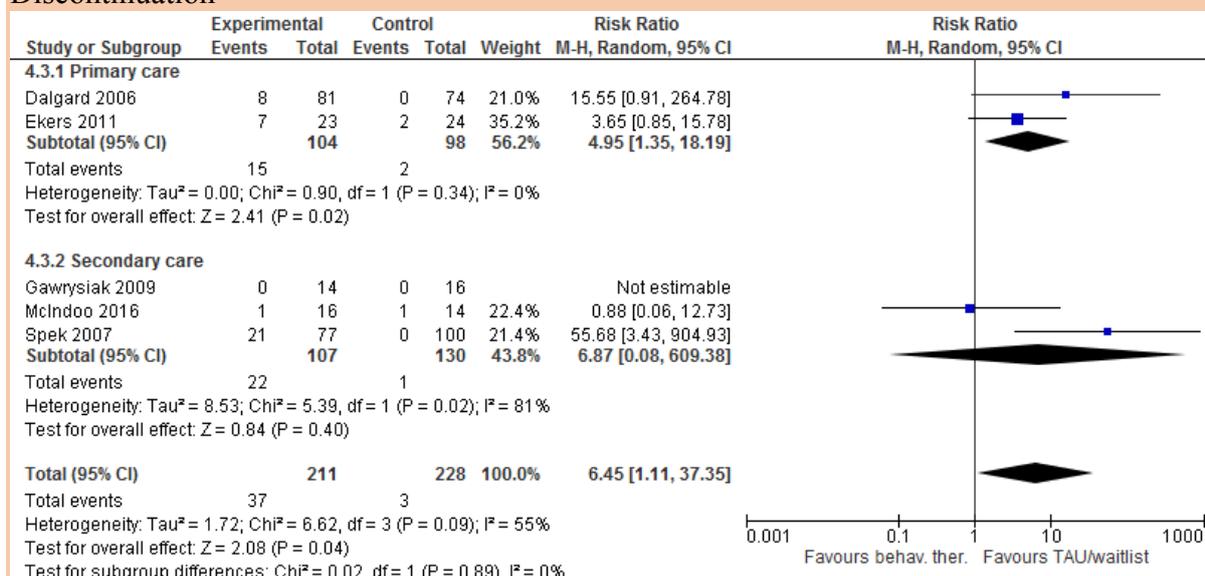


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Discontinuation



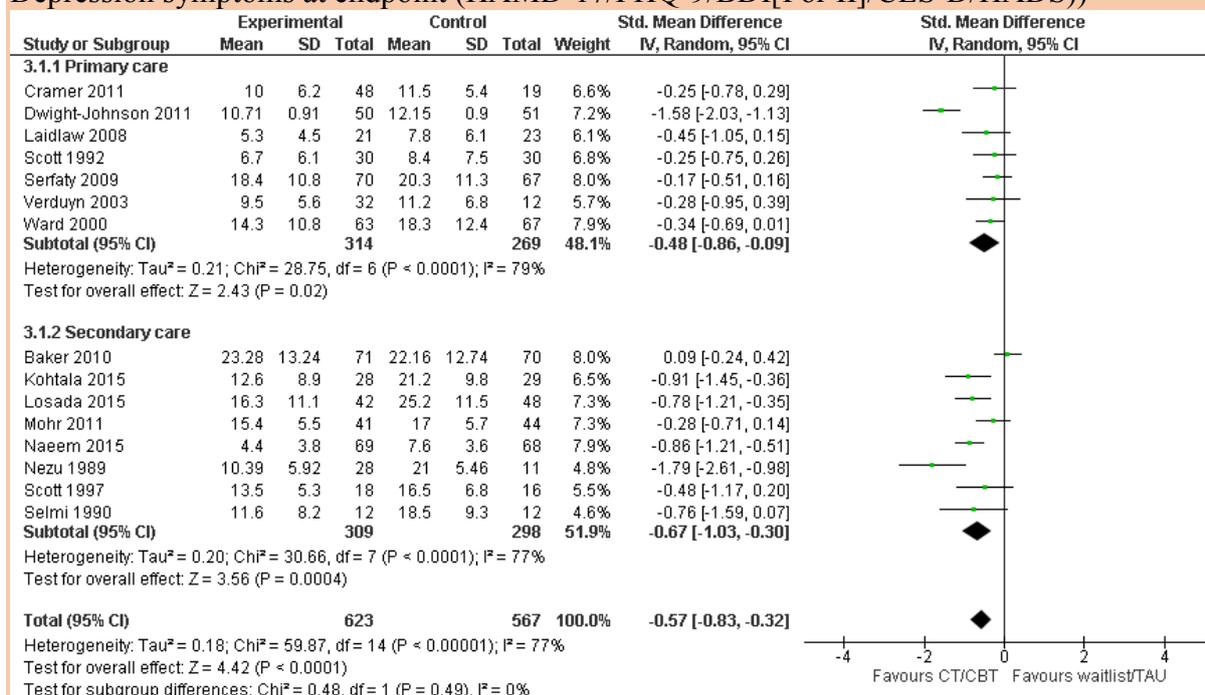
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Depression in adults: treatment and management

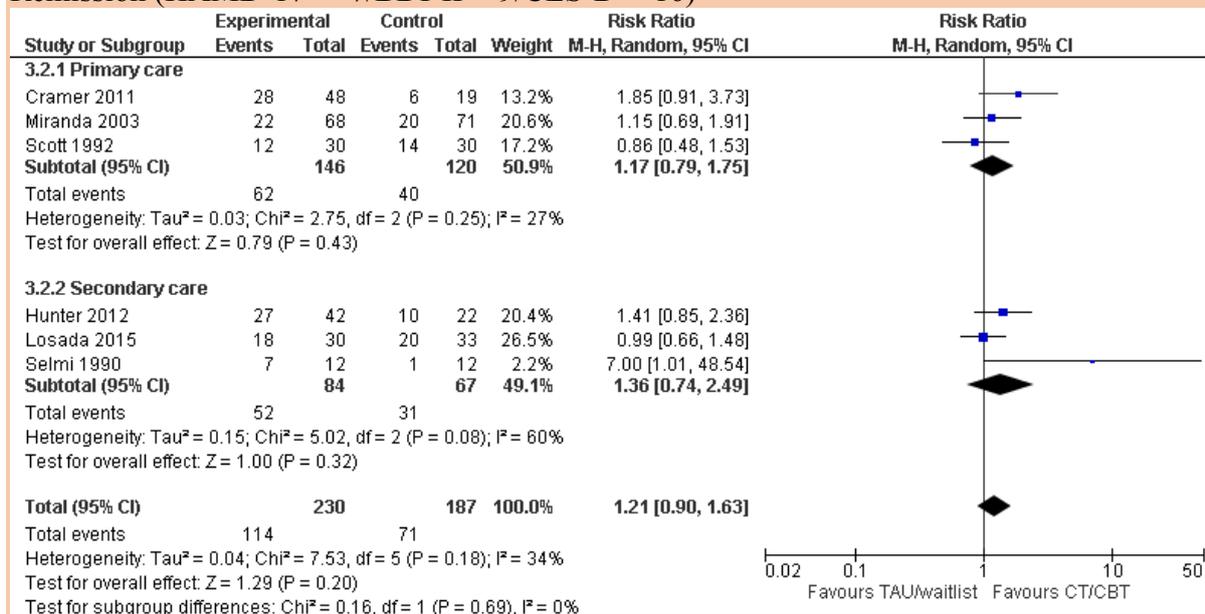
Forest plots

Cognitive and cognitive behavioural therapies versus TAU/waitlist

Depression symptoms at endpoint (HAMD-17/PHQ-9/BDI[I or II]/CES-D/HADS))



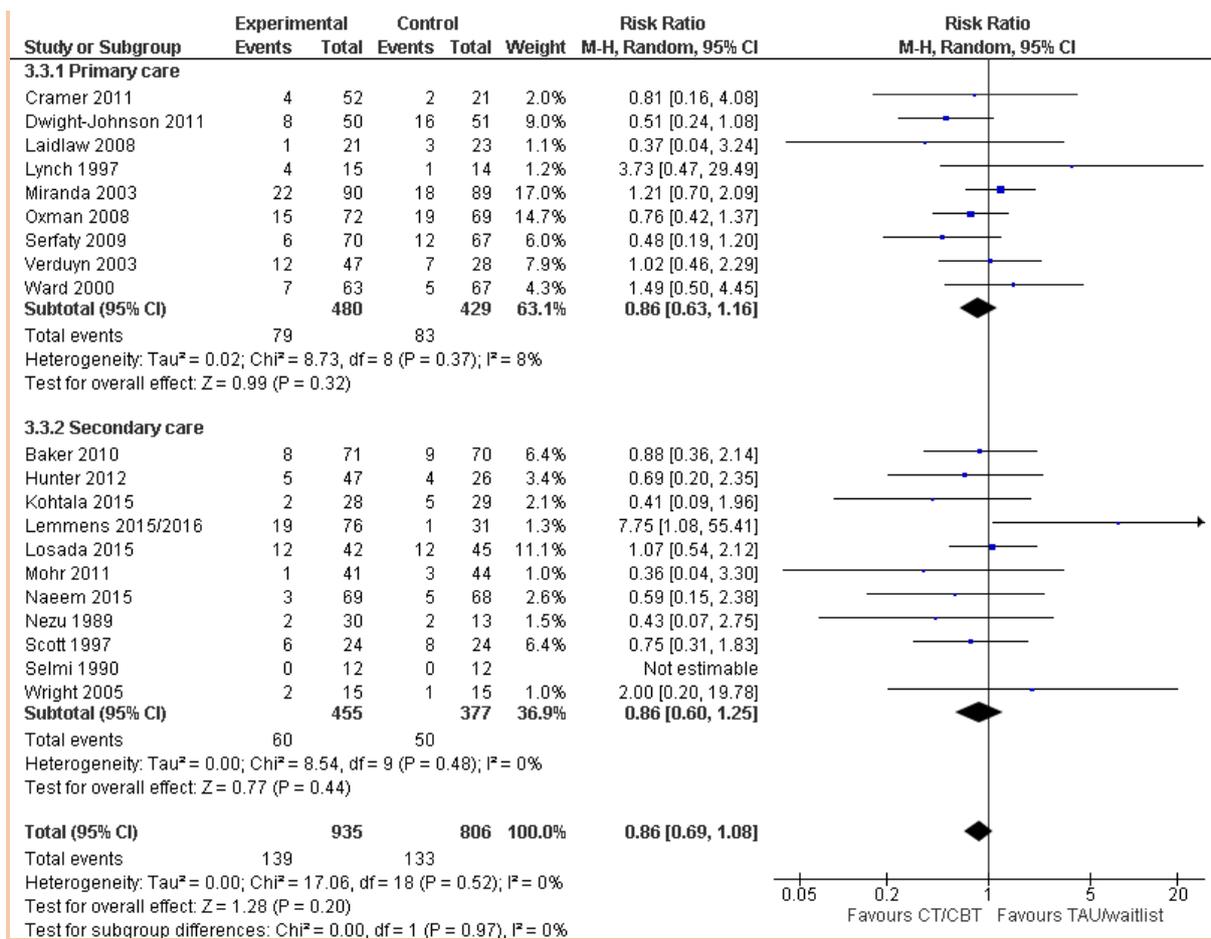
Remission (HAMD-17 <=7/BDI-II<=9/CES-D<=16)



Discontinuation

Depression in adults: treatment and management

Forest plots



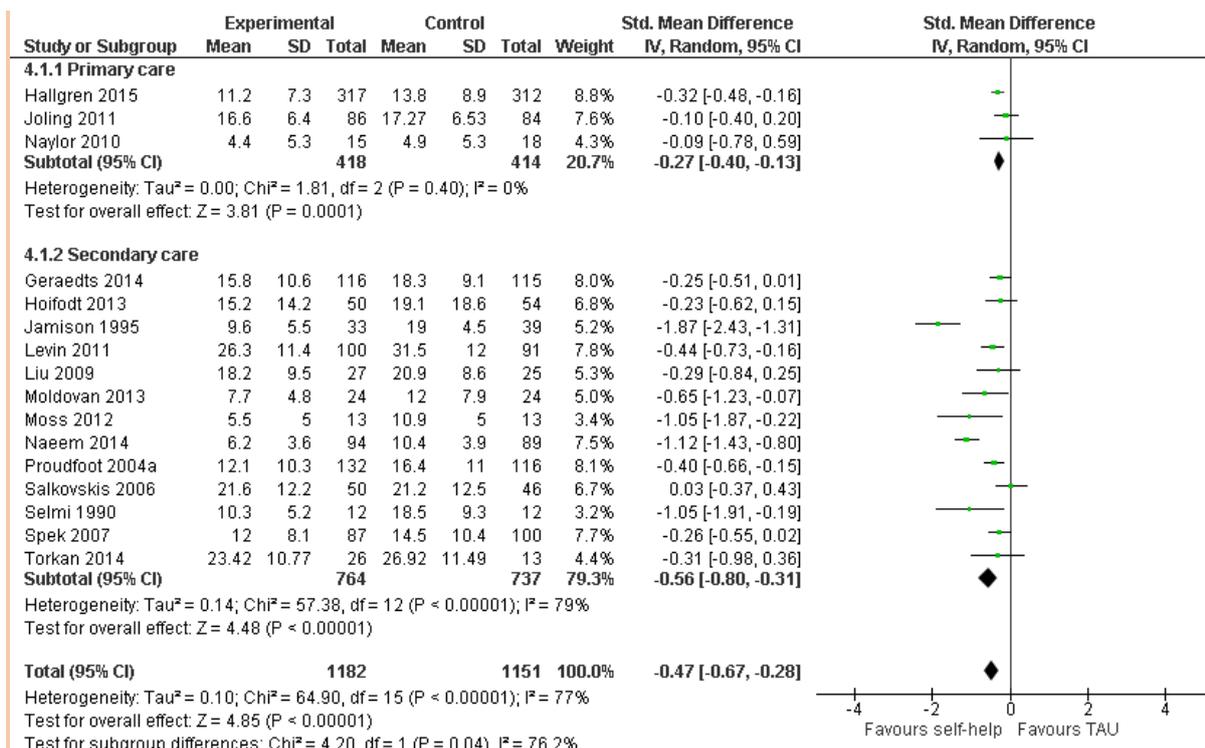
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Self-help (without support) versus TAU/waitlist

Depression symptoms at endpoint (MADRS/CES-D/BDI[I or II]/HAMD[17 or 21]/HADS)

Depression in adults: treatment and management

Forest plots

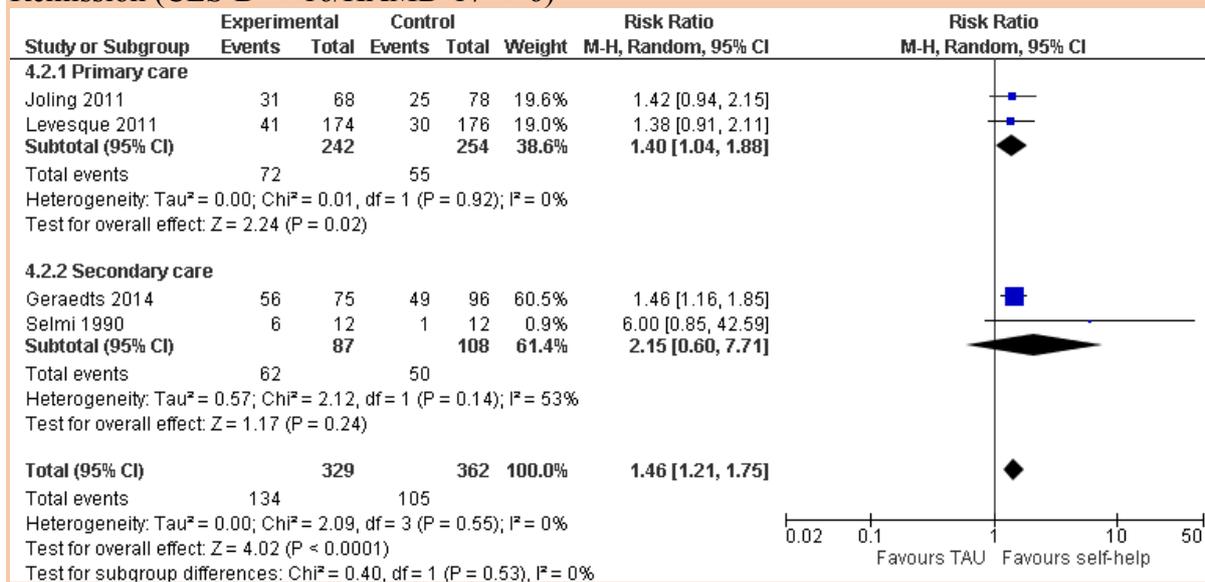


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Remission (CES-D ≤16/HAMD-17 ≤6)



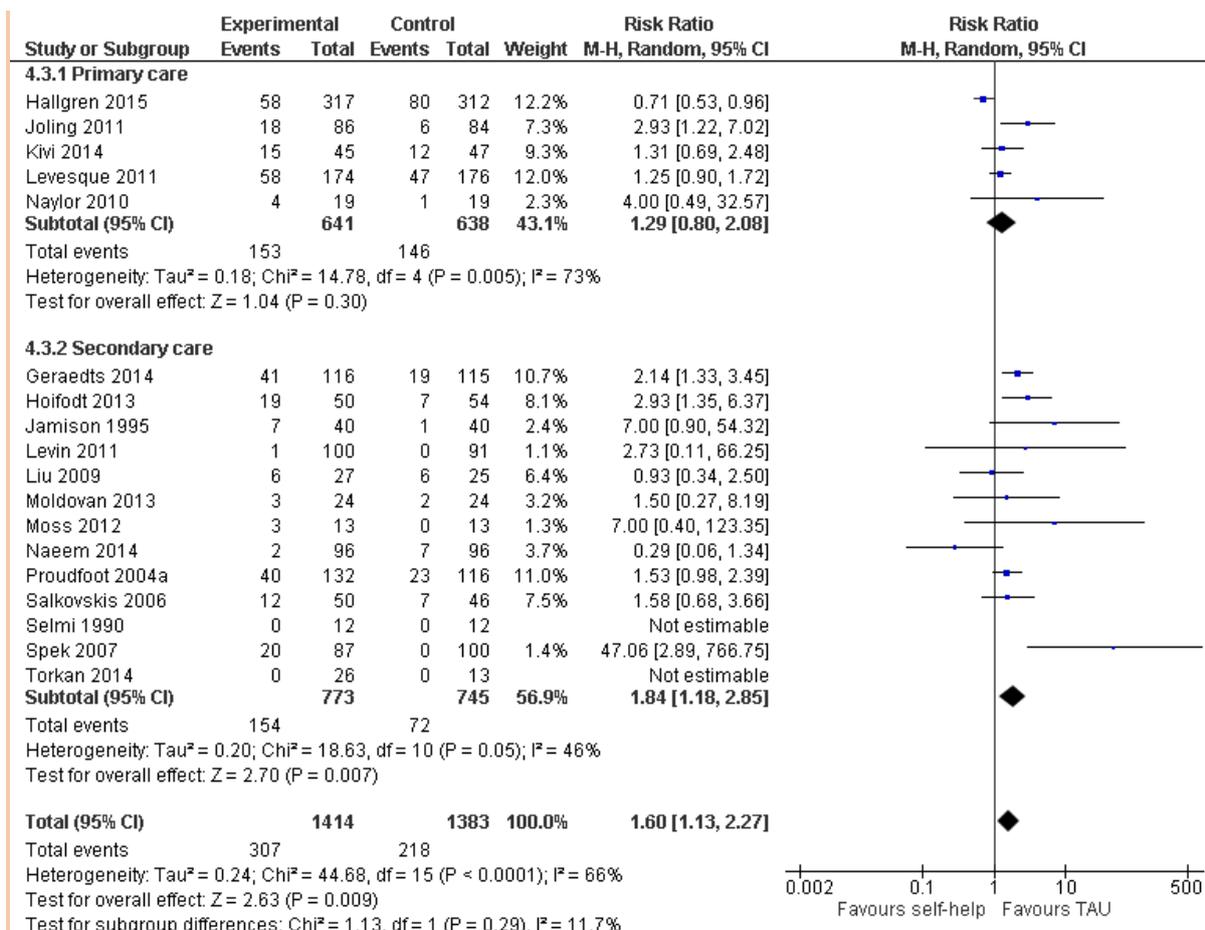
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Discontinuation

Depression in adults: treatment and management

Forest plots



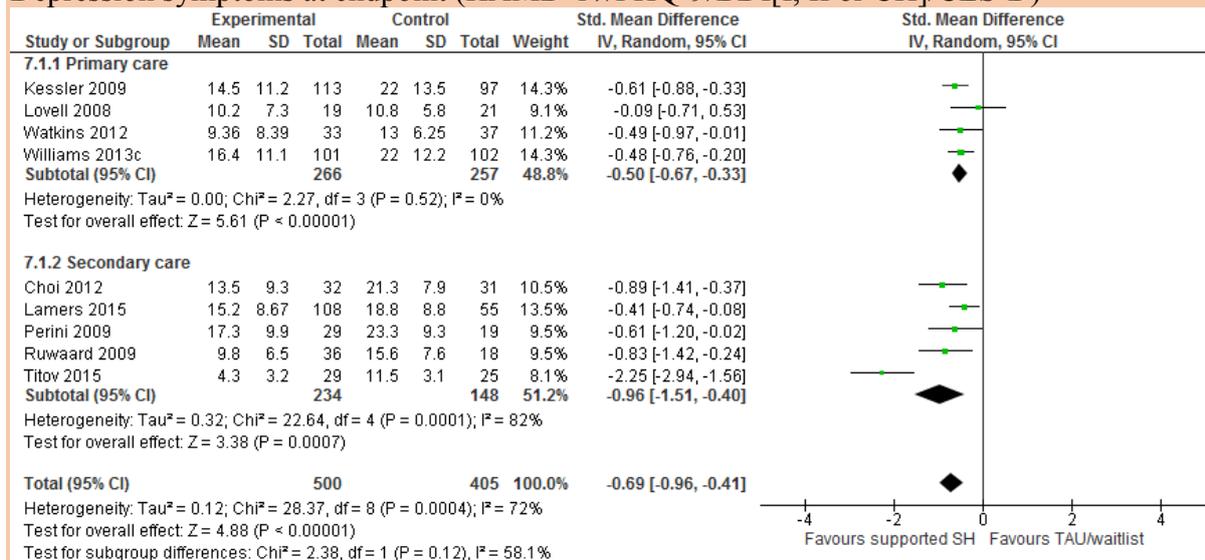
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Self-help with support versus TAU/waitlist

4

5 Depression symptoms at endpoint (HAM-D-17/PHQ-9/BDI[I, II or CH]/CES-D)



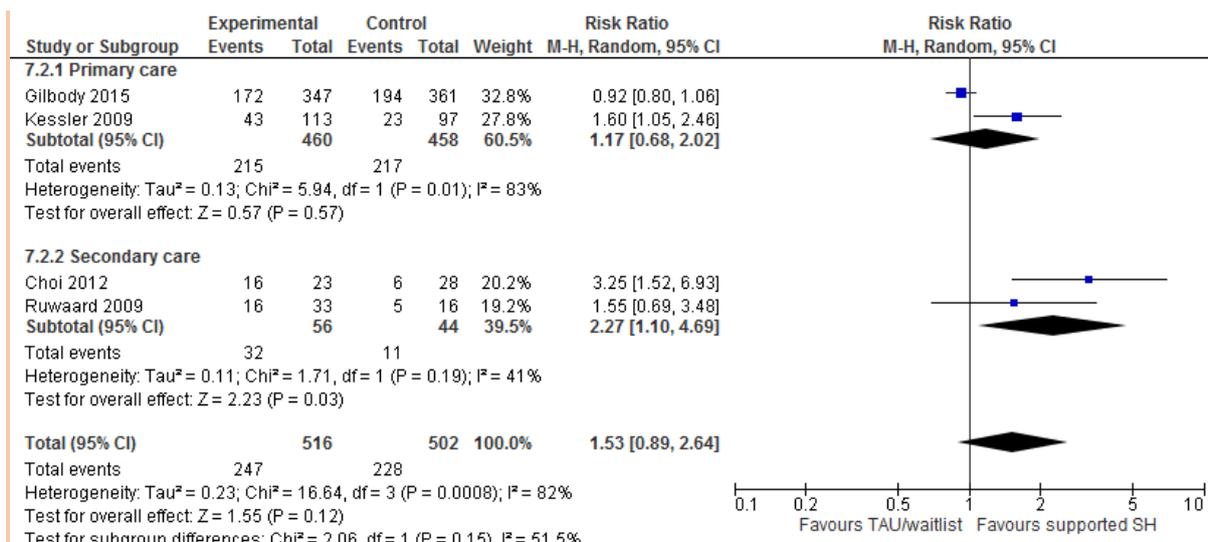
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8 Remission (PHQ-9/BDI <=9/<=16/<=10)

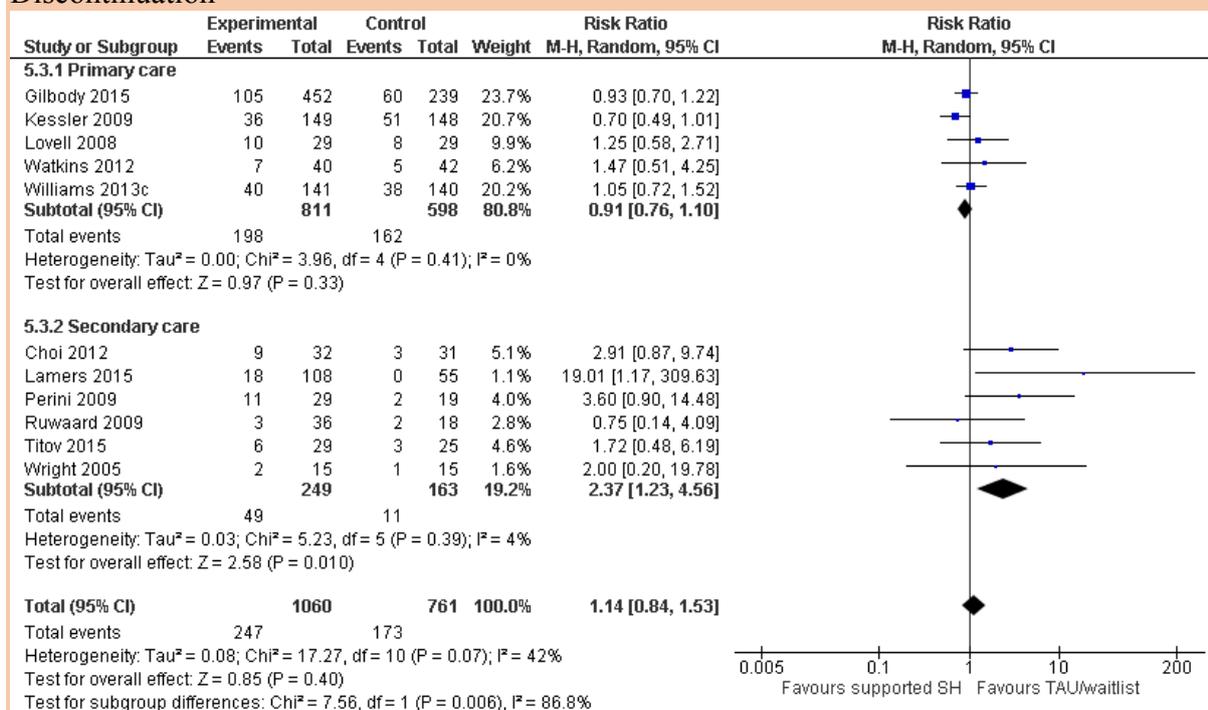
Depression in adults: treatment and management

Forest plots



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Discontinuation



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Crisis resolution team care versus standard care

Lost to follow-up by end of study (12 months)



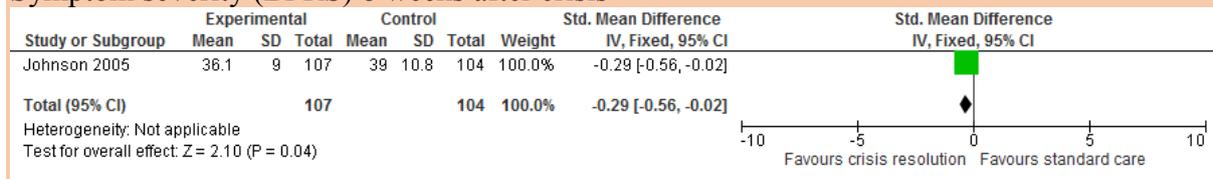
9

Depression in adults: treatment and management

Forest plots

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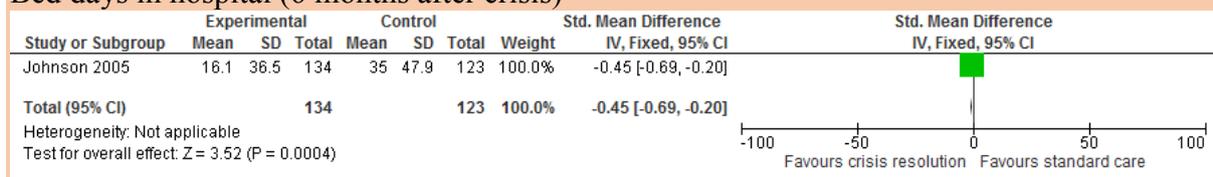
Symptom severity (BPRS) 8 weeks after crisis



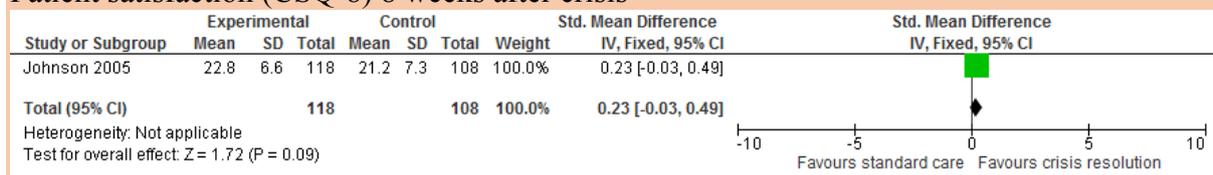
Admission as inpatient (6 months after crisis)



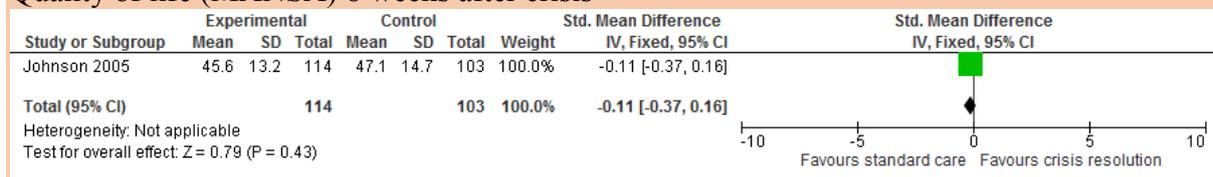
Bed days in hospital (6 months after crisis)



Patient satisfaction (CSQ-8) 8 weeks after crisis



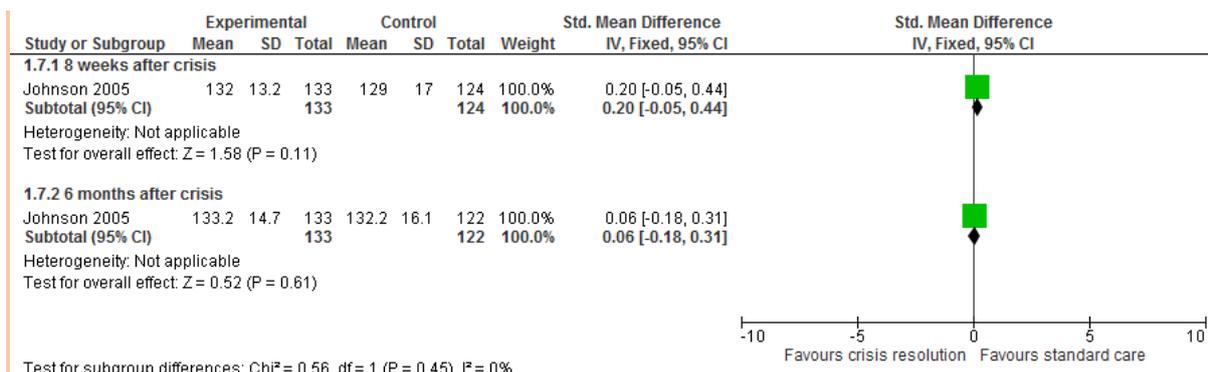
Quality of life (MANSA) 8 weeks after crisis



Social functioning (LSP)

Depression in adults: treatment and management

Forest plots



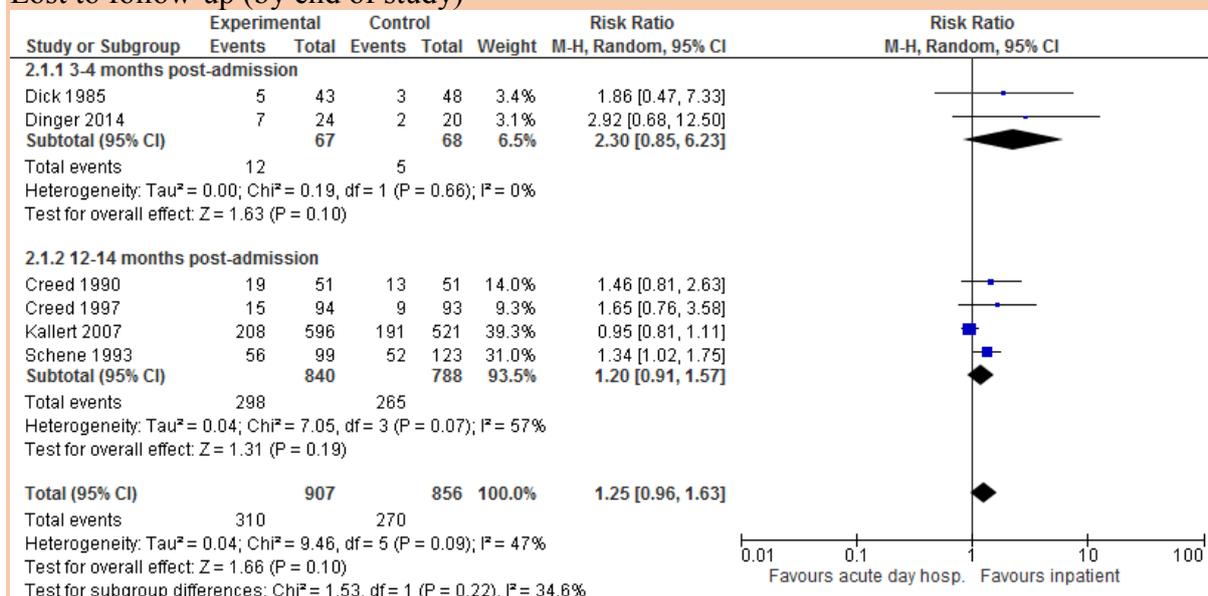
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Acute day hospital care versus inpatient care

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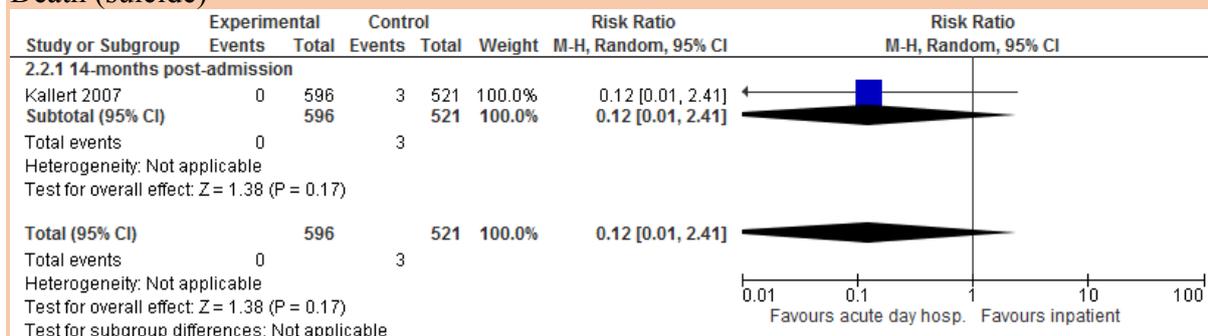
Lost to follow-up (by end of study)



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Death (suicide)



9

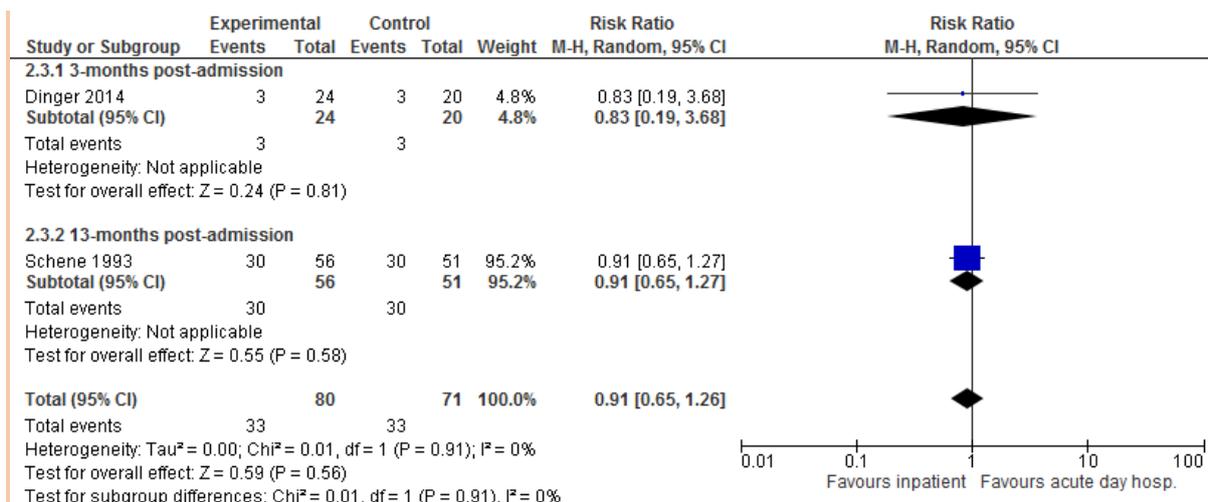
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Remission (HAM-D<7/Present State Examination: Index of Definition ≤4)

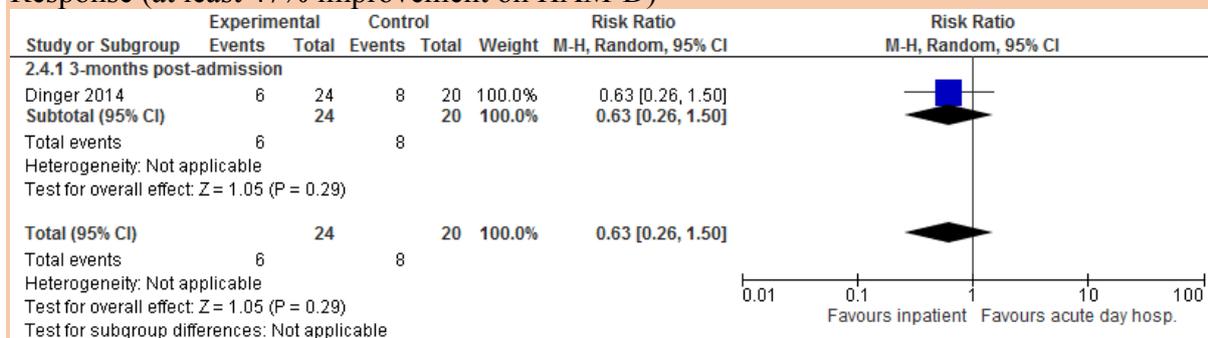
Depression in adults: treatment and management

Forest plots



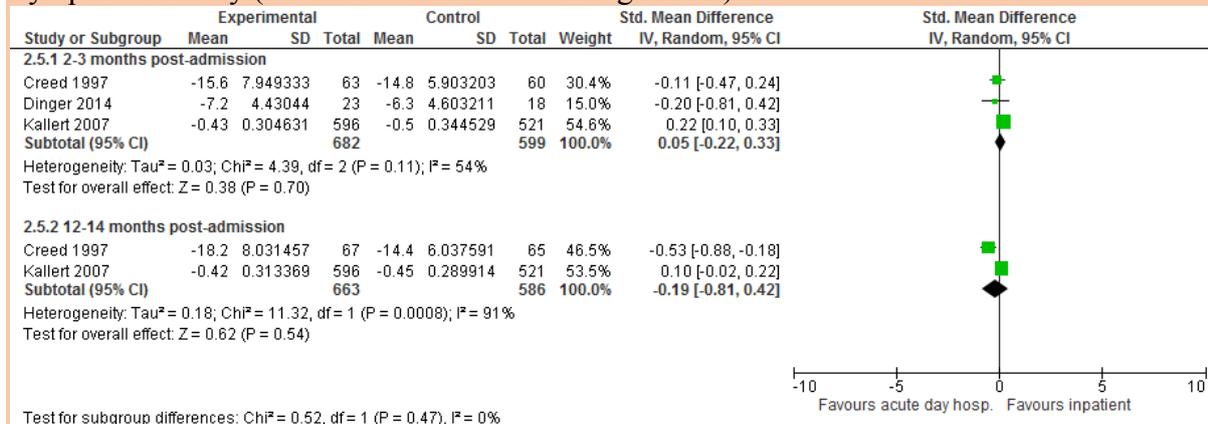
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Response (at least 47% improvement on HAM-D)



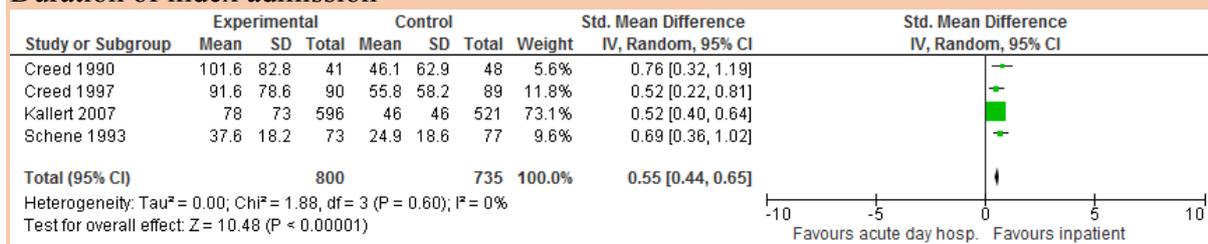
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Symptom severity (BPRS/CPRS/HAM-D change score)



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Duration of index admission

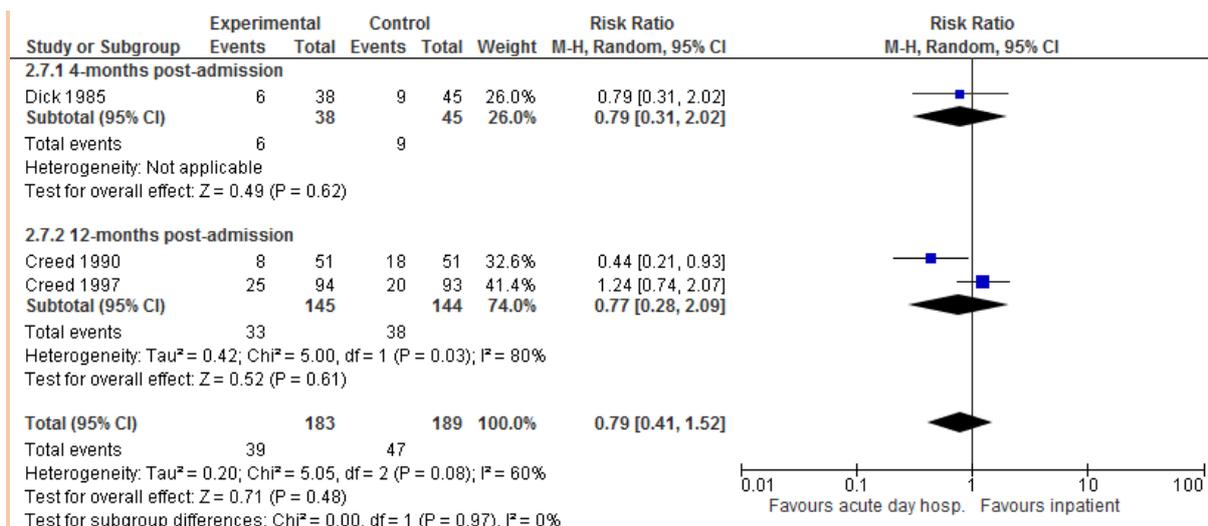


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Readmission

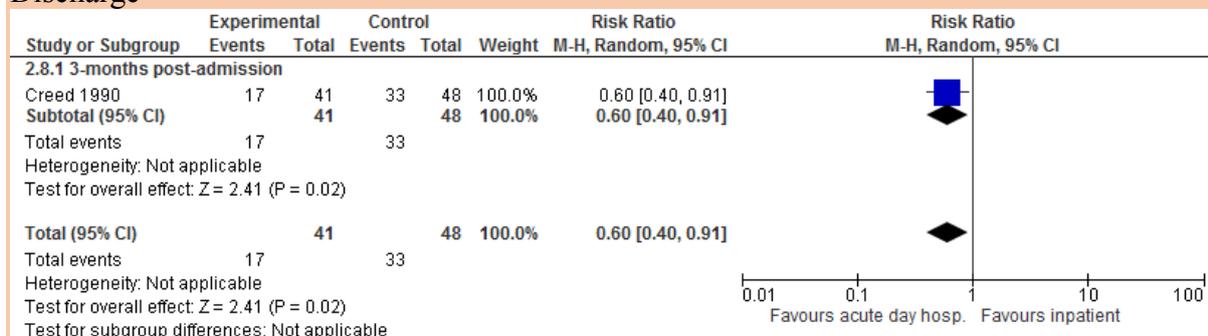
Depression in adults: treatment and management

Forest plots



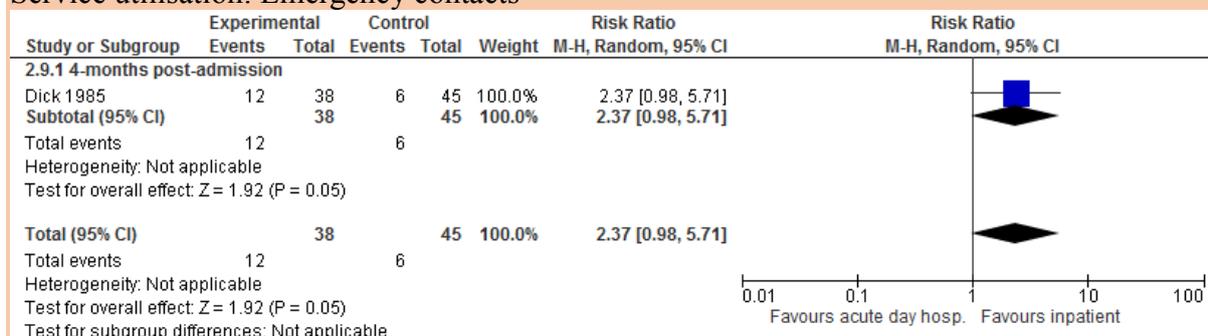
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Discharge



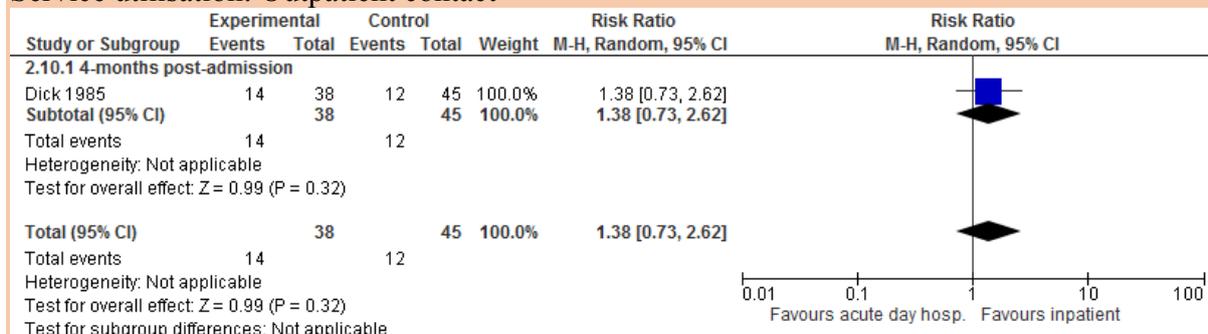
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Service utilisation: Emergency contacts



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Service utilisation: Outpatient contact



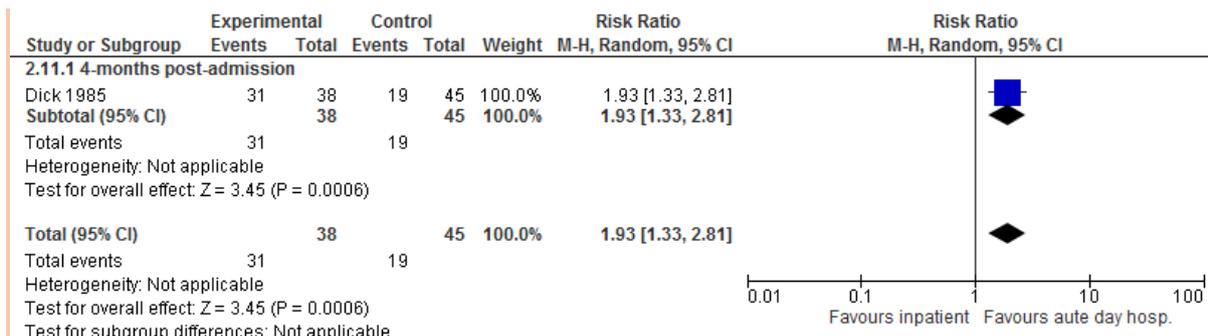
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Satisfaction (number of participants satisfied or very satisfied with their treatment)

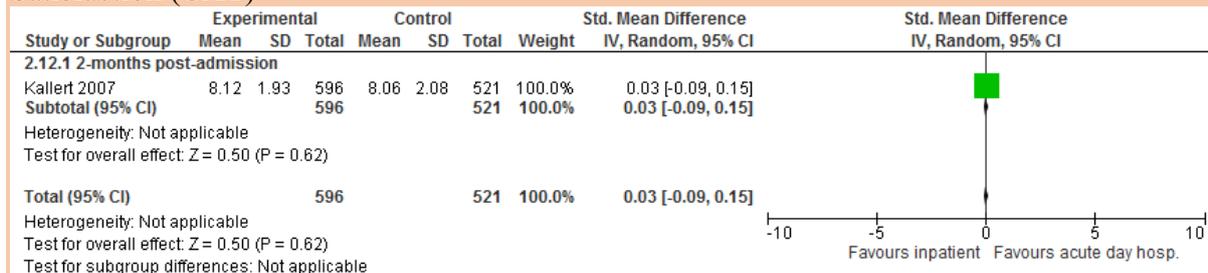
Depression in adults: treatment and management

Forest plots

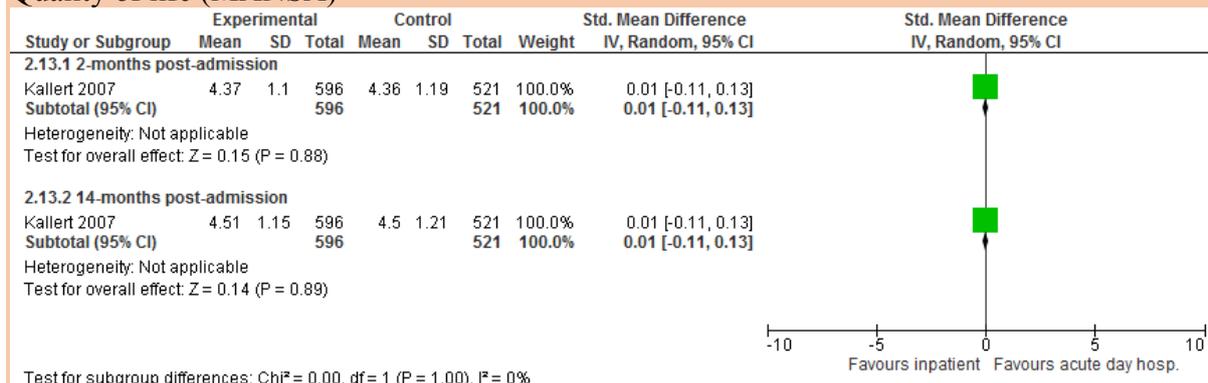
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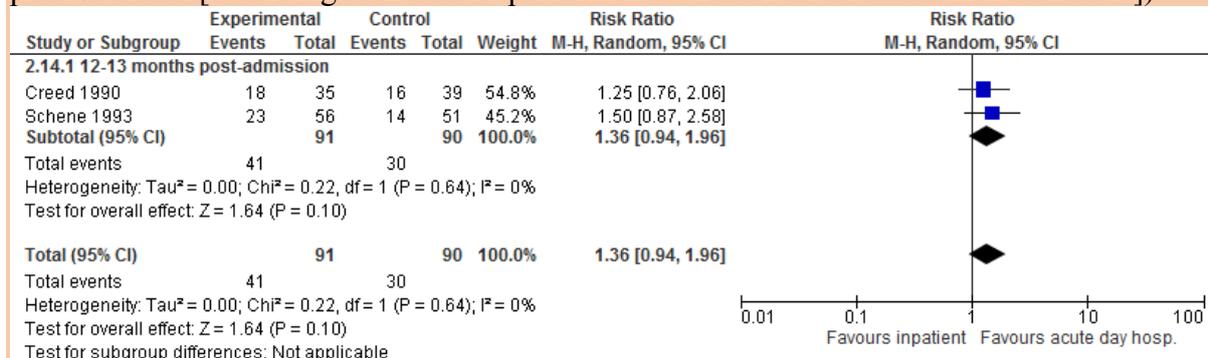
Satisfaction (CAT)



Quality of life (MANSA)



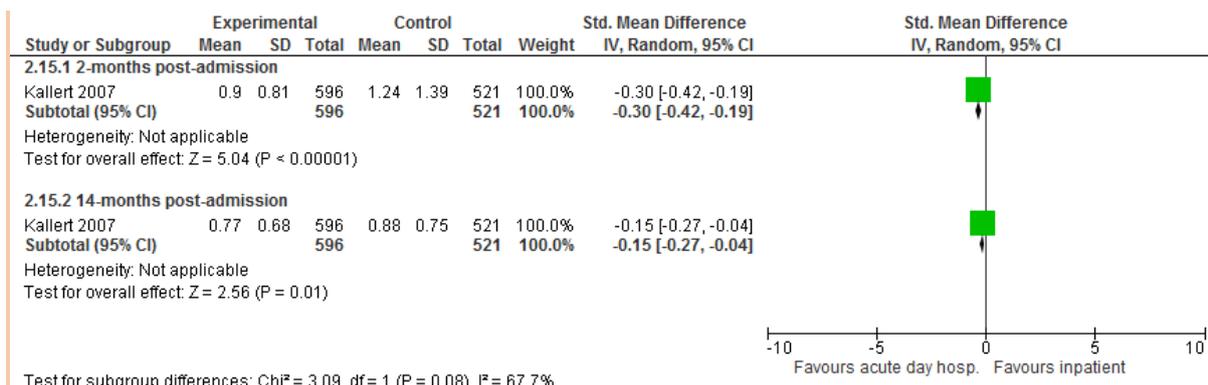
Social functioning response (2 role disabilities or less on Groningen Social Disabilities Schedule [GSDS]/number of participants living in the community and social functioning at previous level [according to the social performance and behaviour assessment schedule])



Social functioning impairment (GSDS-II)

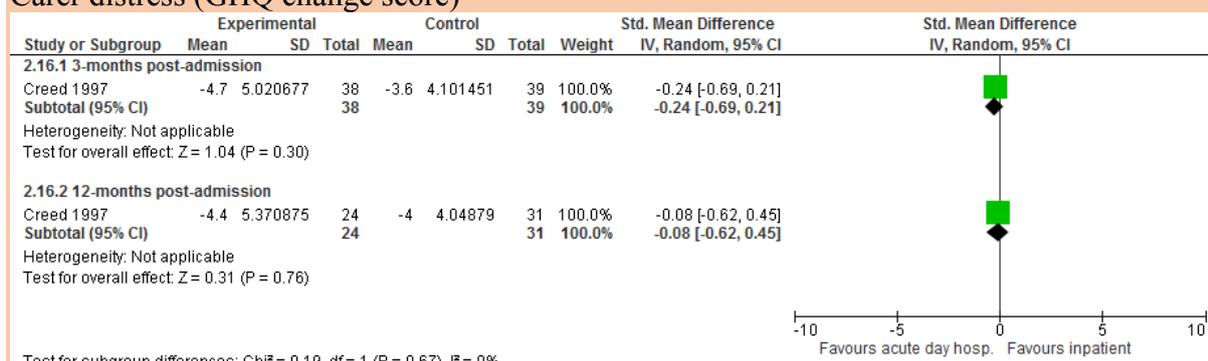
Depression in adults: treatment and management

Forest plots



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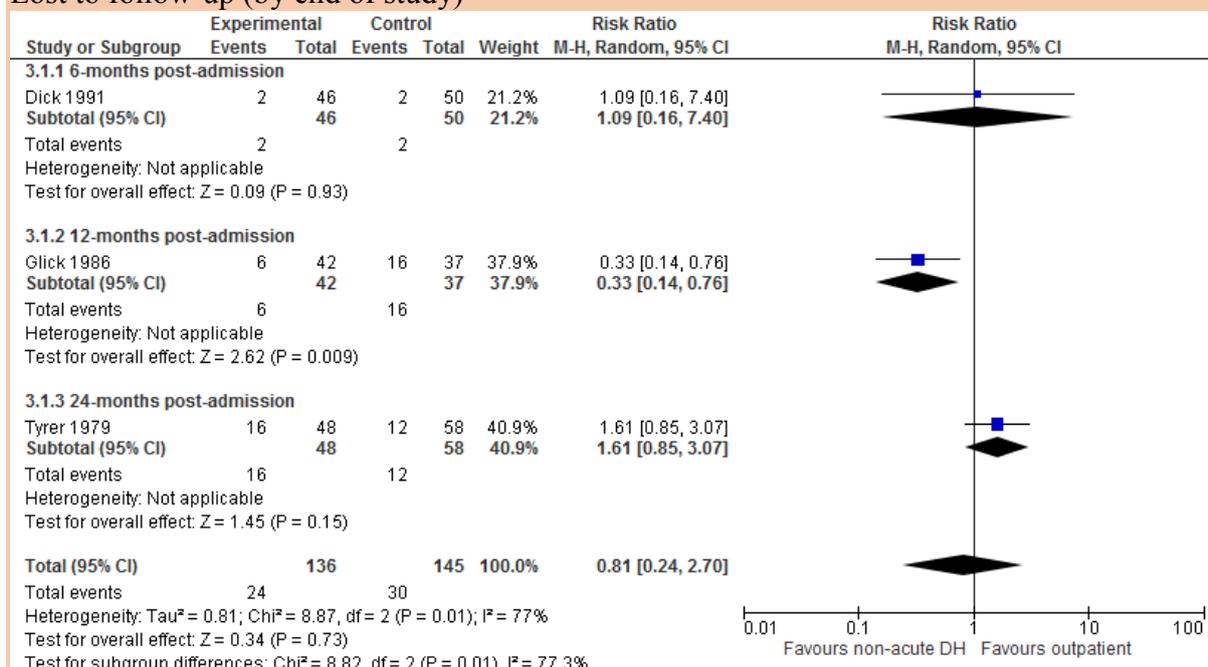
Carer distress (GHQ change score)



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Non-acute day hospital care versus outpatient care

Lost to follow-up (by end of study)



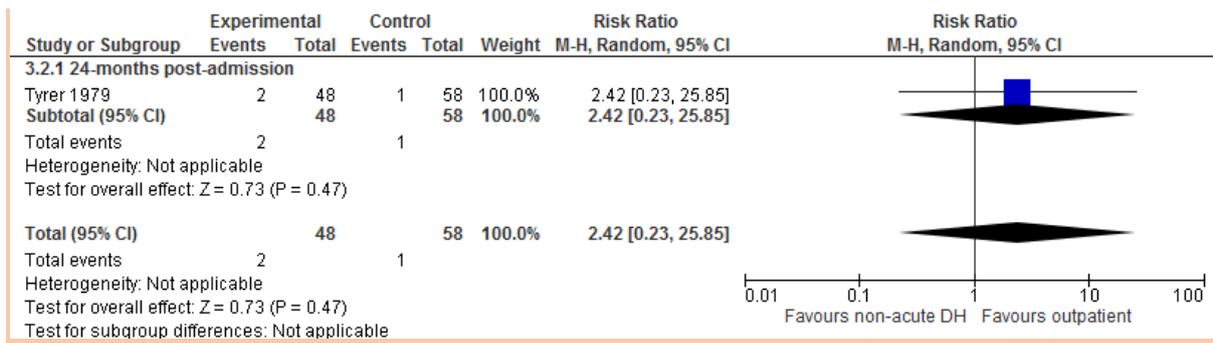
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Death (all causes)

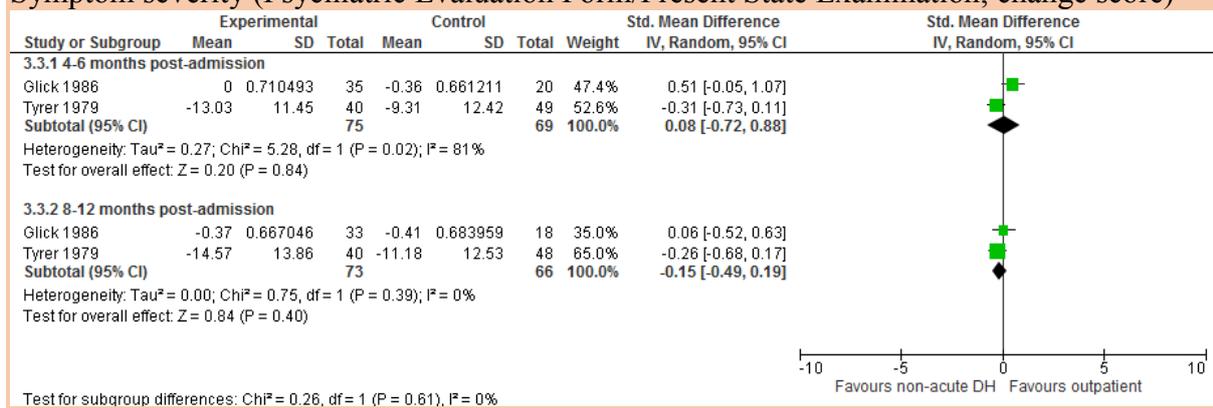
Depression in adults: treatment and management

Forest plots

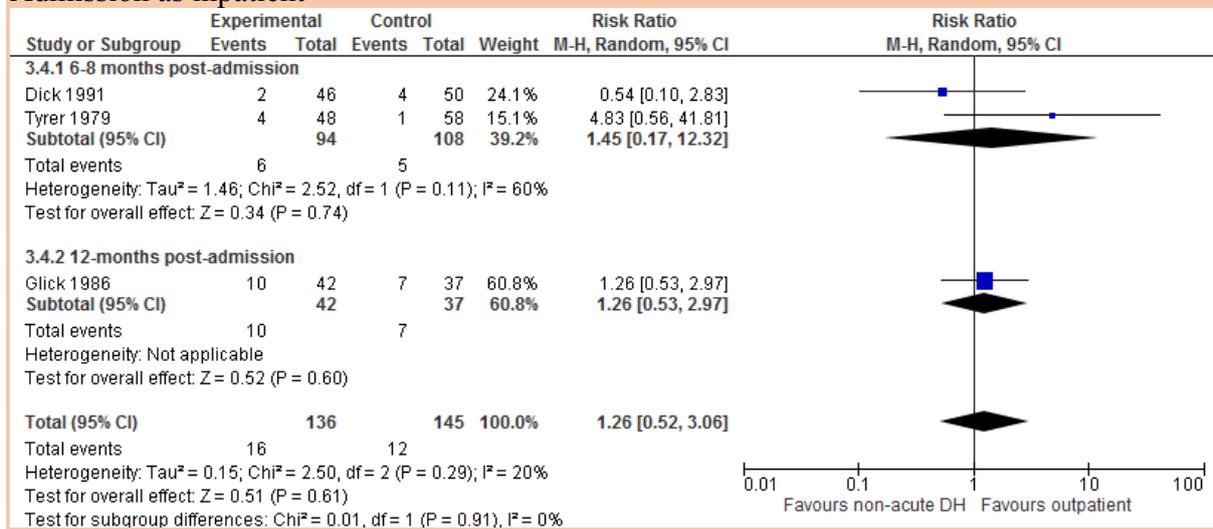
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Symptom severity (Psychiatric Evaluation Form/Present State Examination; change score)



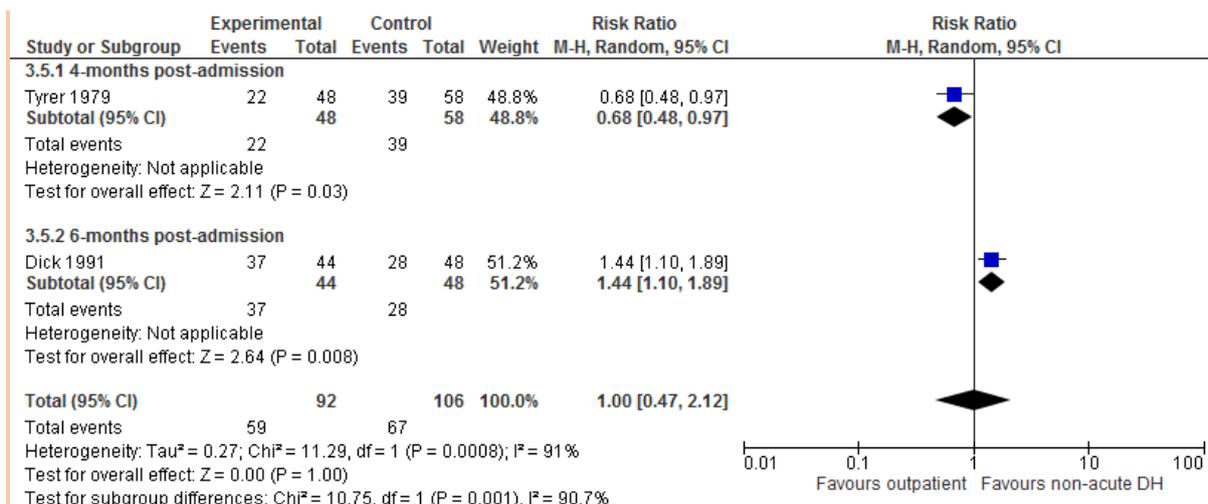
Admission as inpatient



Satisfaction (number of participants satisfied or very satisfied with their treatment)

Depression in adults: treatment and management

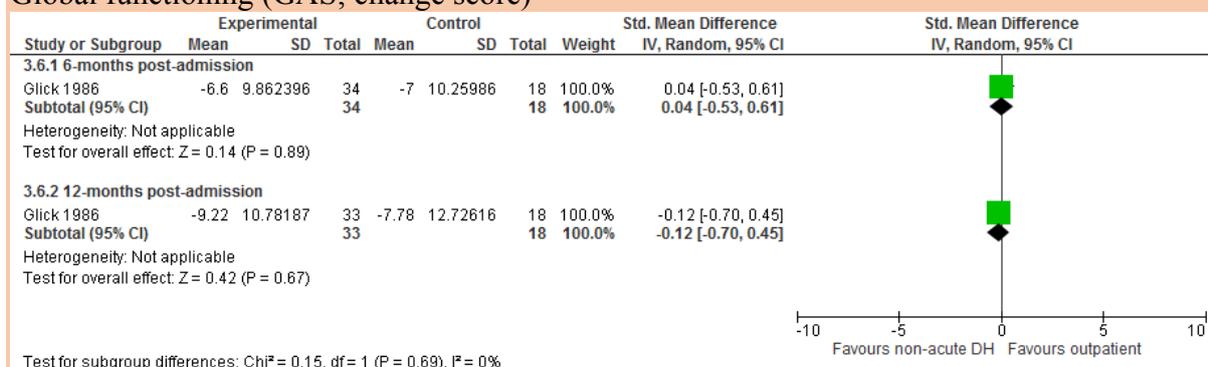
Forest plots



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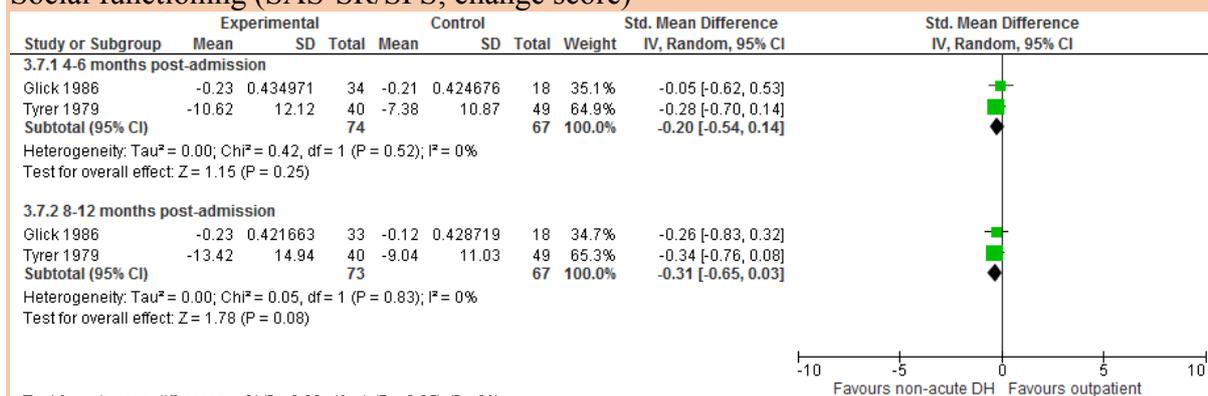
3 Global functioning (GAS; change score)



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6 Social functioning (SAS-SR/SFS; change score)



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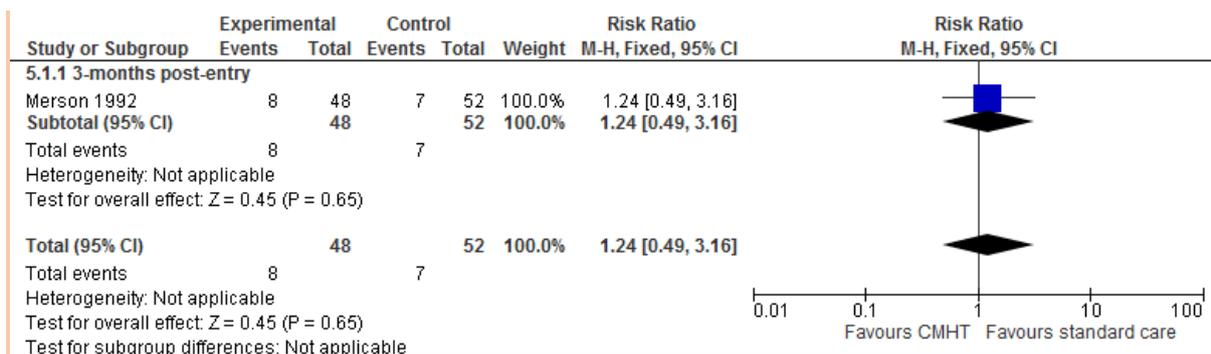
9 Community mental health teams (CMHTs) versus standard care

10

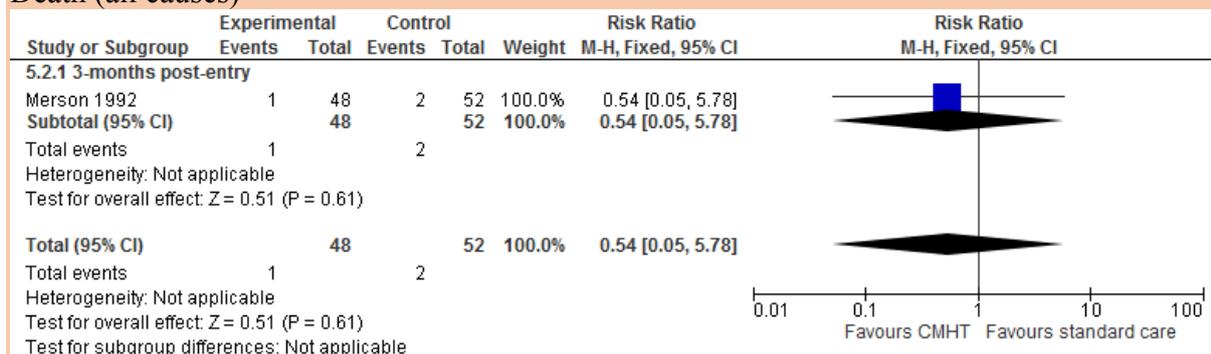
11 Lost to follow-up (by end of study)

Depression in adults: treatment and management

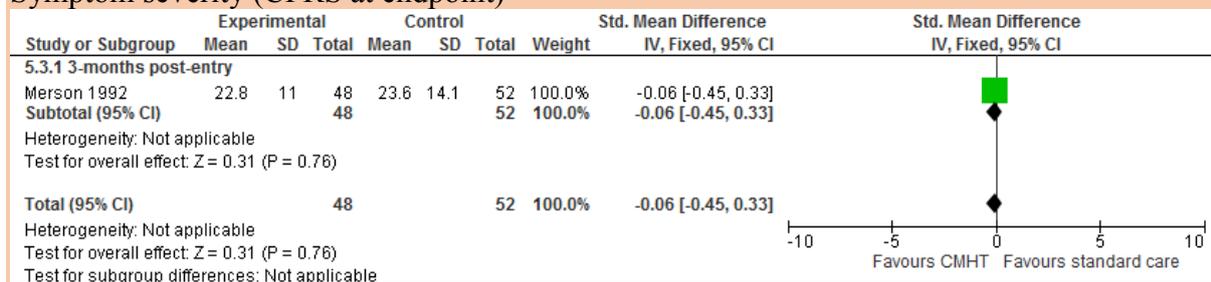
Forest plots



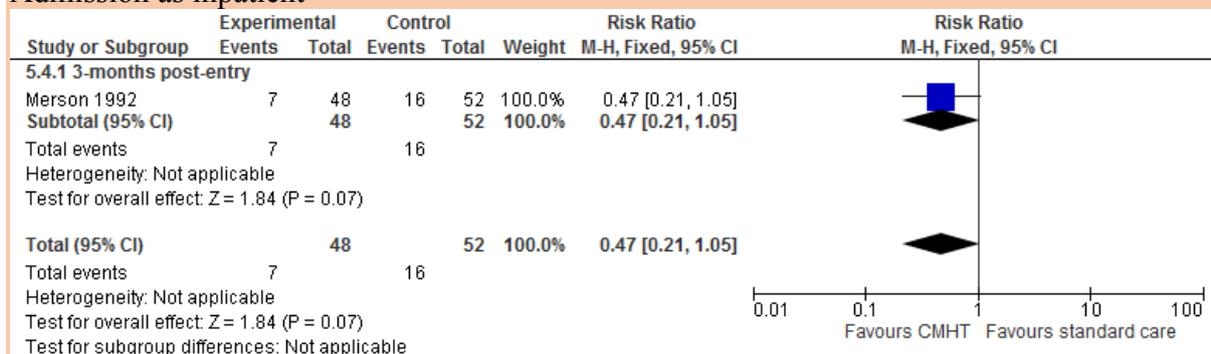
Death (all causes)



Symptom severity (CPRS at endpoint)

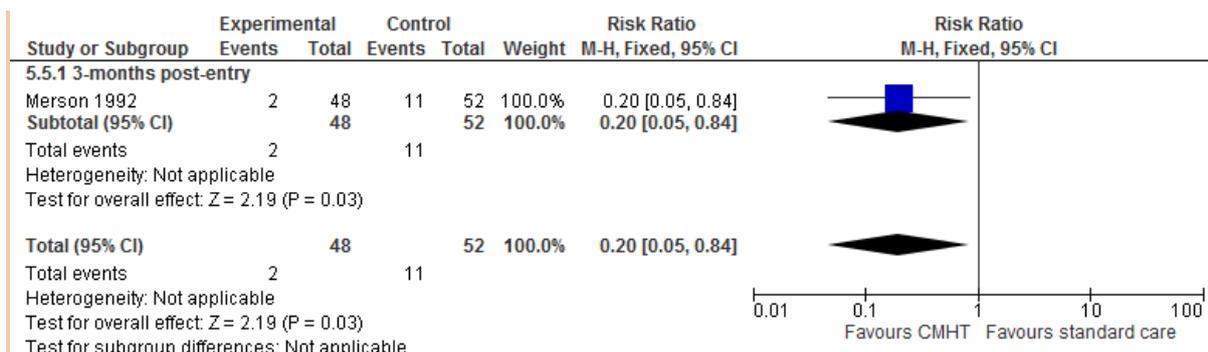


Admission as inpatient



Admission as inpatient for >10 days

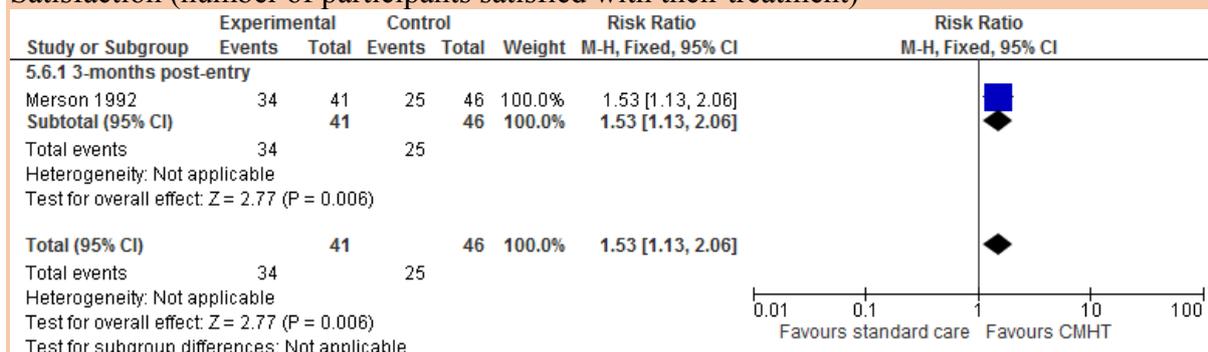
Depression in adults: treatment and management
Forest plots



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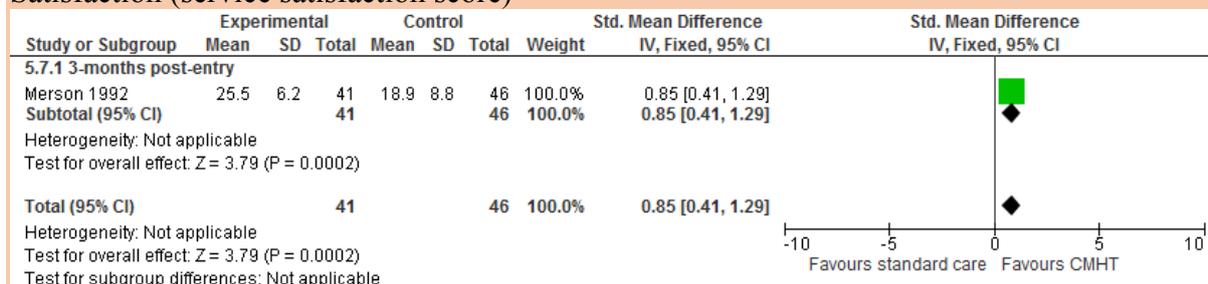
Satisfaction (number of participants satisfied with their treatment)



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Satisfaction (service satisfaction score)



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Depression in adults: treatment and management
Forest plots

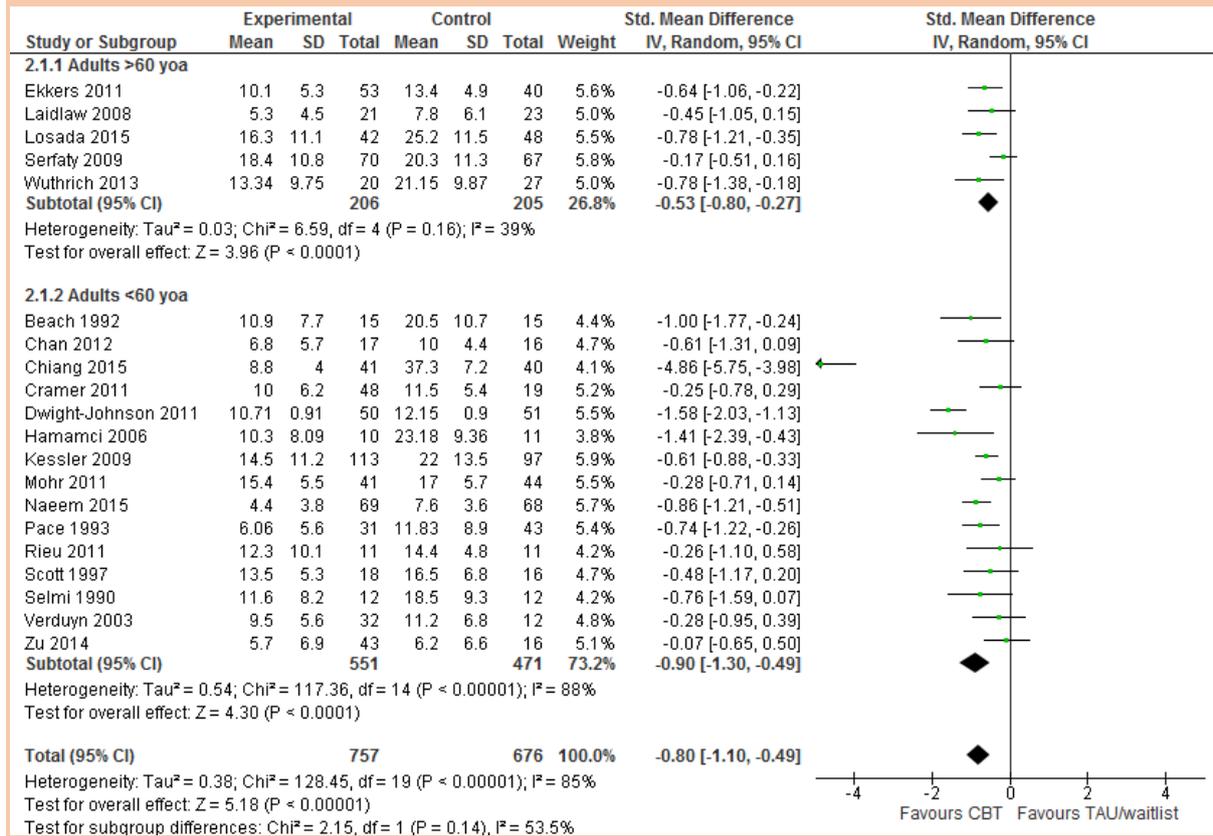
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First-line treatment (chapter 7) - NMA subgroup analysis for special populations

Older adults

CBT versus TAU/waitlist

Depression symptomatology at endpoint



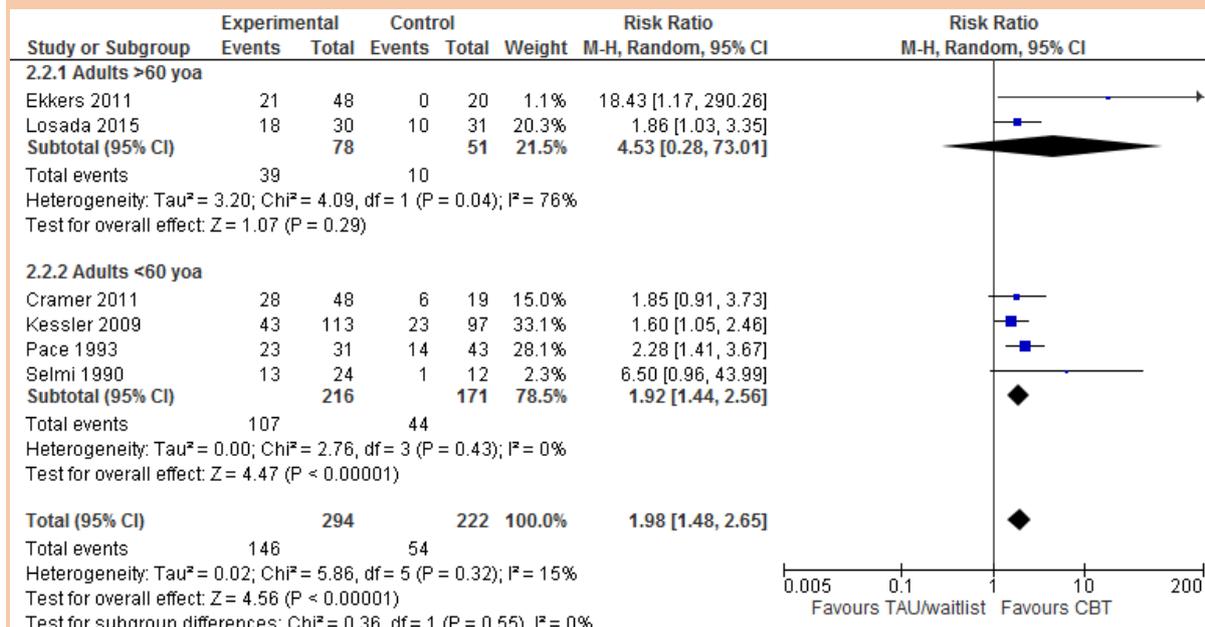
8

Depression in adults: treatment and management

Forest plots

1 Remission at endpoint

2

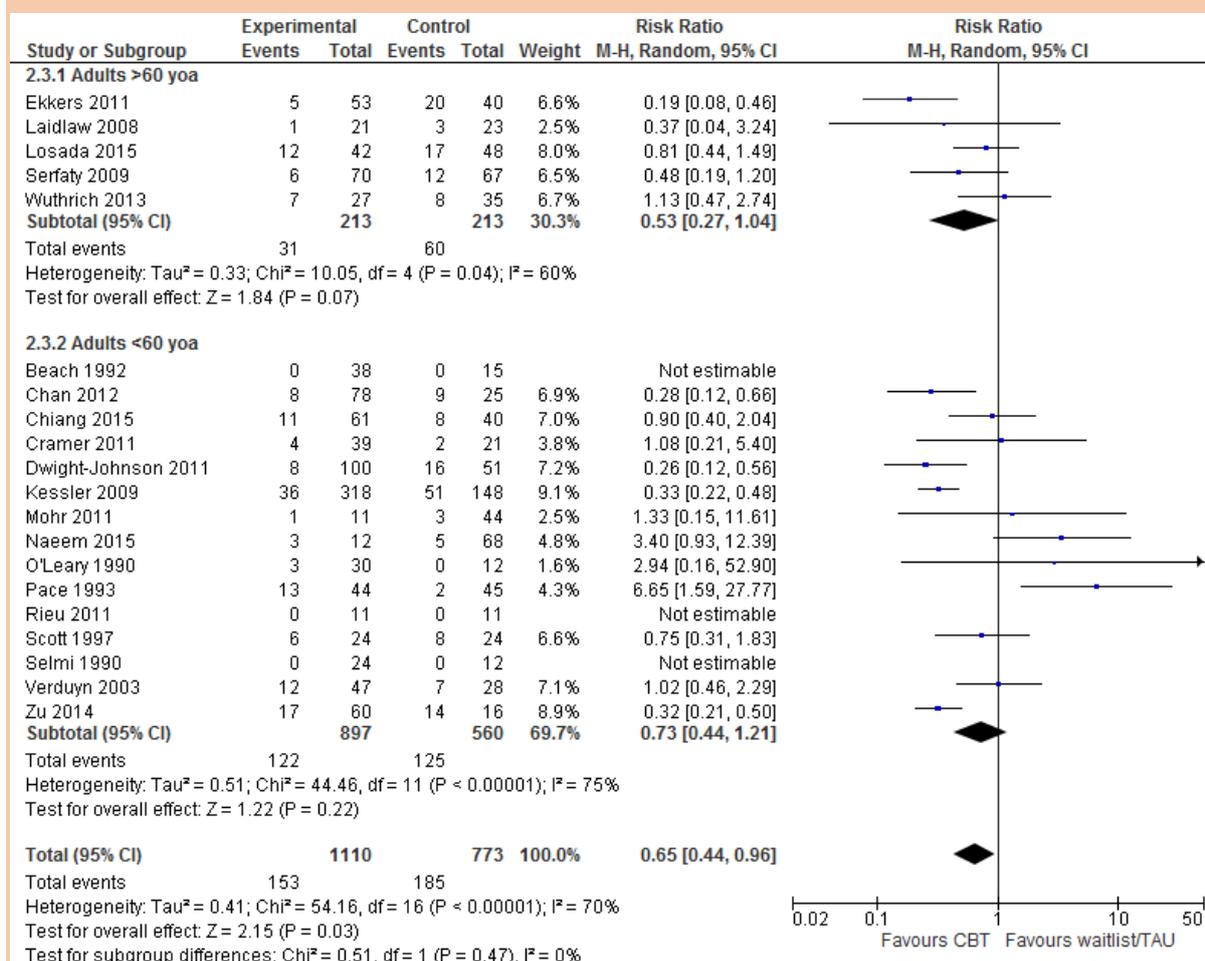


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5 Discontinuation any reason

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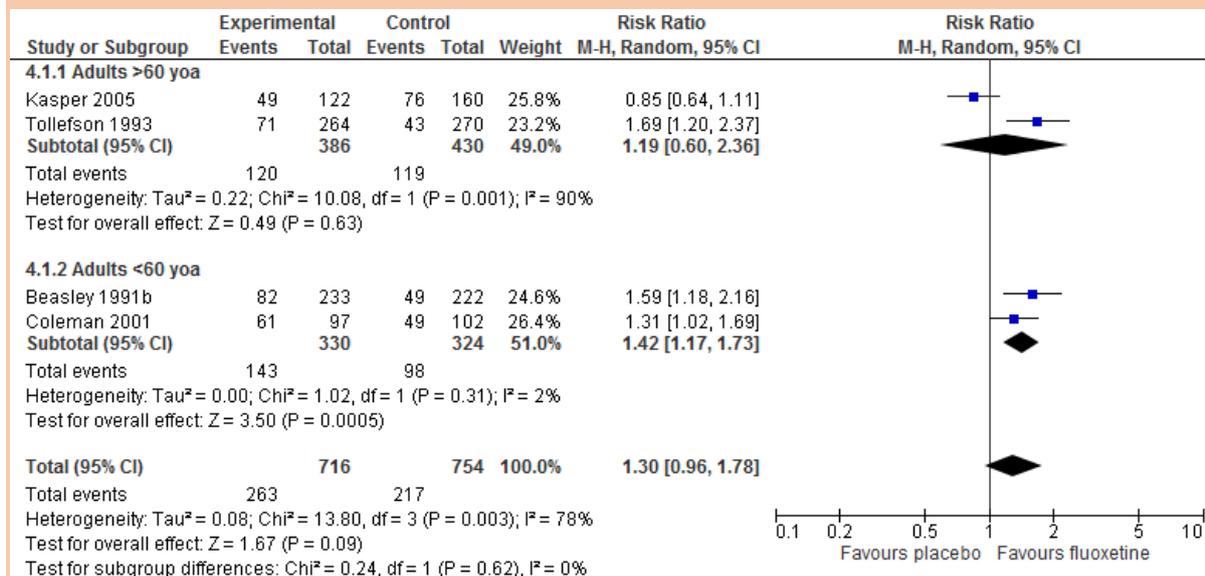
Depression in adults: treatment and management

Forest plots

1 Fluoxetine versus placebo

2 Remission at endpoint

3

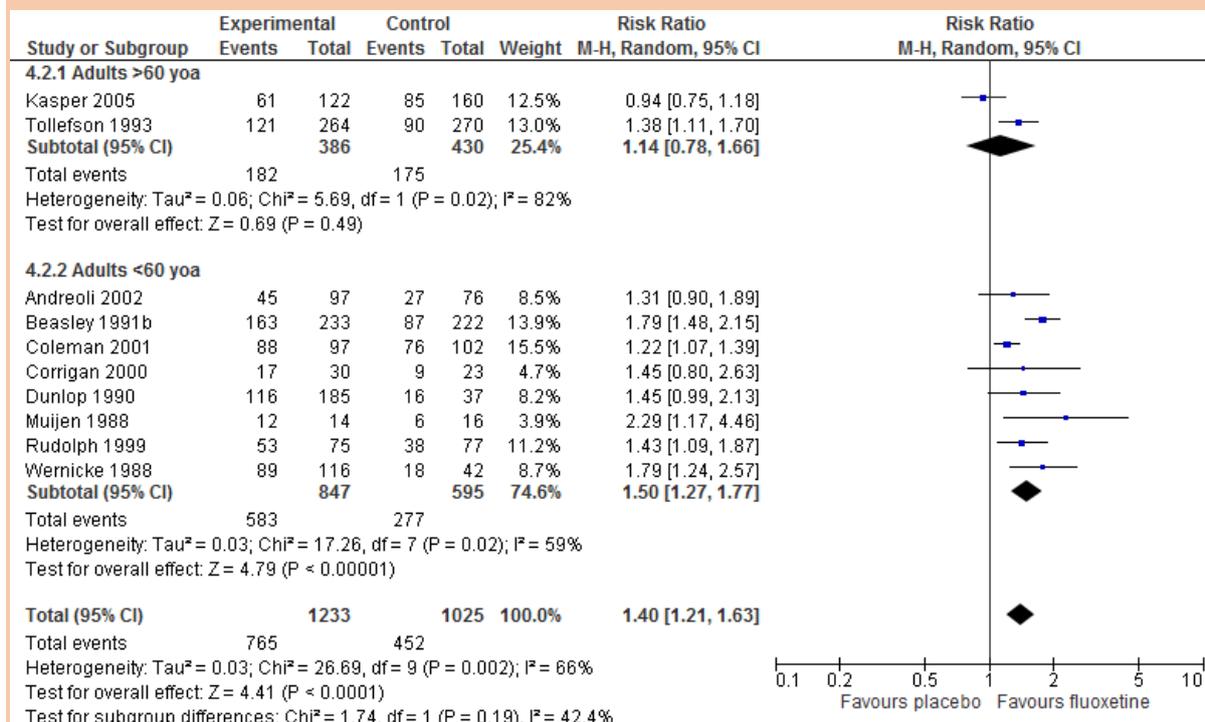


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6 Response at endpoint

7



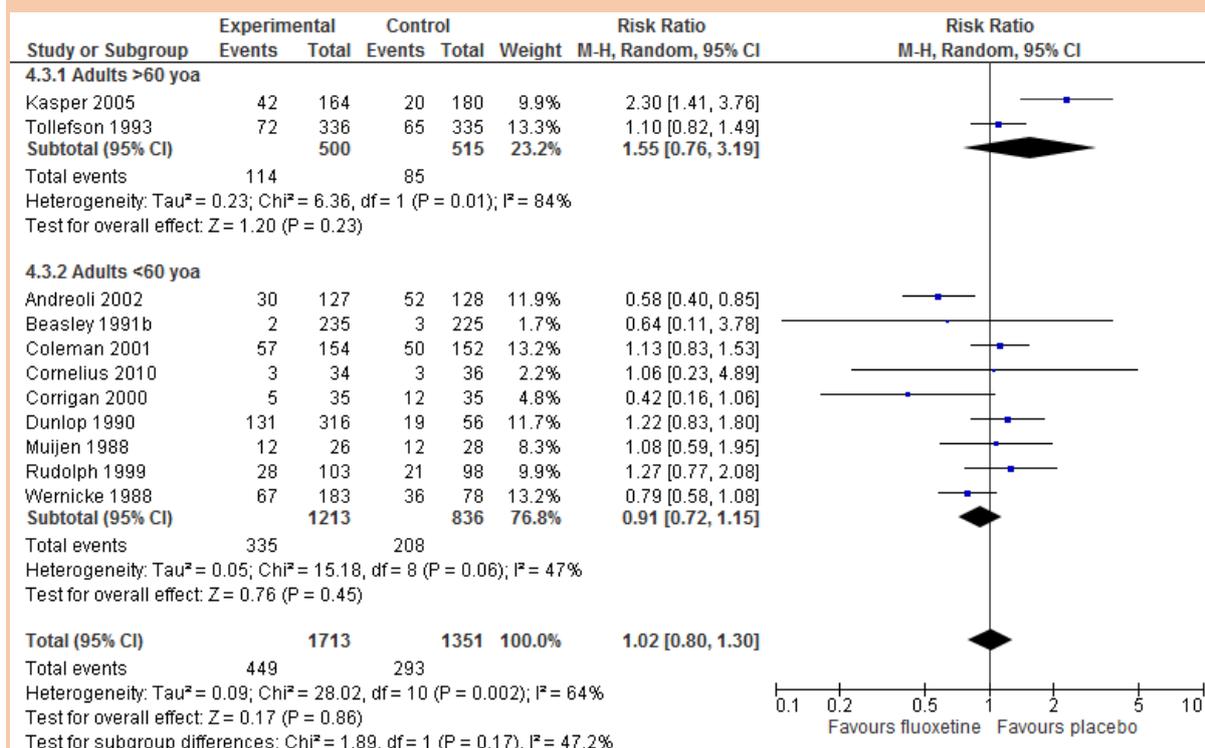
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Depression in adults: treatment and management

Forest plots

1 Discontinuation any reason



2

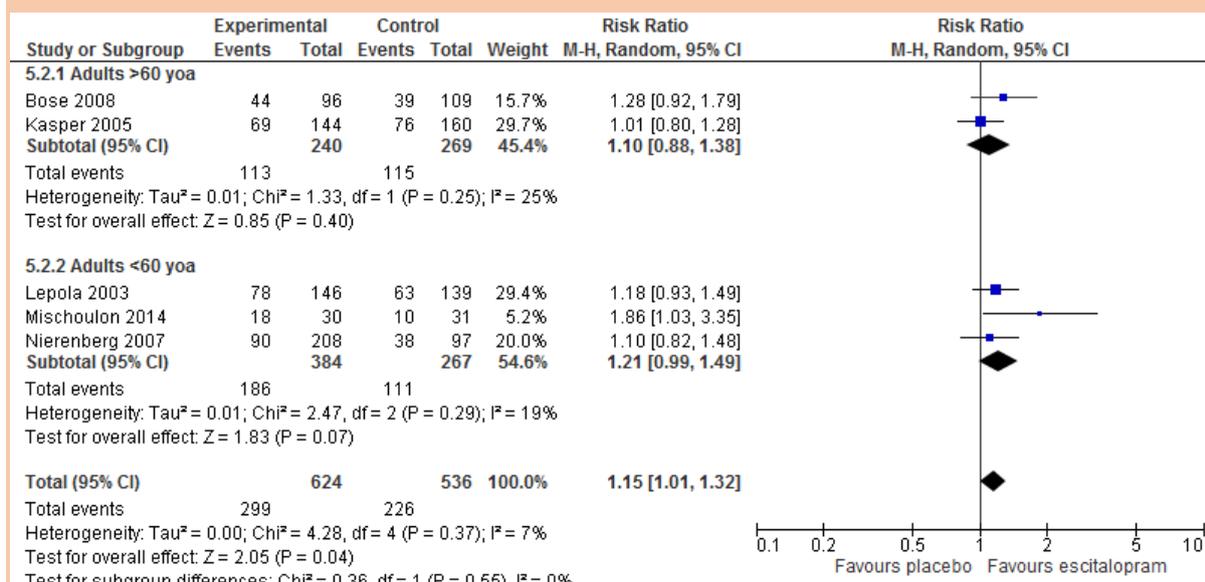
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5 Escitalopram versus placebo

6 Remission at endpoint

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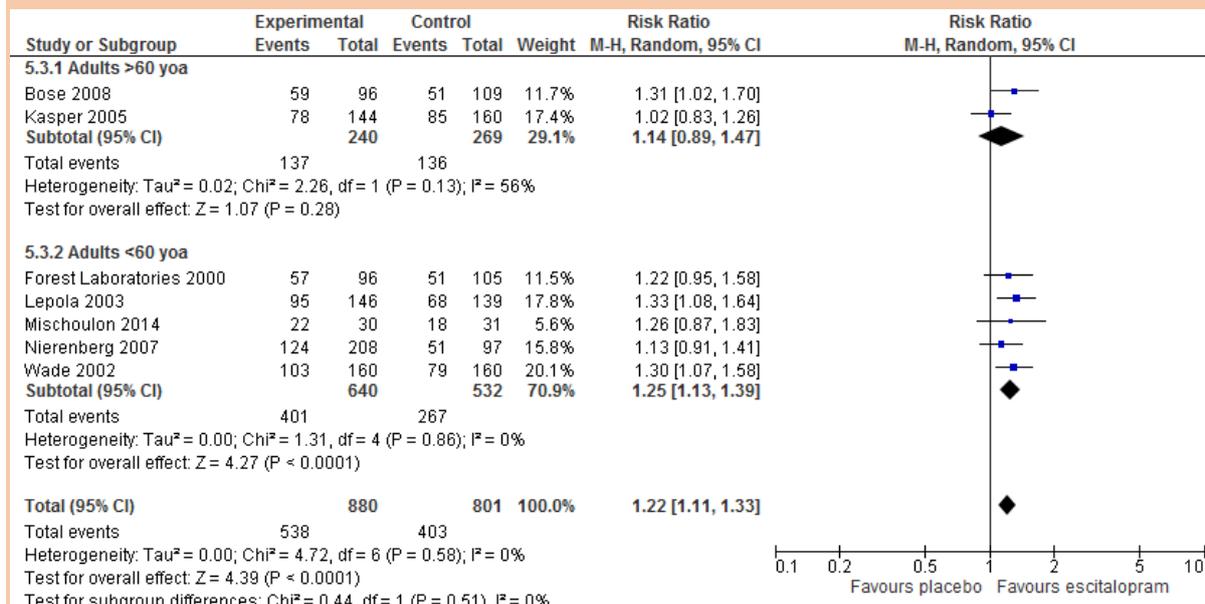
9

Depression in adults: treatment and management

Forest plots

1 Response at endpoint

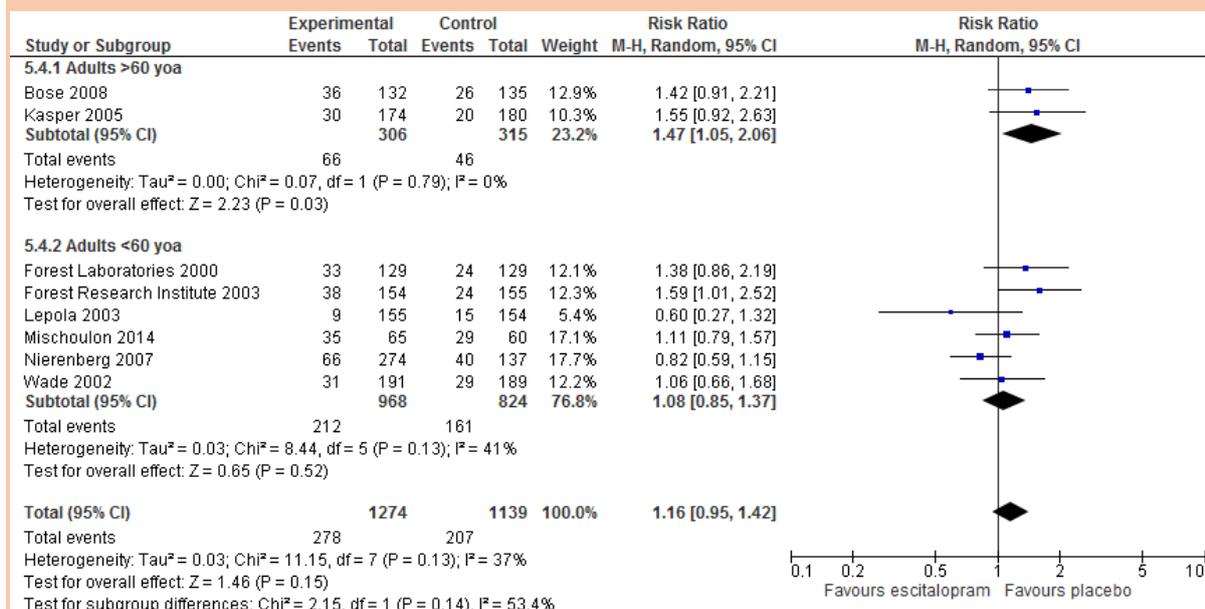
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5 Discontinuation any reason



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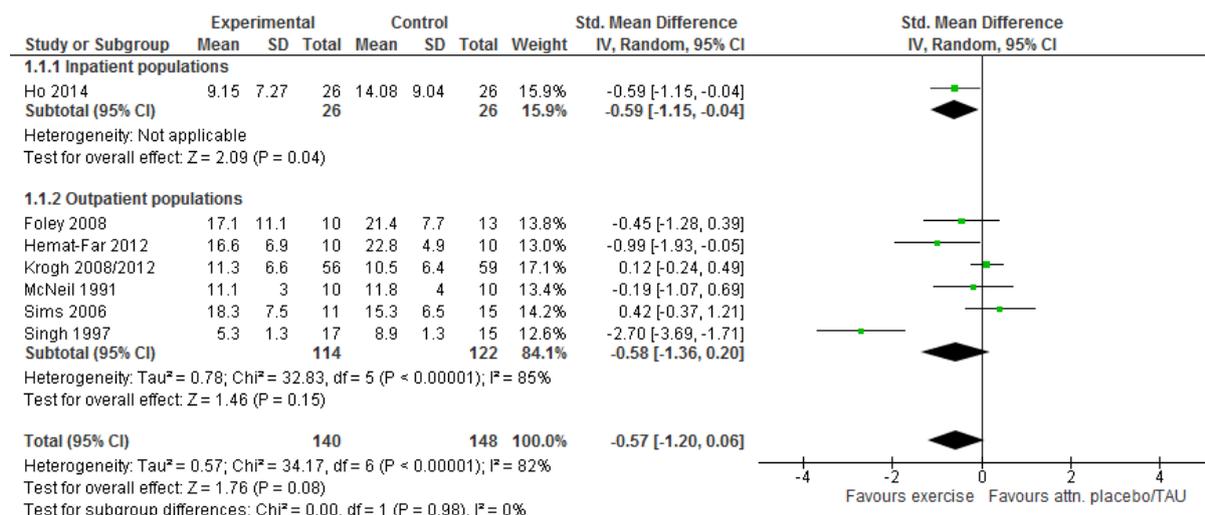
9 Inpatients

10 Exercise versus attention placebo/TAU

11 Depression symptomatology at endpoint

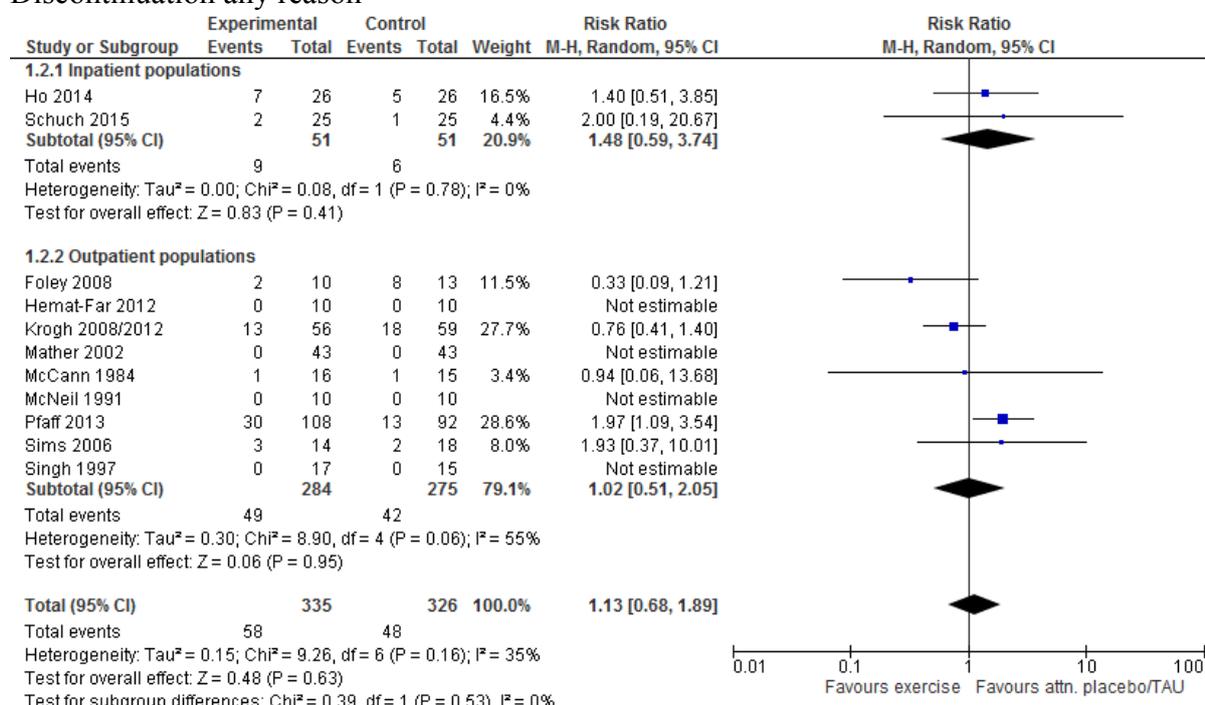
Depression in adults: treatment and management

Forest plots



1

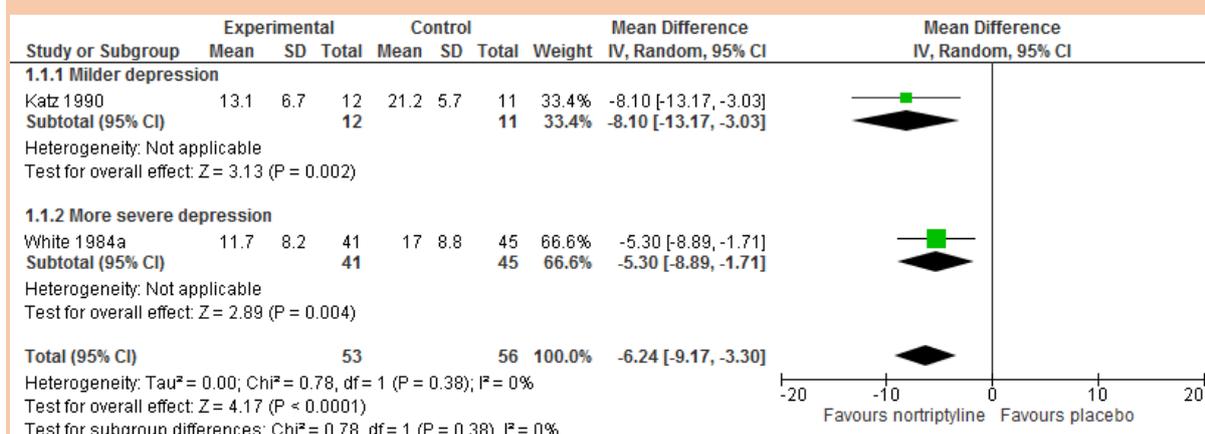
2 Discontinuation any reason



3

4 Nortriptyline in older adults

5 Depressive symptoms at endpoint (HAMD)

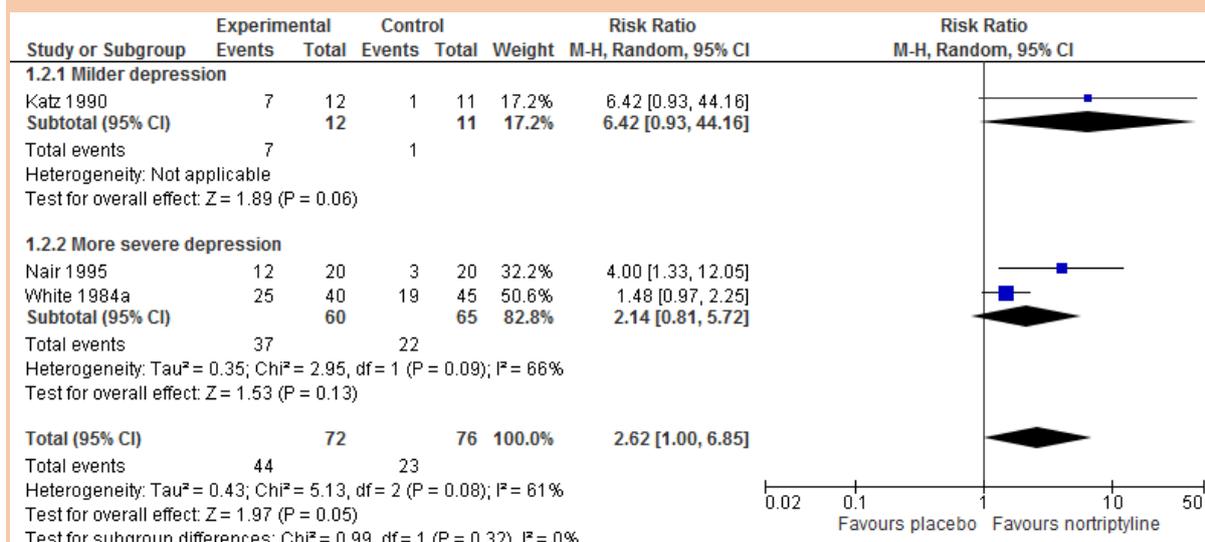


6

Depression in adults: treatment and management

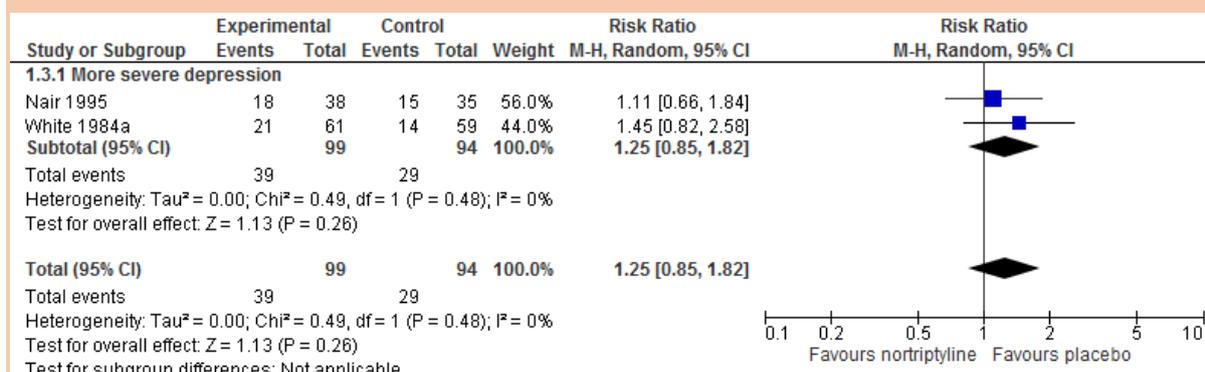
Forest plots

1 Remission (CGI/HAMD) at endpoint



2

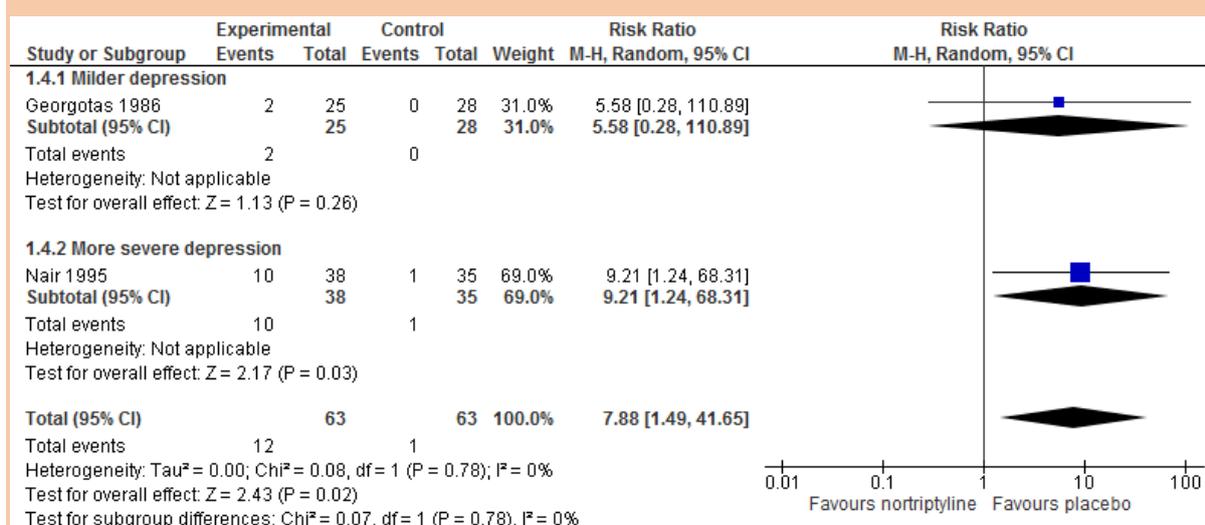
3 Discontinuation



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6 Discontinuation due to side effects



7

Depression in adults: treatment and management

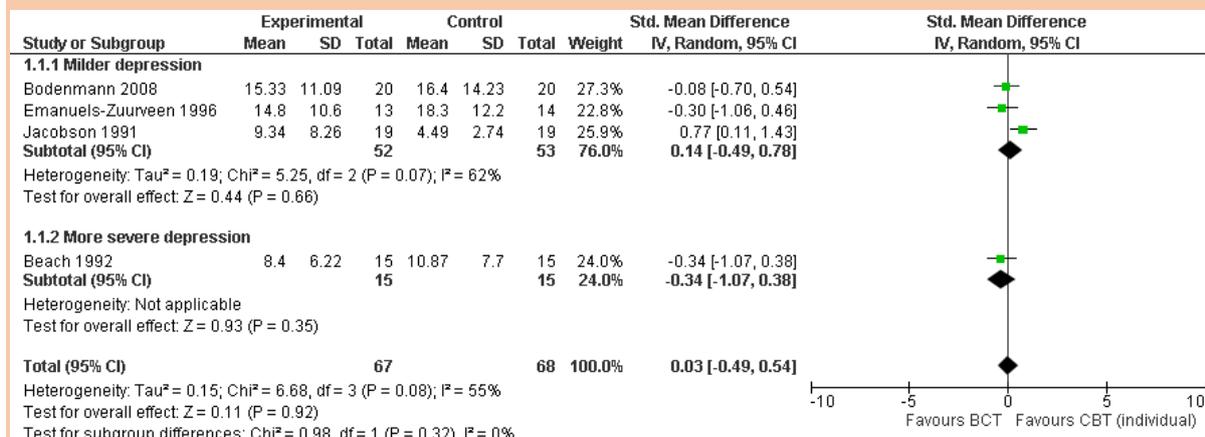
Forest plots

1 Pairwise comparisons for interventions excluded from the NMA

2 Behavioural couples therapy

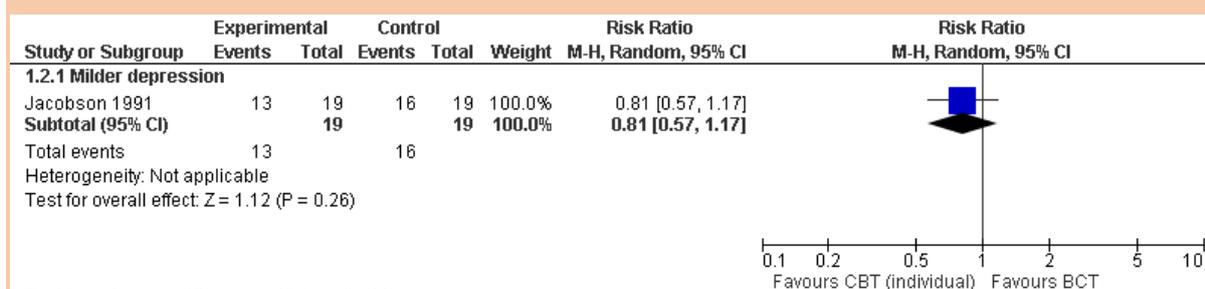
3 Behavioural couples therapy versus CBT

4 Depression symptomatology at endpoint: milder depression and more severe depression



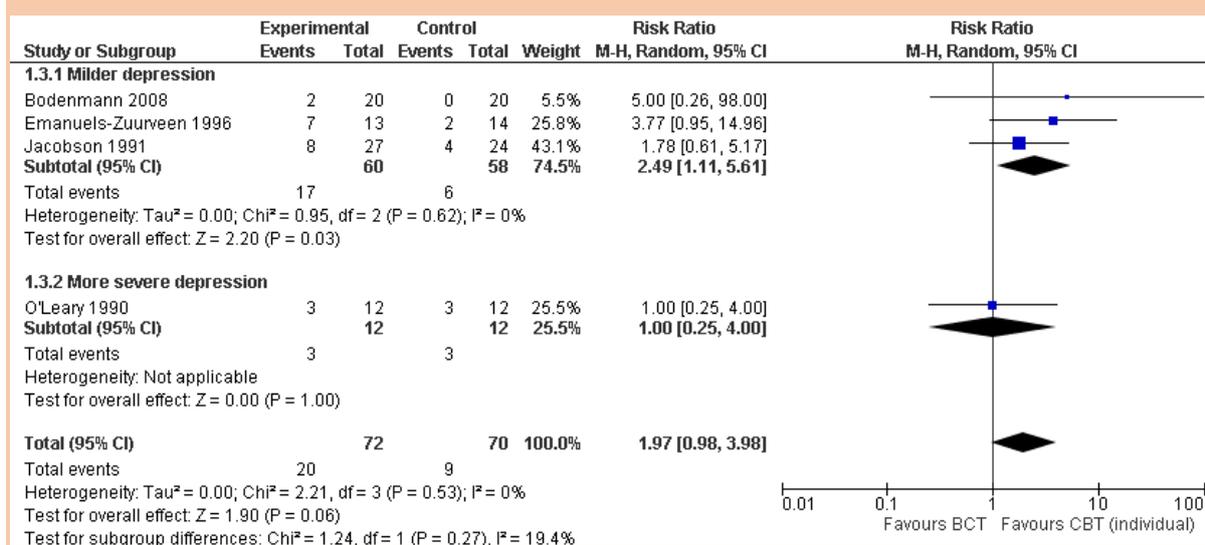
5

6 Remission: milder depression



7 Test for subgroup differences: Not applicable

8 Treatment discontinuation: milder depression and more severe depression



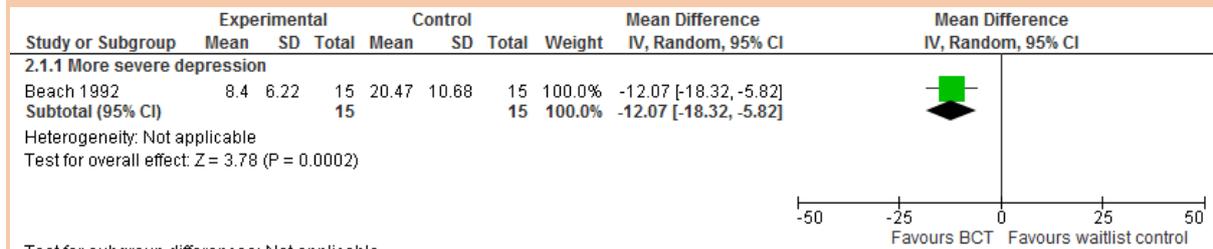
9 Test for subgroup differences: Chi² = 1.24, df = 1 (P = 0.27), I² = 19.4%

10

Depression in adults: treatment and management
Forest plots

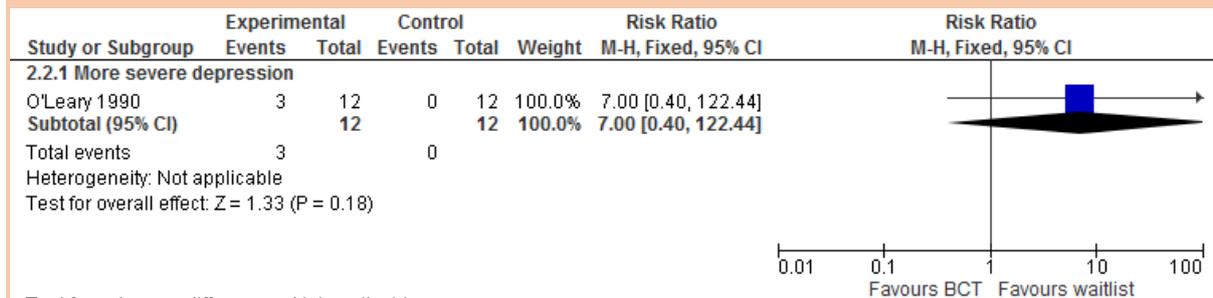
1 Behavioural couples therapy versus waitlist control

2 Depression symptoms at endpoint



3 Test for subgroup differences: Not applicable

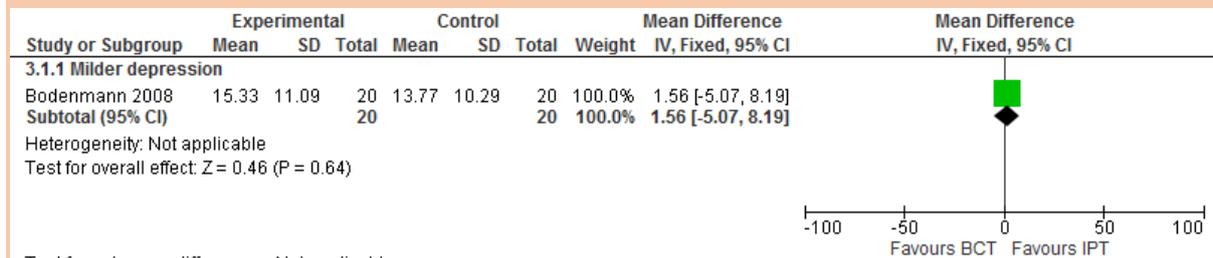
4 Treatment discontinuation



5 Test for subgroup differences: Not applicable

6 Behavioural couples therapy versus interpersonal psychotherapy (IPT)

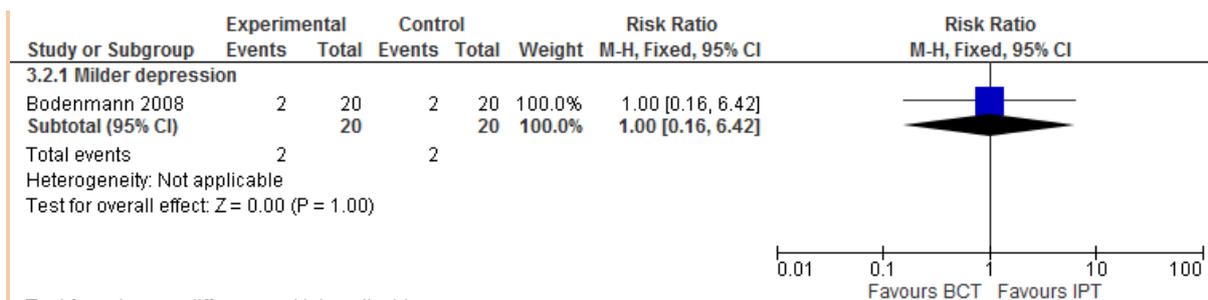
7 Depression symptoms at endpoint



8 Test for subgroup differences: Not applicable

9 Treatment discontinuation

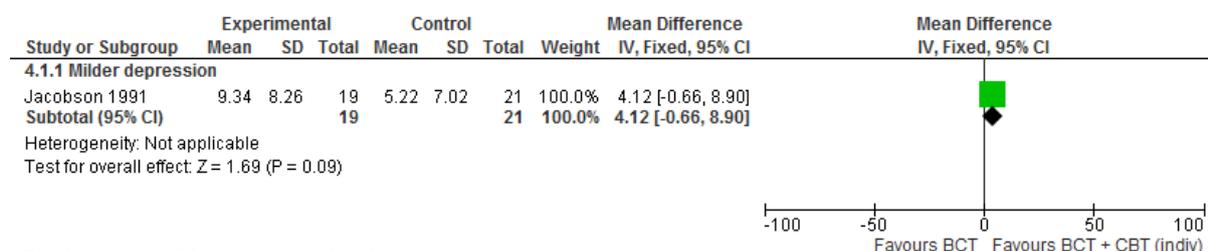
Depression in adults: treatment and management
Forest plots



1 Test for subgroup differences: Not applicable

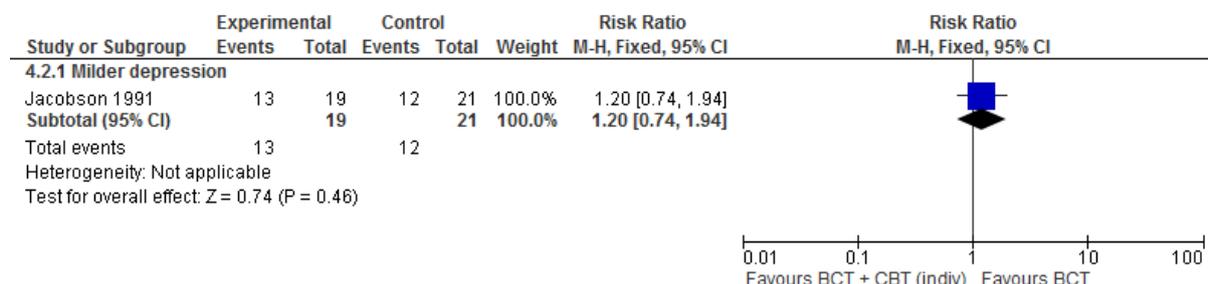
2 Behavioural couples therapy (BCT) versus combined BCT and CBT (individual CBT for the depressed wife)

4 Depression symptoms at endpoint



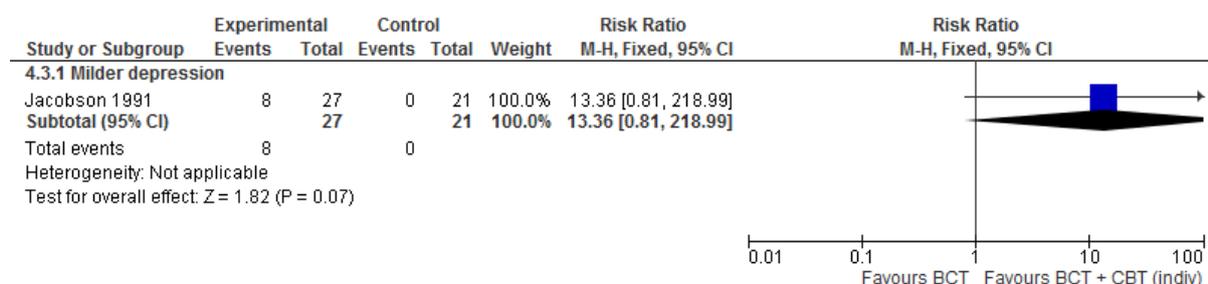
5 Test for subgroup differences: Not applicable

7 Remission



8 Test for subgroup differences: Not applicable

11 Treatment discontinuation



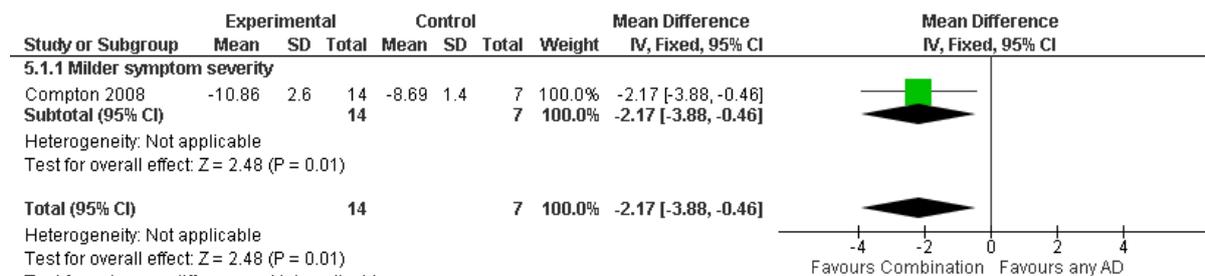
12 Test for subgroup differences: Not applicable

13
14 Behavioural couples therapy + any antidepressant versus any antidepressant

15 Depression symptomatology: milder depression severity

Depression in adults: treatment and management

Forest plots



1

Acupuncture

2

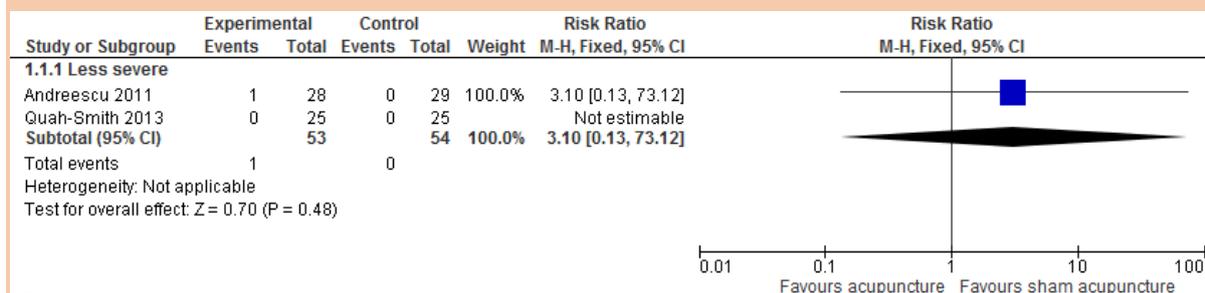
Acupuncture versus sham acupuncture

3

Discontinuation due to side effects

4

5



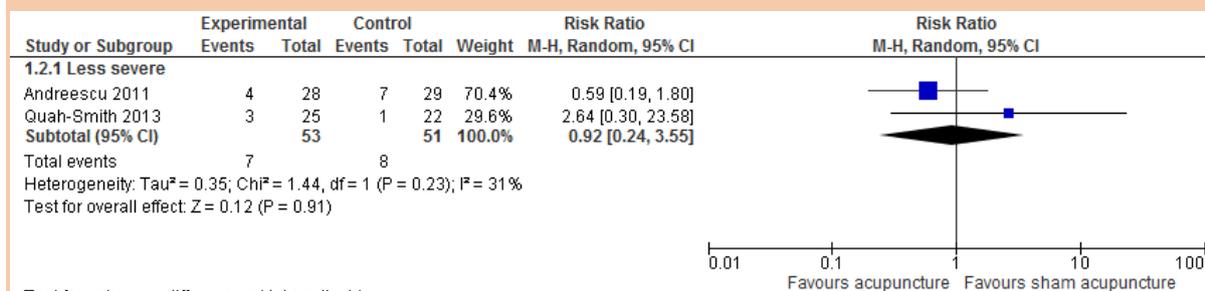
6

Test for subgroup differences: Not applicable

Discontinuation for any reason

7

8

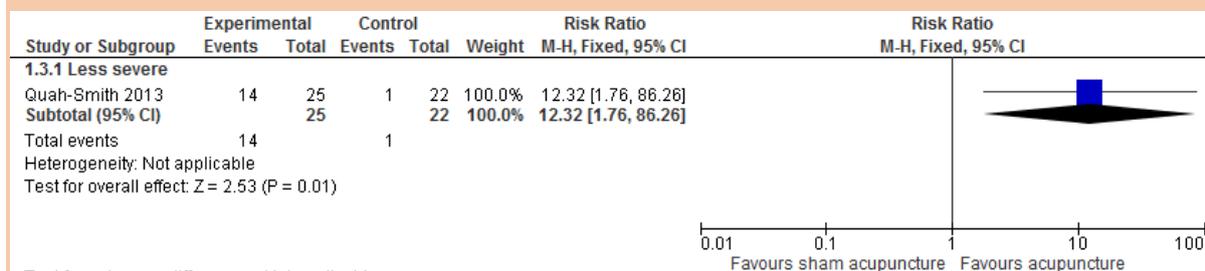


9

Test for subgroup differences: Not applicable

Remission (HAMD endpoint score of 7 or below)

10



11

Test for subgroup differences: Not applicable

12

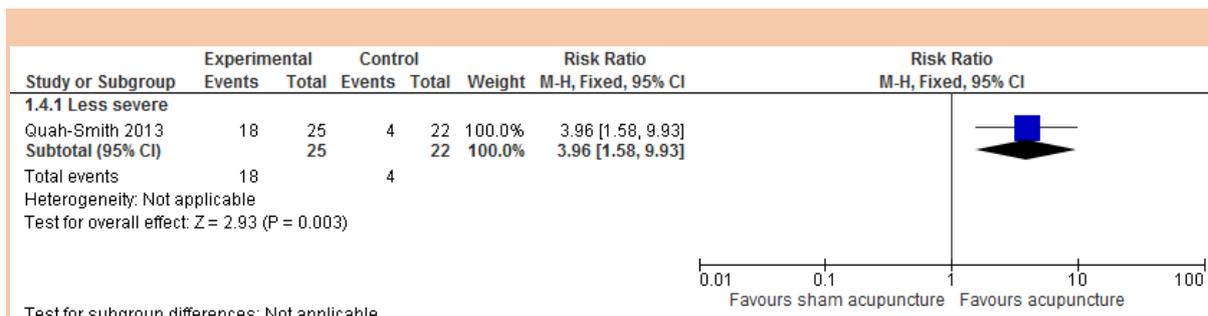
Response (reduction of at least 50% from the baseline score on HAMD)

13

Depression in adults: treatment and management

Forest plots

1

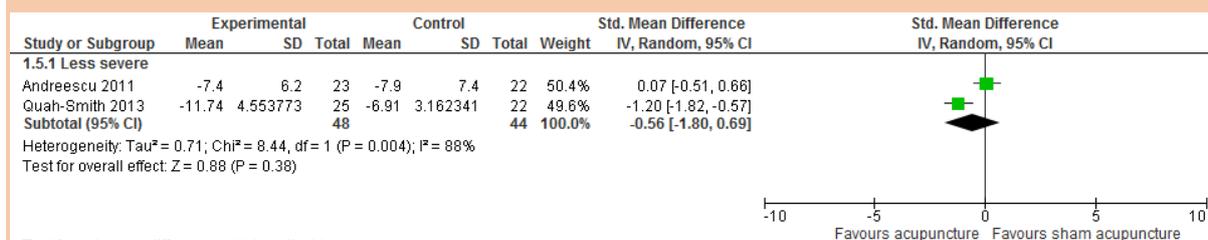


2

Test for subgroup differences: Not applicable

3

Depression symptomatology (HAMD change score)



4

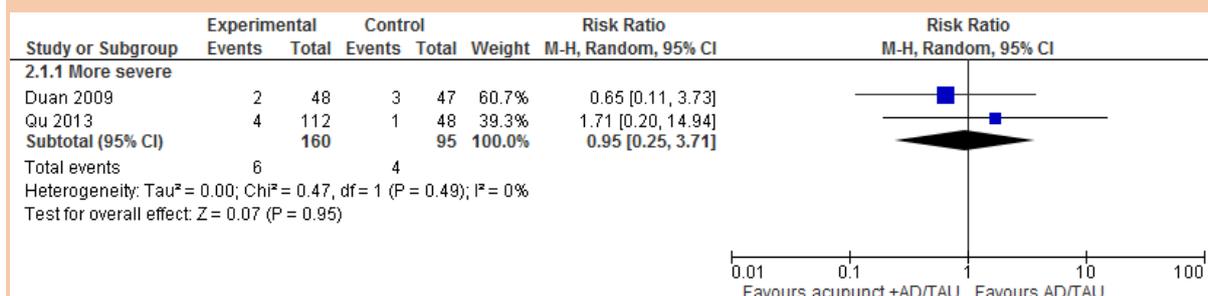
Test for subgroup differences: Not applicable

5

Acupuncture + AD/TAU versus TAU

6

Discontinuation due to side effects



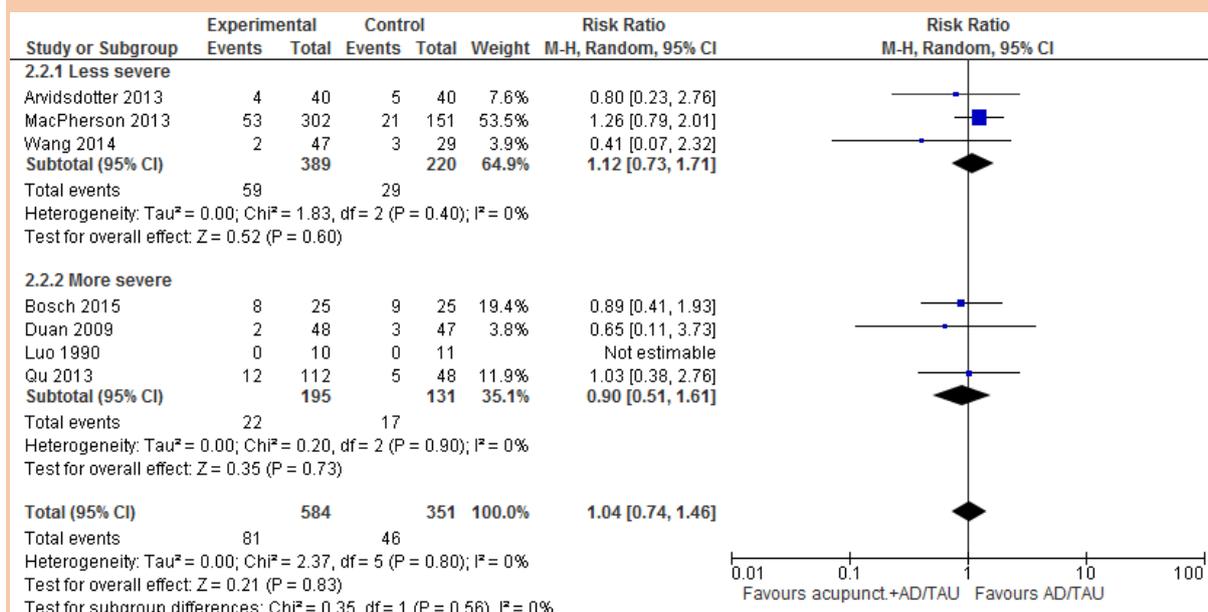
7

Test for subgroup differences: Not applicable

8

Discontinuation for any reason

9



10

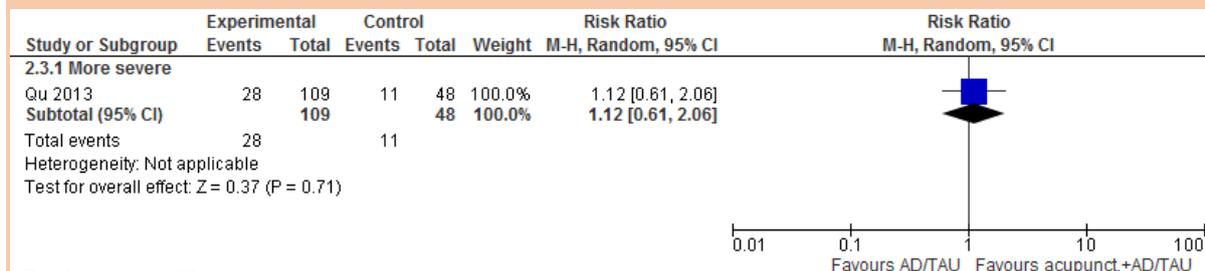
Test for subgroup differences: Chi² = 0.35, df = 1 (P = 0.56), I² = 0%

Depression in adults: treatment and management

Forest plots

1
2
3

Remission (HAMD endpoint score of 7 or below)

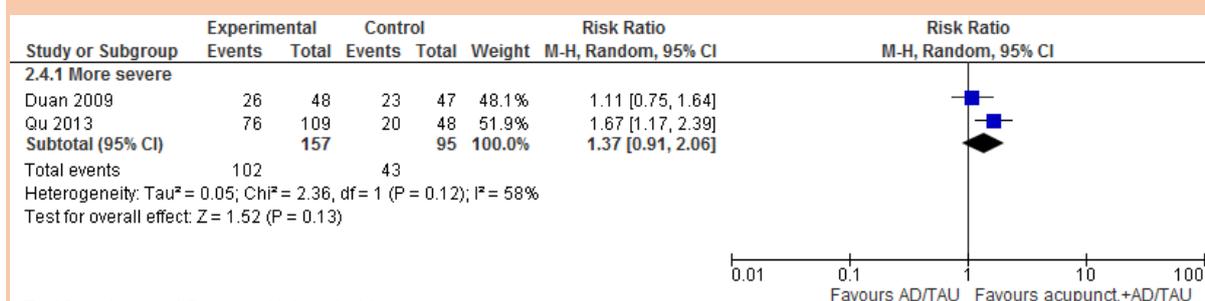


4

Test for subgroup differences: Not applicable

5

Response (reduction of at least 50% from baseline score on HAMD)

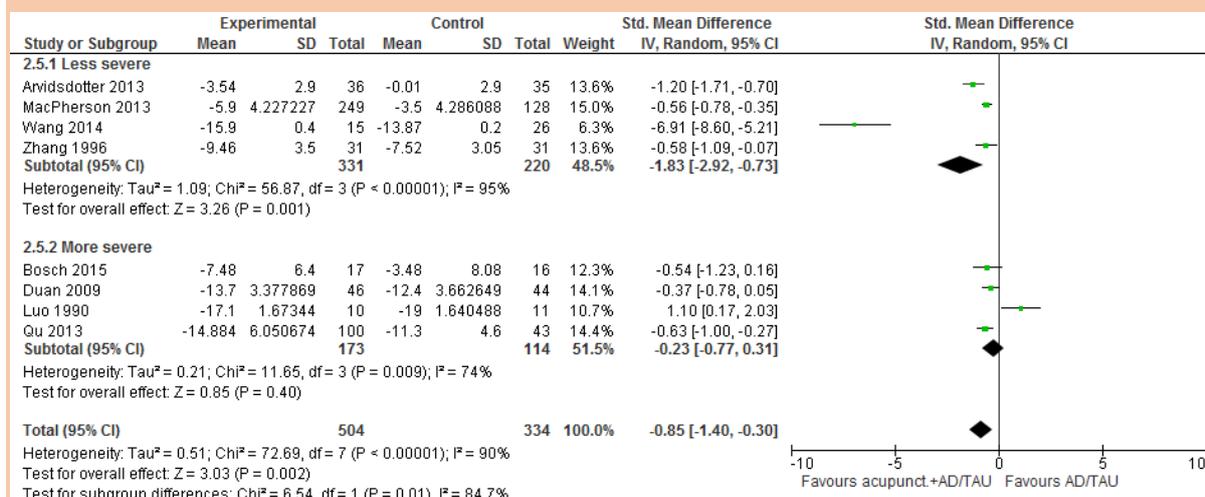


6

Test for subgroup differences: Not applicable

7

Depression symptomatology (HAMD/PHQ-9/BDI-II change score)



8

9

Acupuncture versus SSRI

10

Discontinuation due to side effects

Depression in adults: treatment and management

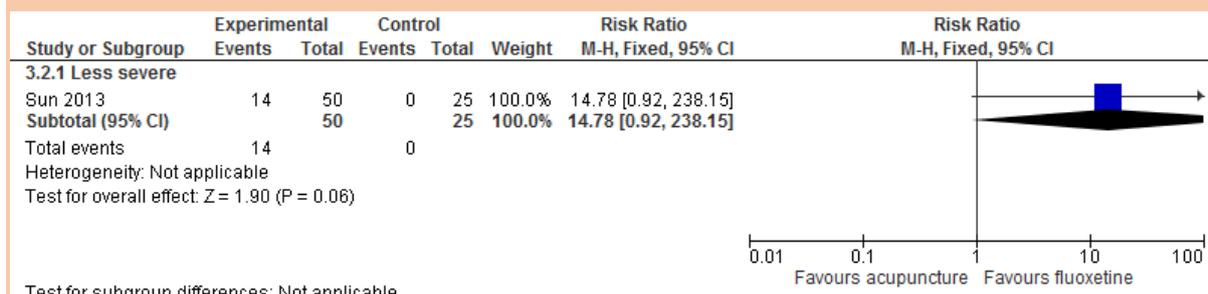
Forest plots

1



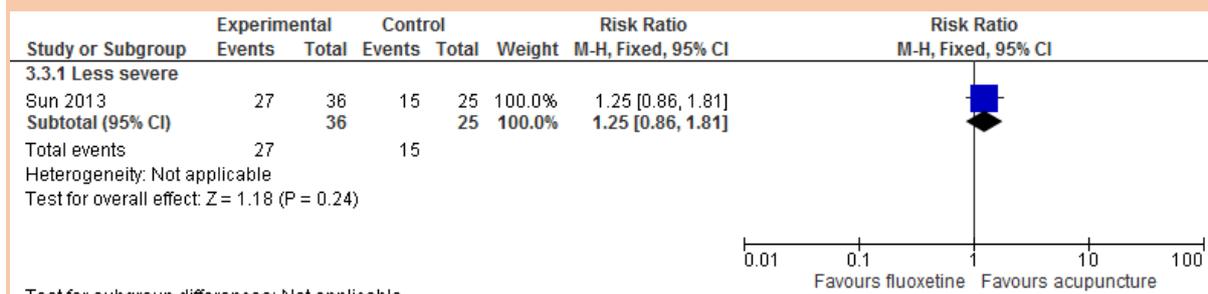
2

3 Discontinuation for any reason



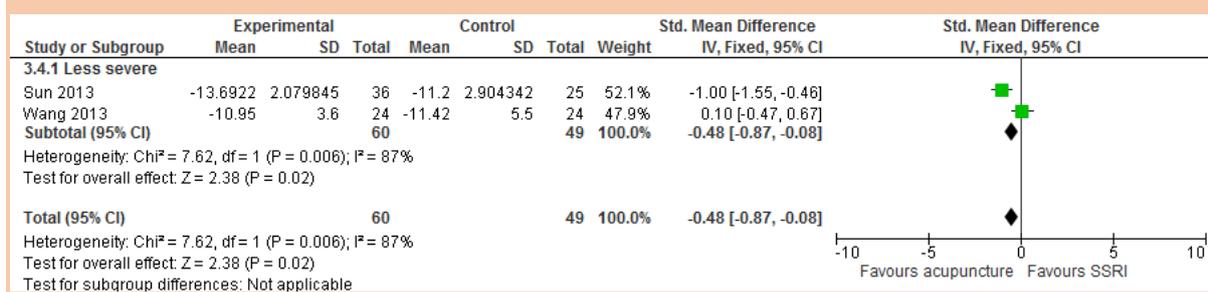
4

5 Response (reduction of at least 50% from the baseline score on HAMD)



6

7 Depression symptomatology (HAMD/MADRS change score)



9

10

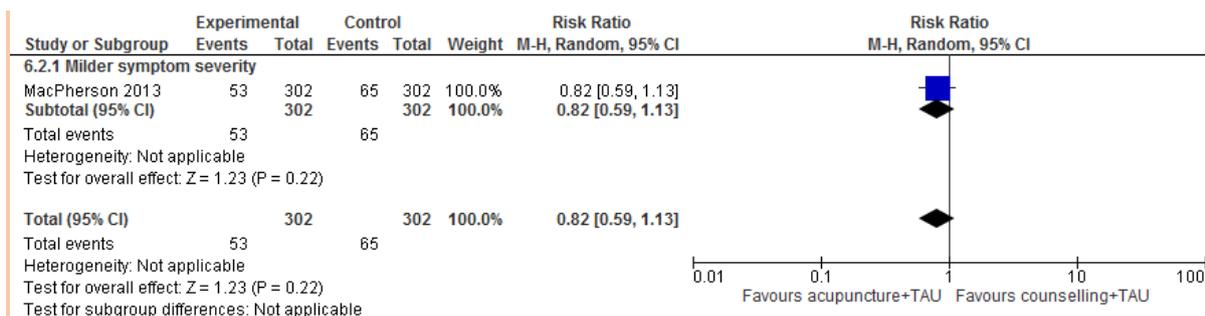
11 Acupuncture + TAU versus counselling + TAU

12 Discontinuation for any reason

Depression in adults: treatment and management

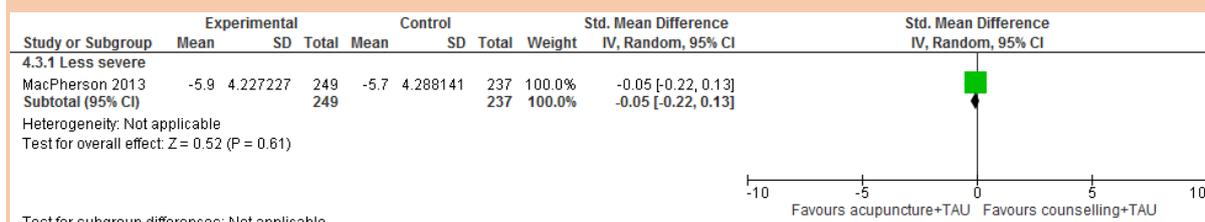
Forest plots

1



2 Depression symptomatology (PHQ-9 change score)

3

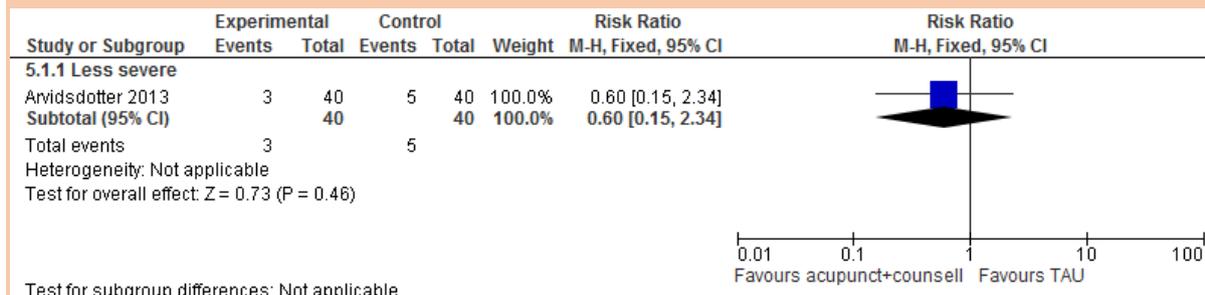


4

5 Acupuncture + counselling versus TAU

6 Discontinuation for any reason

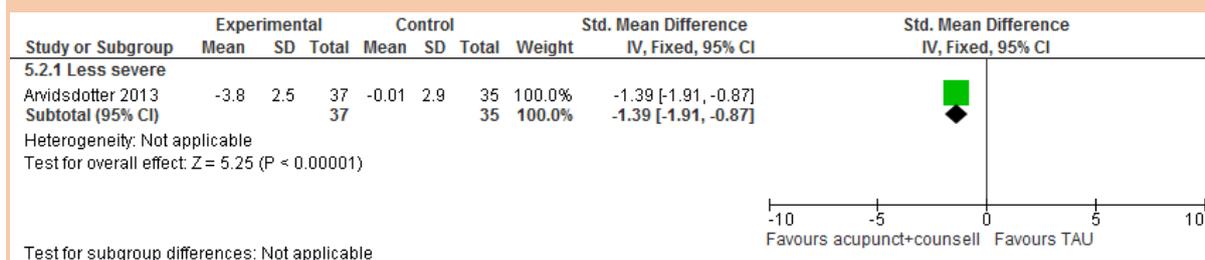
7



8

8 Depression symptomatology (HADS-D change score)

9



10 Nortriptyline

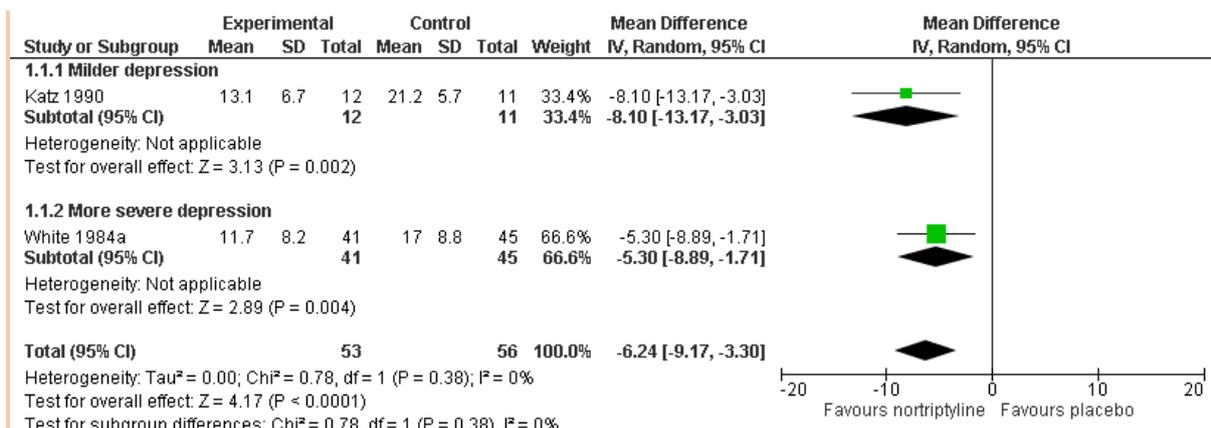
11 Nortriptyline versus placebo

12 Depression symptomatology at endpoint: milder and more severe depression

Depression in adults: treatment and management

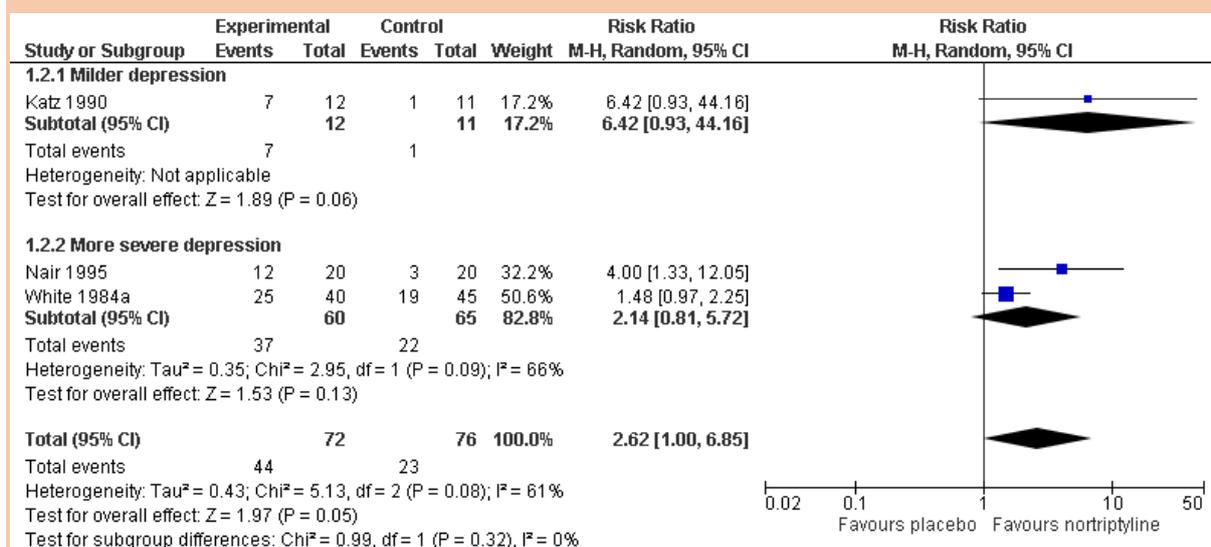
Forest plots

1



2

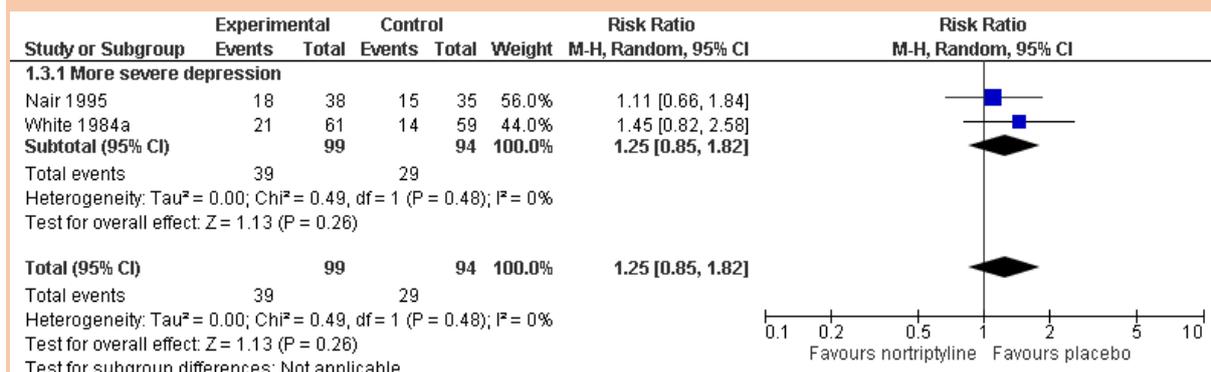
Remission at endpoint: milder and more severe depression



3

4

Treatment discontinuation: more severe depression



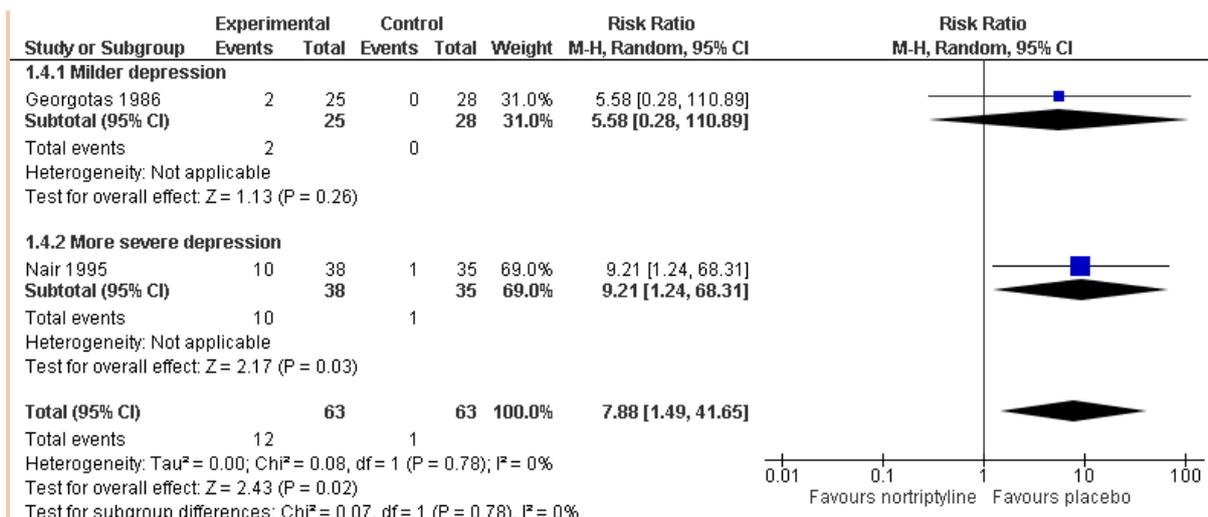
5

6

Treatment discontinuation due to side effect: milder and more severe depression

Depression in adults: treatment and management

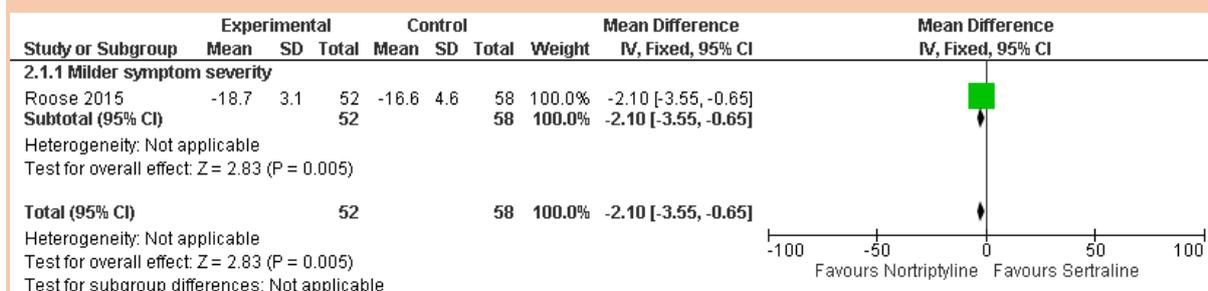
Forest plots



1

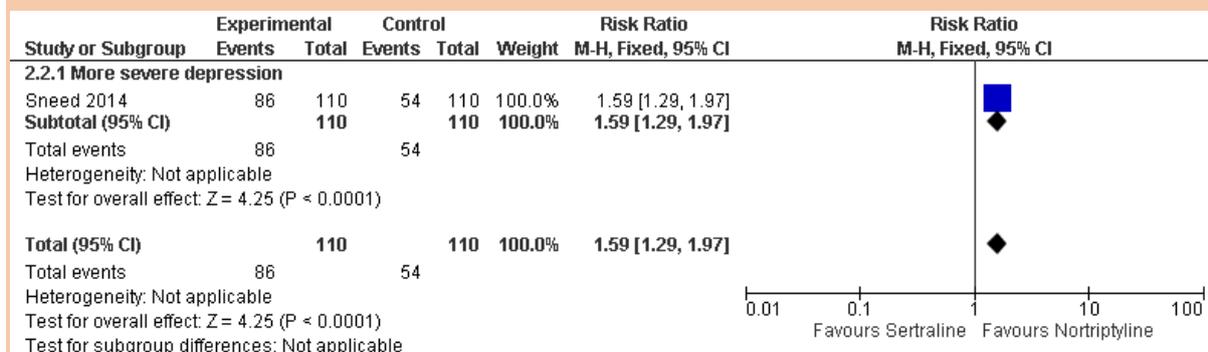
2 Nortriptyline versus sertraline

3 Depression symptomatology



4

5 Response



6

7 Omega-3 fatty acids

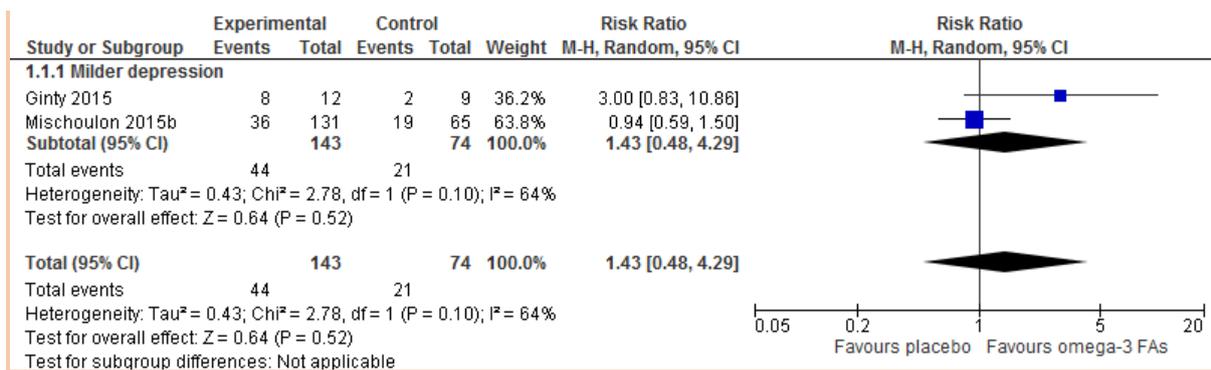
8 Omega-3 fatty acids versus placebo

9 Remission (BDI<=10 or HAMD-17 <=7)

Depression in adults: treatment and management

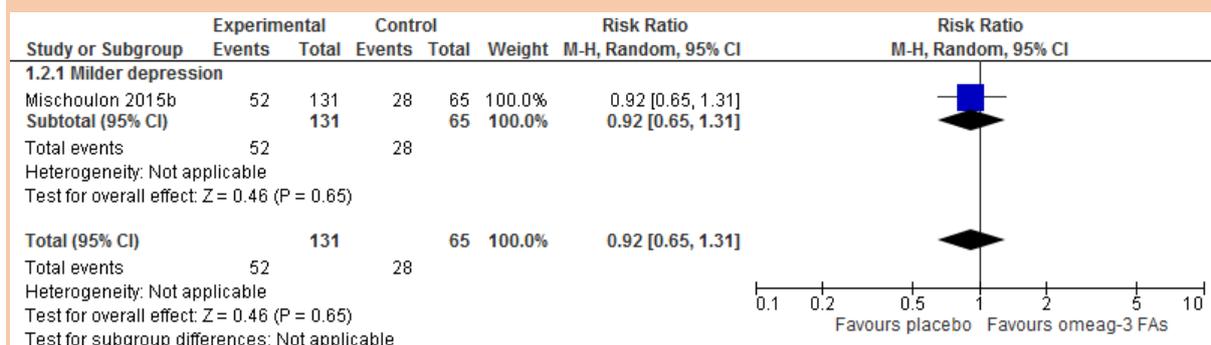
Forest plots

1



2

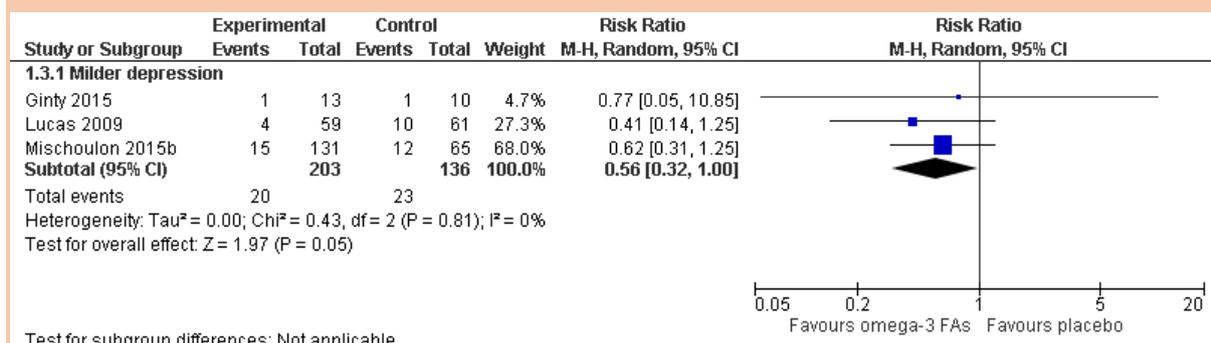
Response (HAMD reduced by >=50%)



3

4

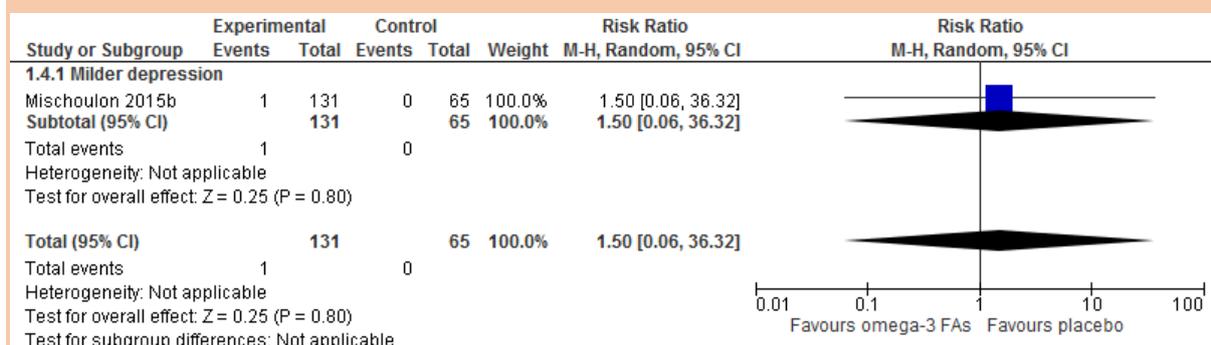
Treatment discontinuation



5

6

Discontinuation due to side effects



7

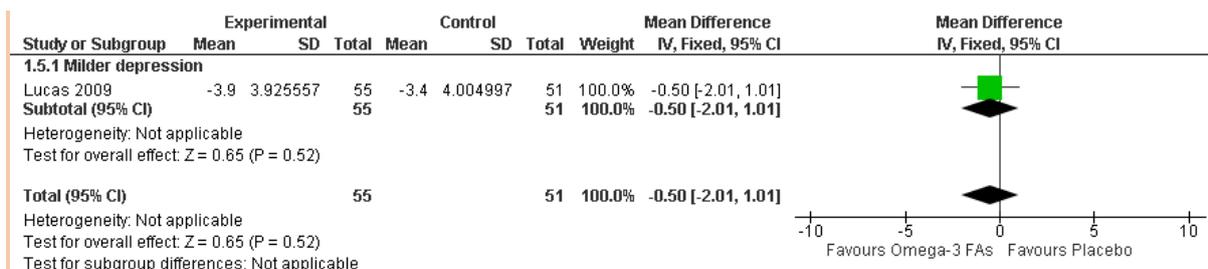
8

Depression symptomatology

Depression in adults: treatment and management

Forest plots

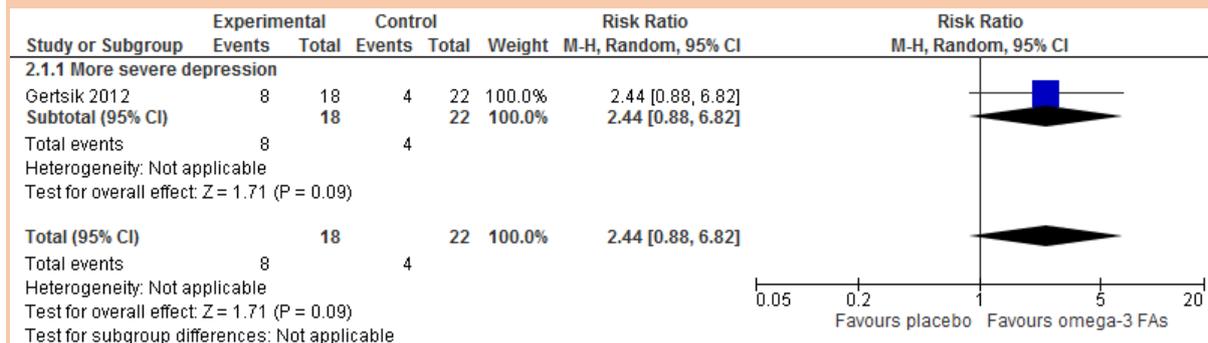
1



2 Omega-3 fatty acids + SSRI/antidepressant versus placebo + SSRI/antidepressant

3 Remission (BDI<=10 or HAMD<=7 at endpoint)

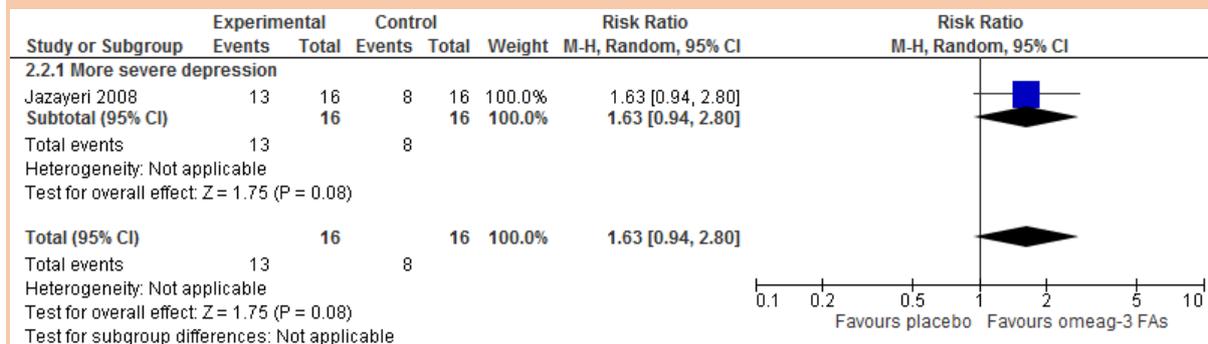
4



5

6 Response (HAMD reduced by >50% at endpoint)

7

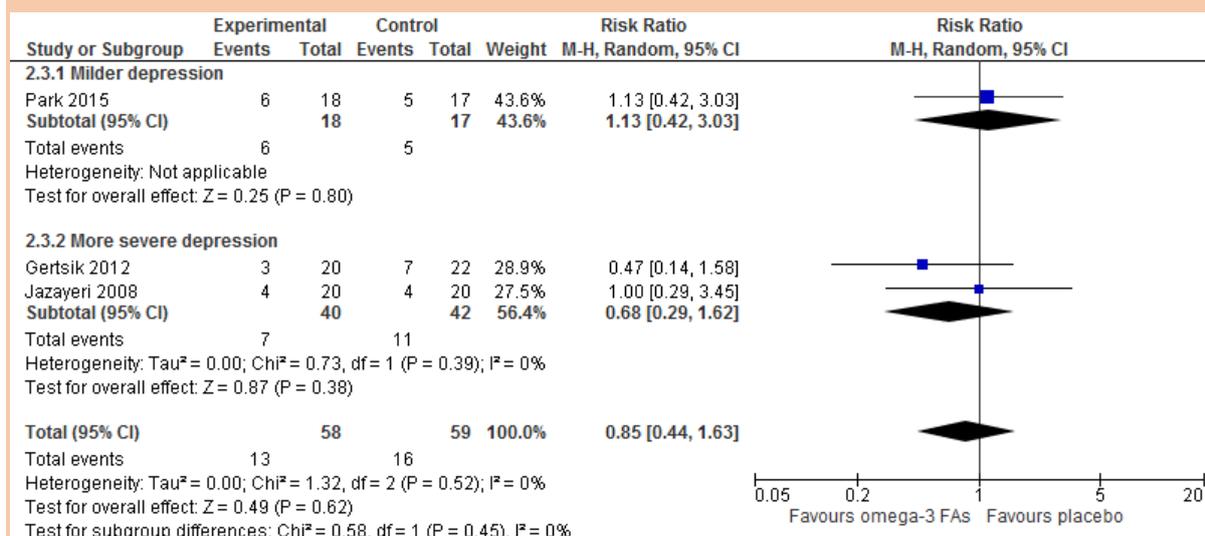


8

Depression in adults: treatment and management

Forest plots

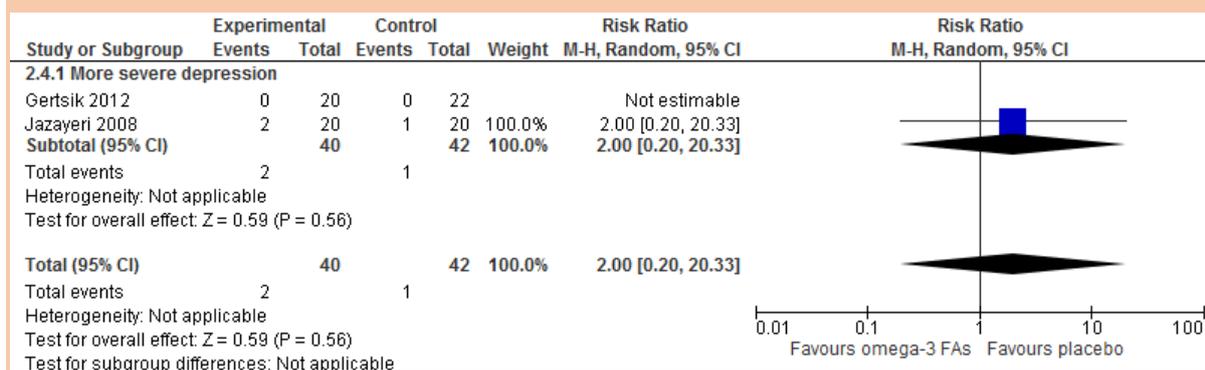
1 Treatment discontinuation



2

3

4 Discontinuation due to side effects



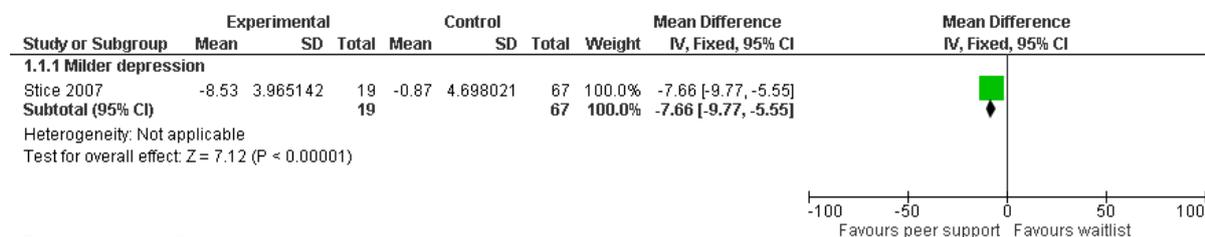
5

6

7 Psychosocial interventions (peer support)

8 Peer support versus waitlist

9 Depression symptomatology at endpoint (BDI)



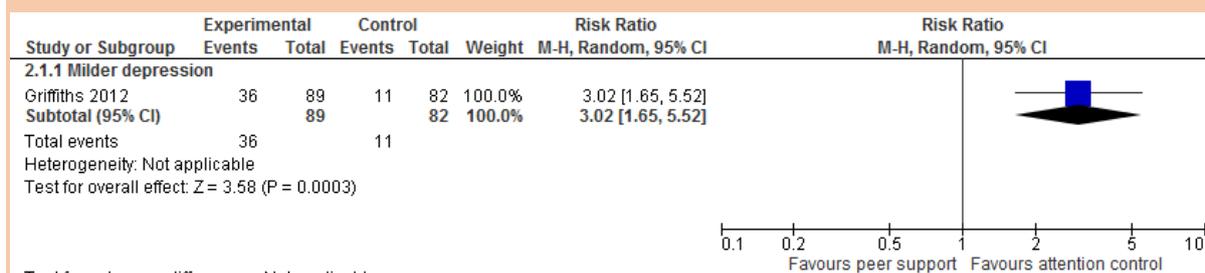
10

11 Peer support (online support group) versus attention-placebo control

Depression in adults: treatment and management

Forest plots

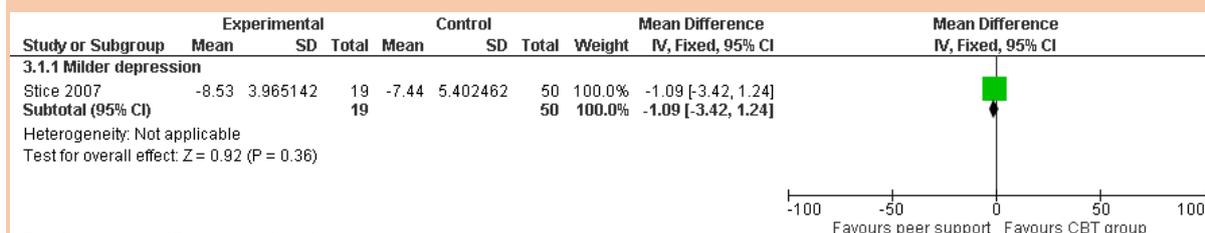
1 Treatment discontinuation rates



2 Test for subgroup differences: Not applicable

3 Peer support group versus CBT group

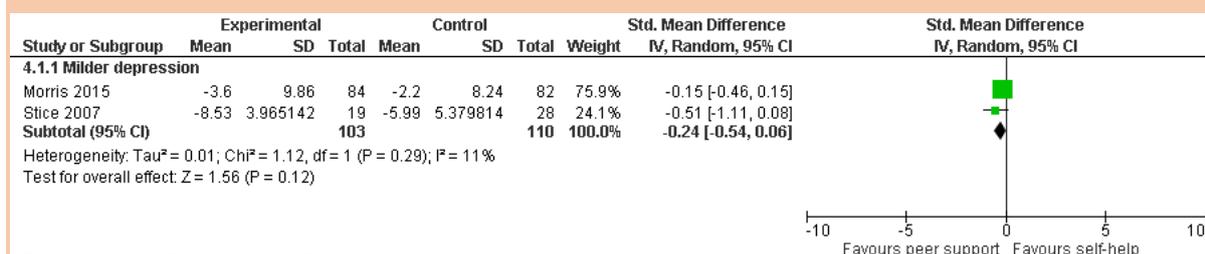
4 Depression symptomatology at endpoint (BDI)



5 Test for subgroup differences: Not applicable

6 Peer support group versus self-help (without support)

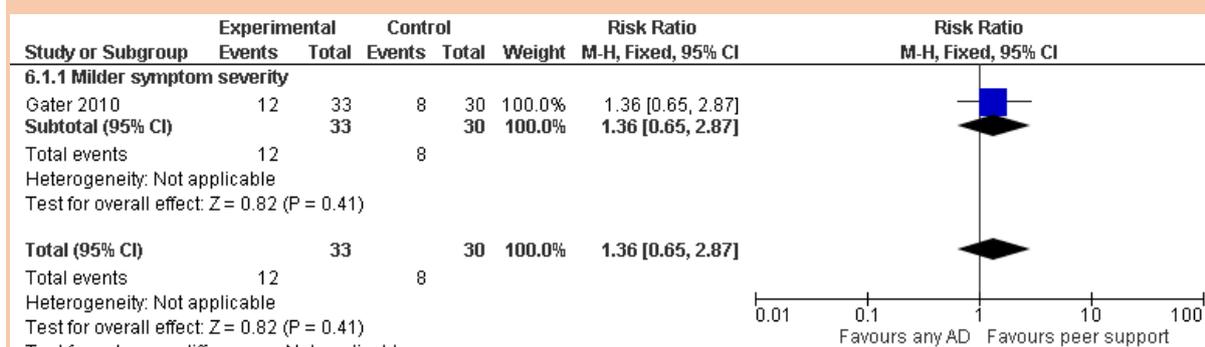
7 Depression symptomatology at endpoint (BDI)



8 Test for subgroup differences: Not applicable

9 Peer support + any antidepressant versus any antidepressant

10 Remission



11 Test for subgroup differences: Not applicable

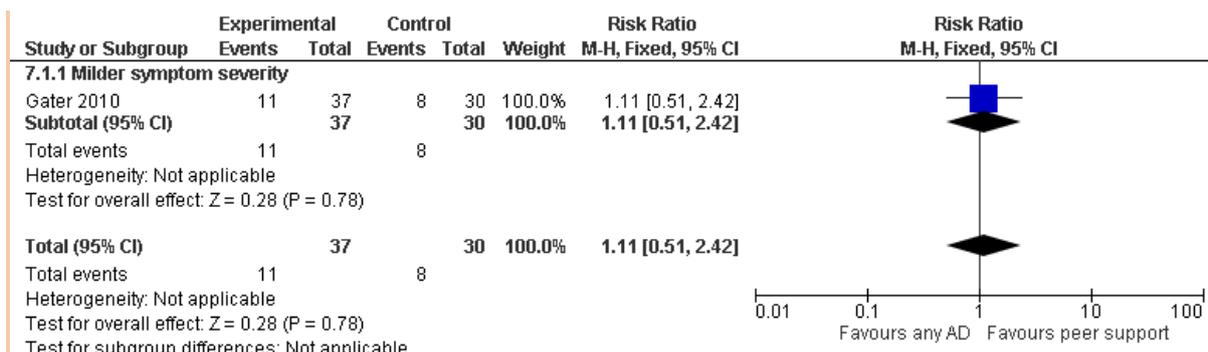
12 Social intervention + any antidepressant versus any antidepressant

13 Remission

Depression in adults: treatment and management

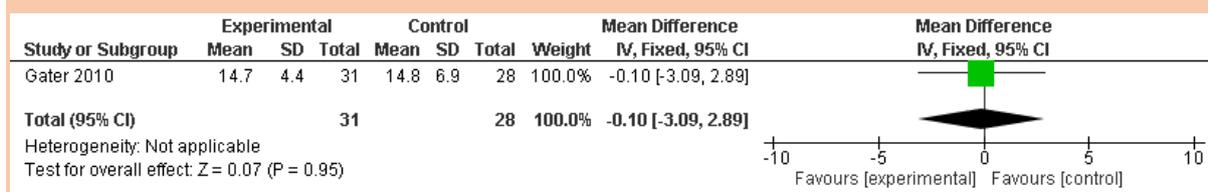
Forest plots

1



2

Depression symptomatology



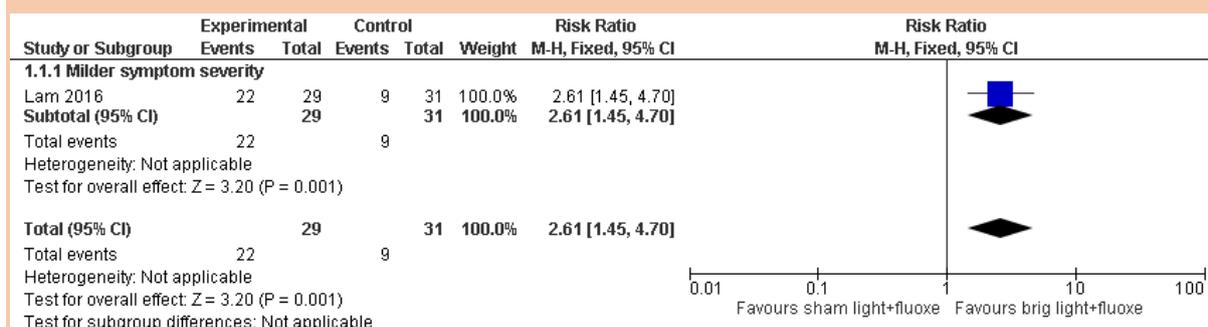
3

4

Bright light therapy

5

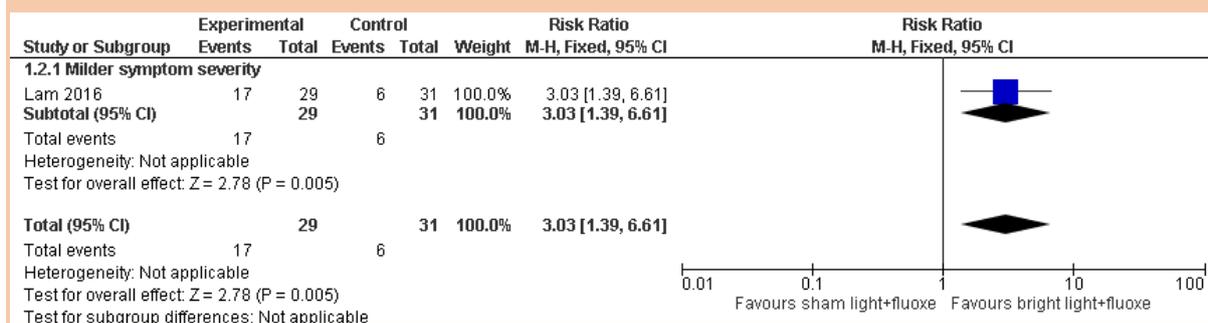
Response



6

7

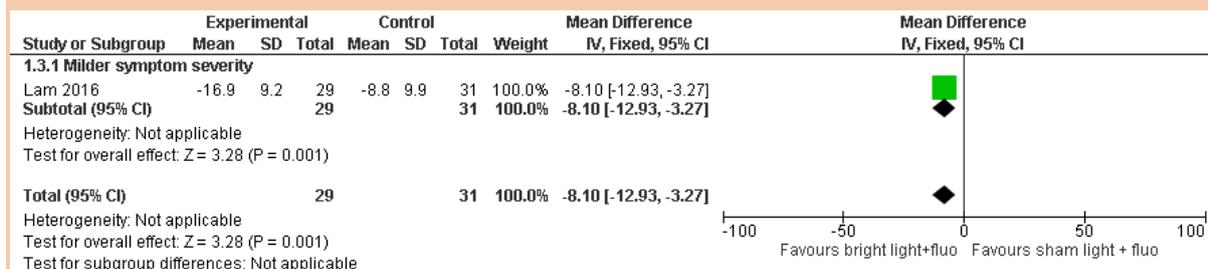
Remission



8

9

Depression symptomatology

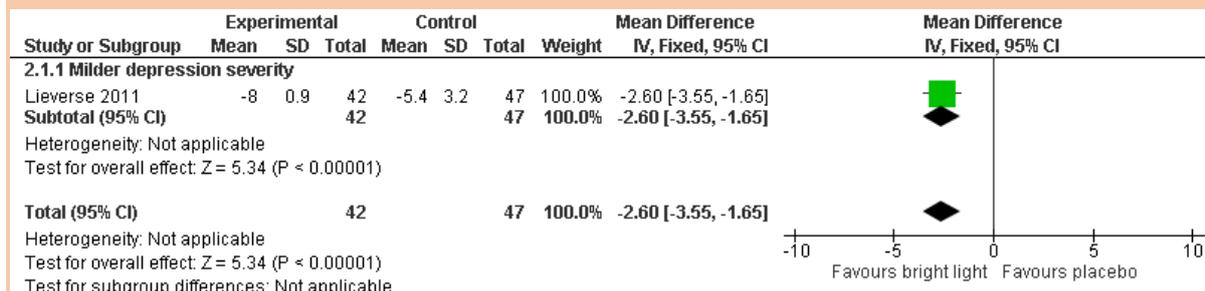


10

Depression in adults: treatment and management
Forest plots

1 Bright light therapy versus placebo

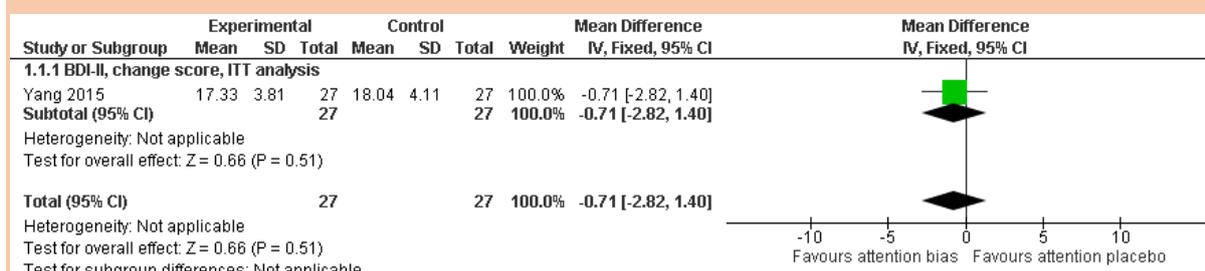
2 Depression symptomatology



3

4 Attention modification bias

5 Depression symptomatology



6

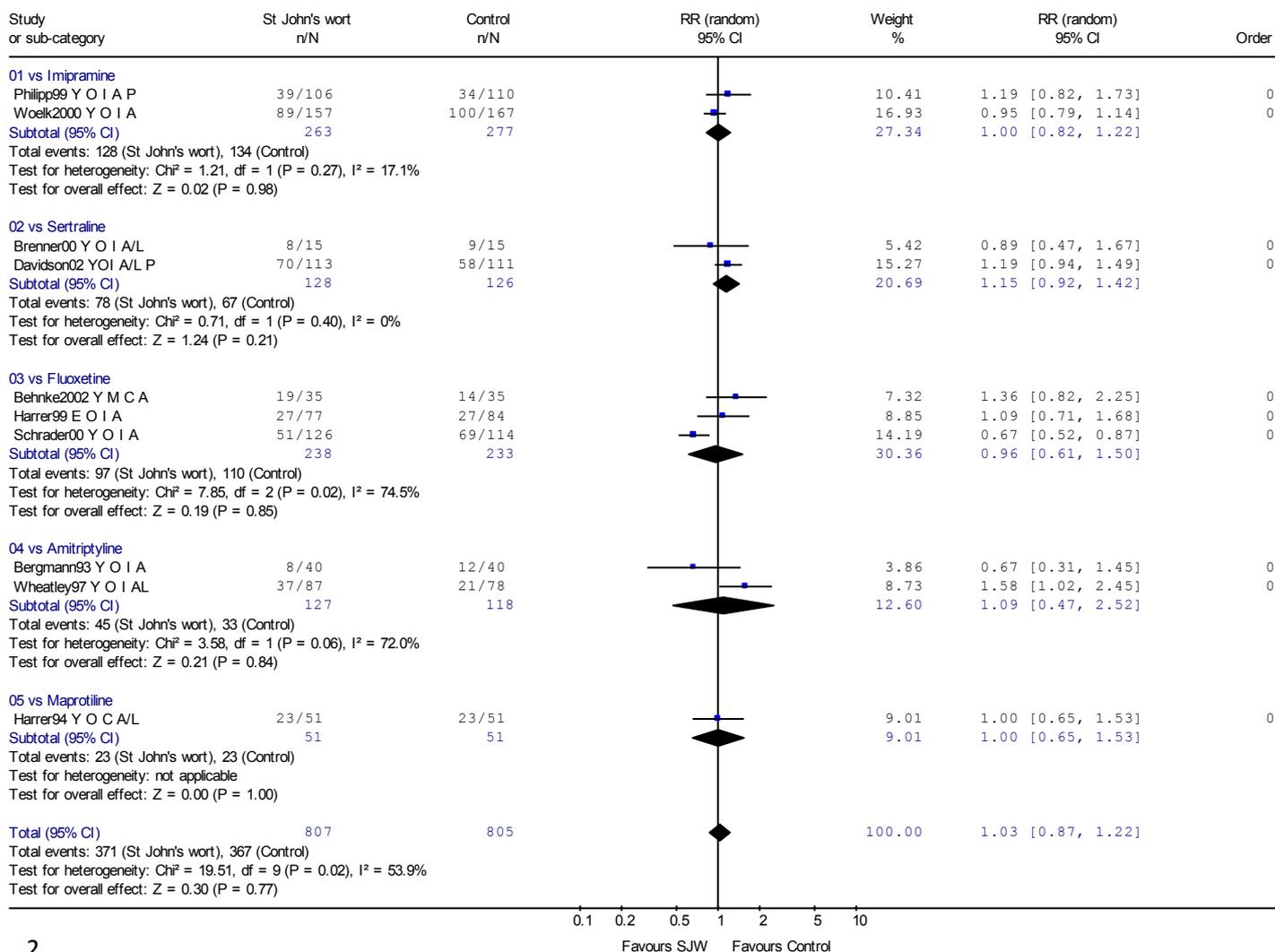
7

Depression in adults: treatment and management

Forest plots

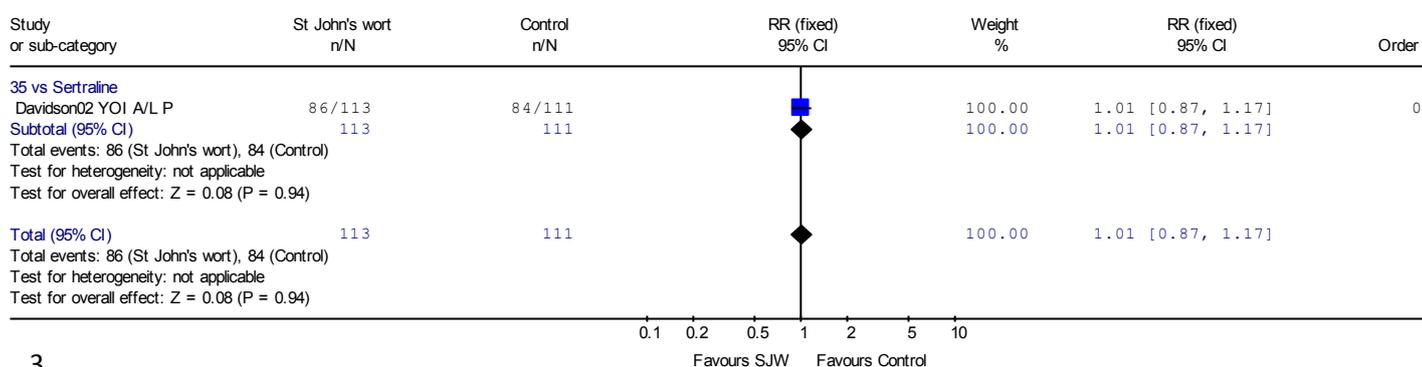
1 St John's wort

Review: Pharmacology: St John's wort
 Comparison: 01 Efficacy against ADs
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score



2

Review: Pharmacology: St John's wort
 Comparison: 01 Efficacy against ADs
 Outcome: 02 Number of people not achieving remission

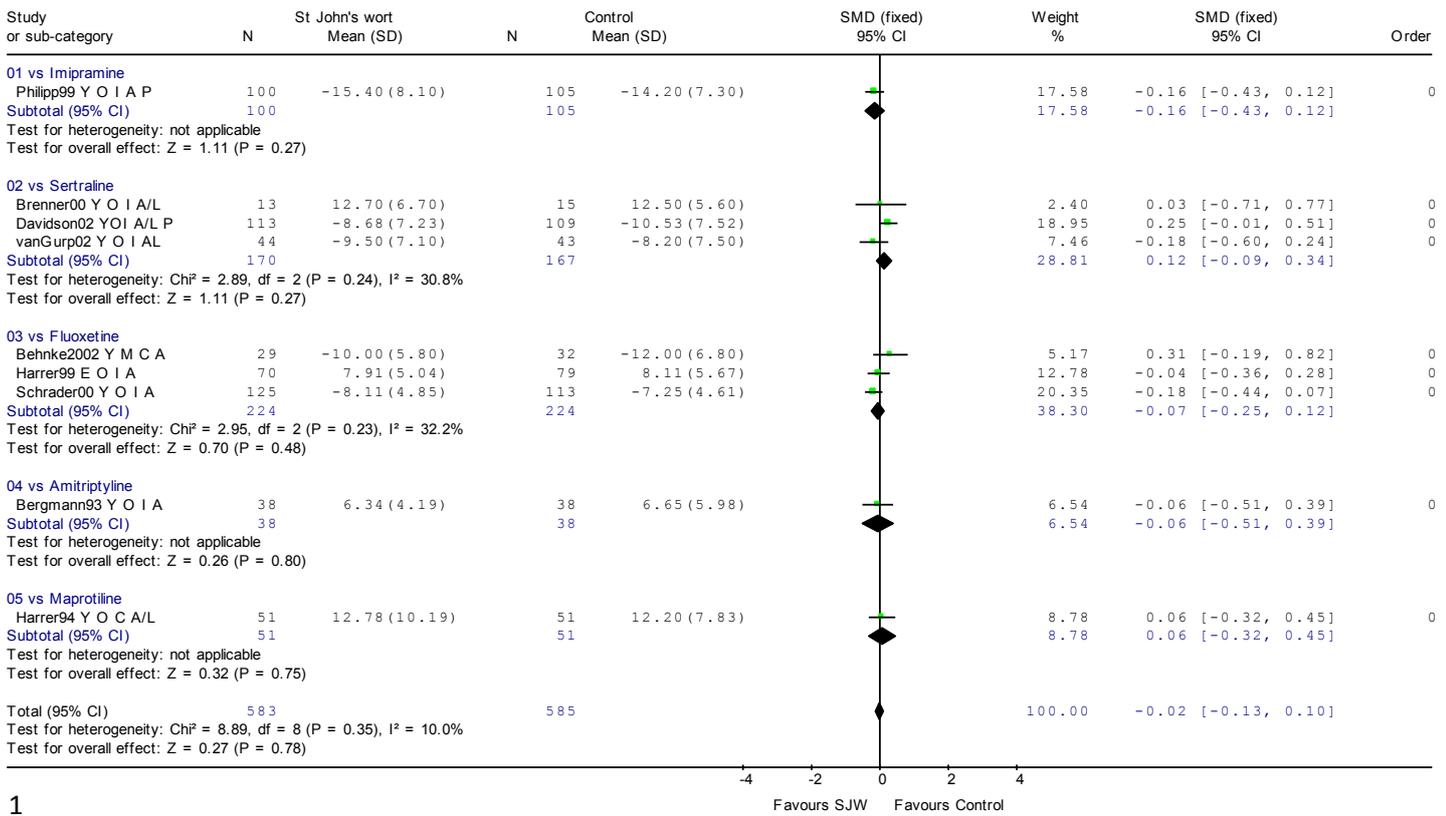


3

Depression in adults: treatment and management

Forest plots

Review: Pharmacology: St John's wort
 Comparison: 01 Efficacy against ADs
 Outcome: 03 Mean endpoint scores

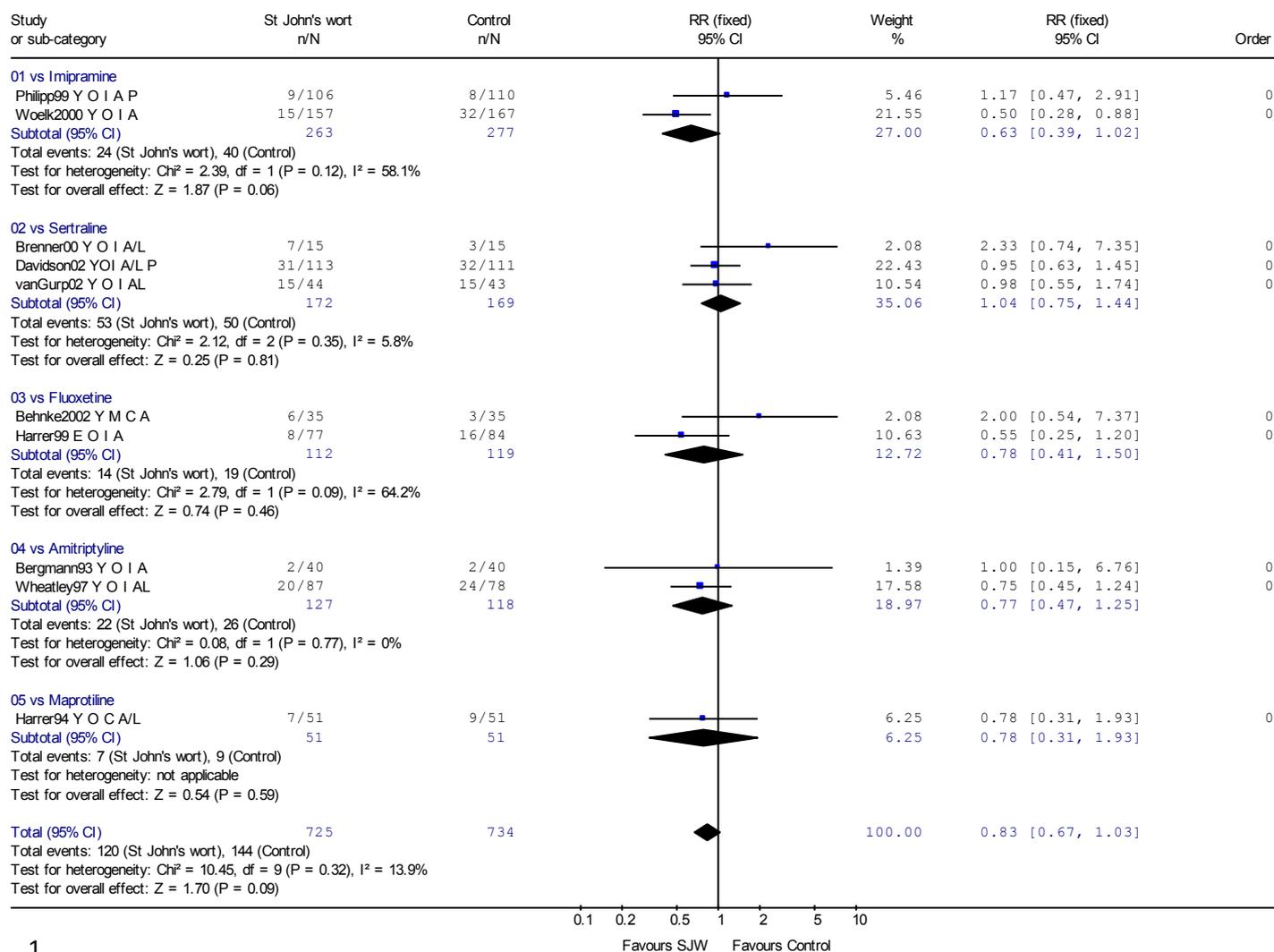


1

Depression in adults: treatment and management

Forest plots

Review: Pharmacology: St John's wort
 Comparison: 02 Tolerability against ADs
 Outcome: 01 Leaving the study early

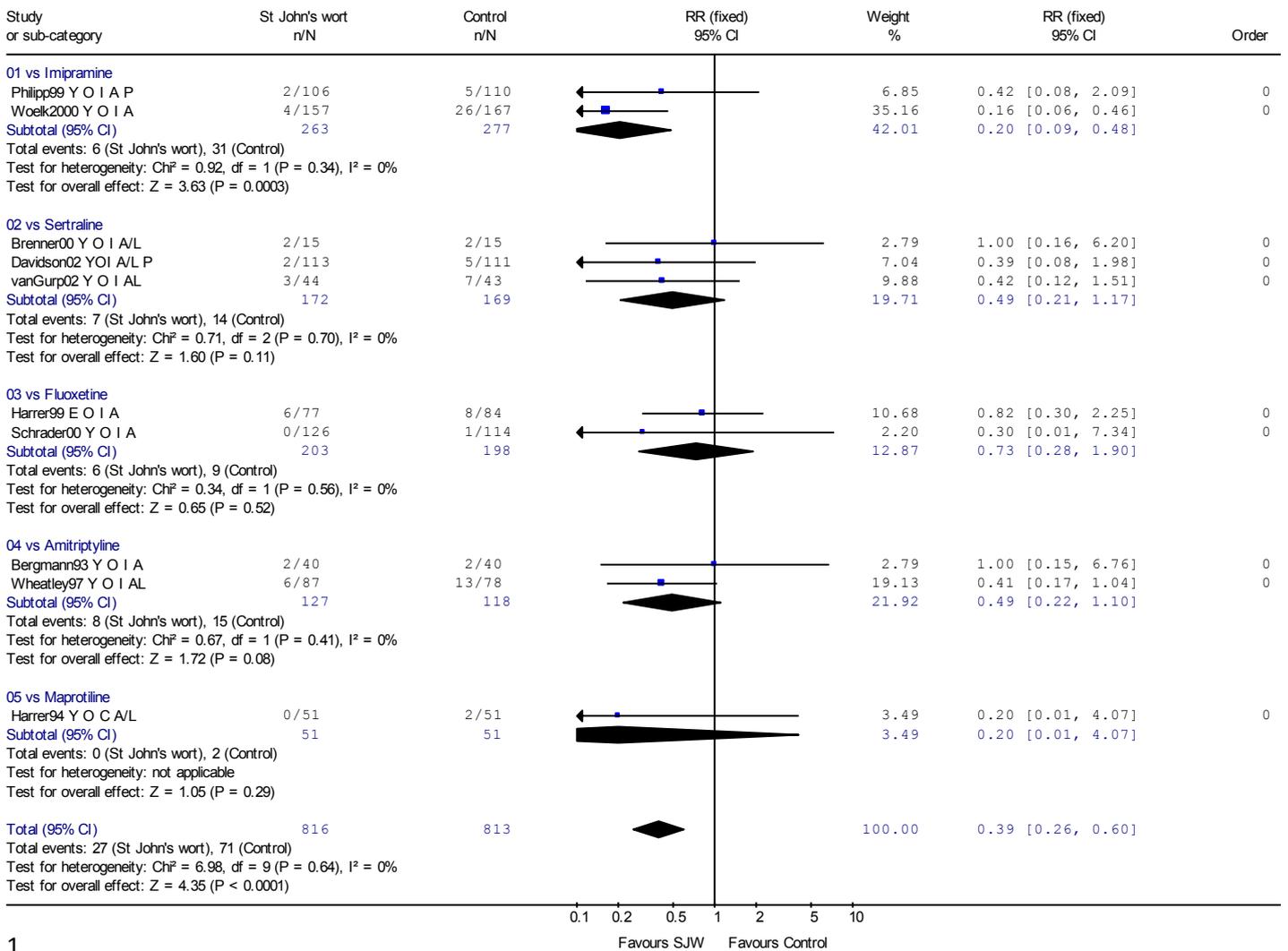


1

Depression in adults: treatment and management

Forest plots

Review: Pharmacology: St John's wort
 Comparison: 02 Tolerability against ADs
 Outcome: 02 Leaving the study early due to side effects

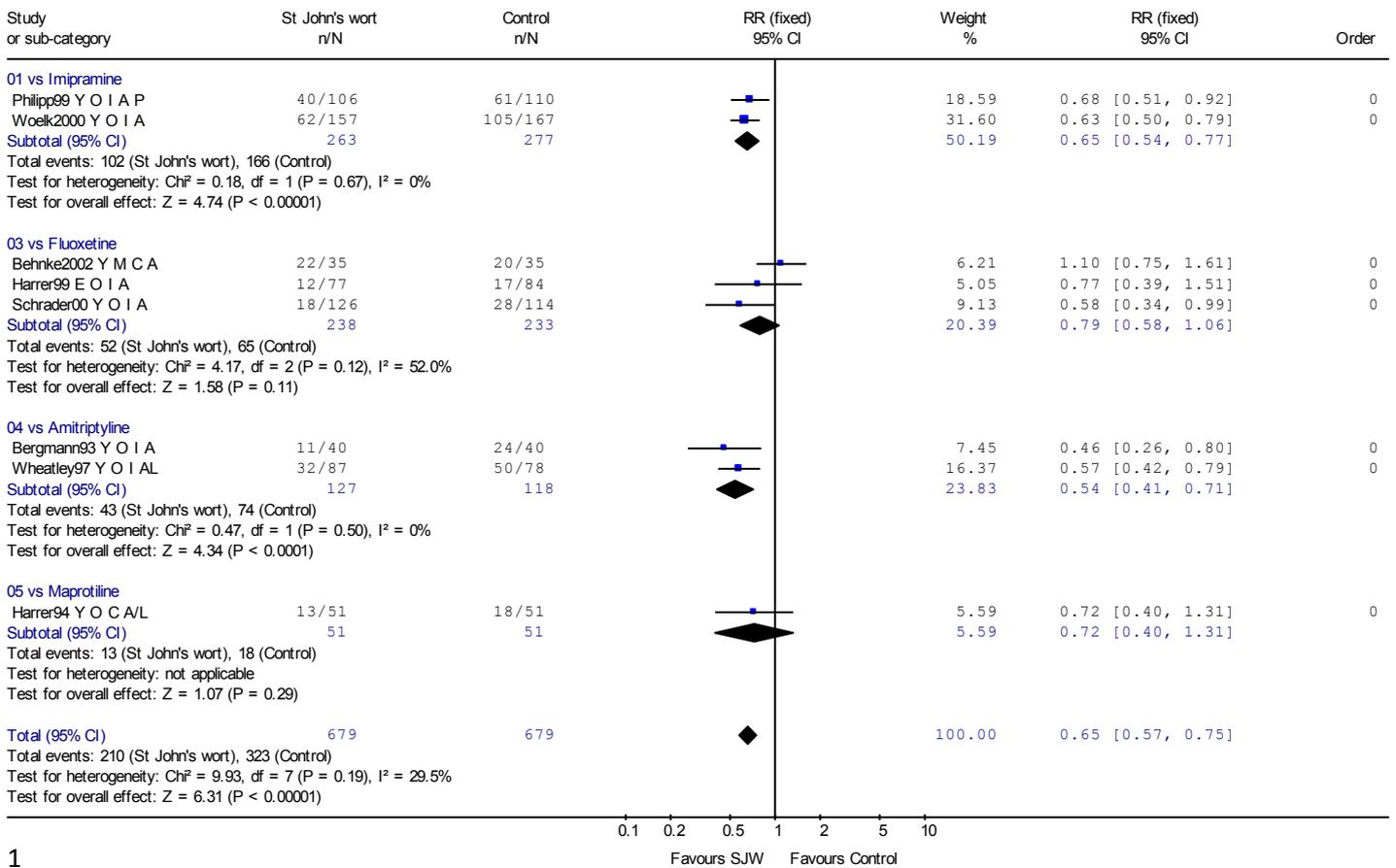


1

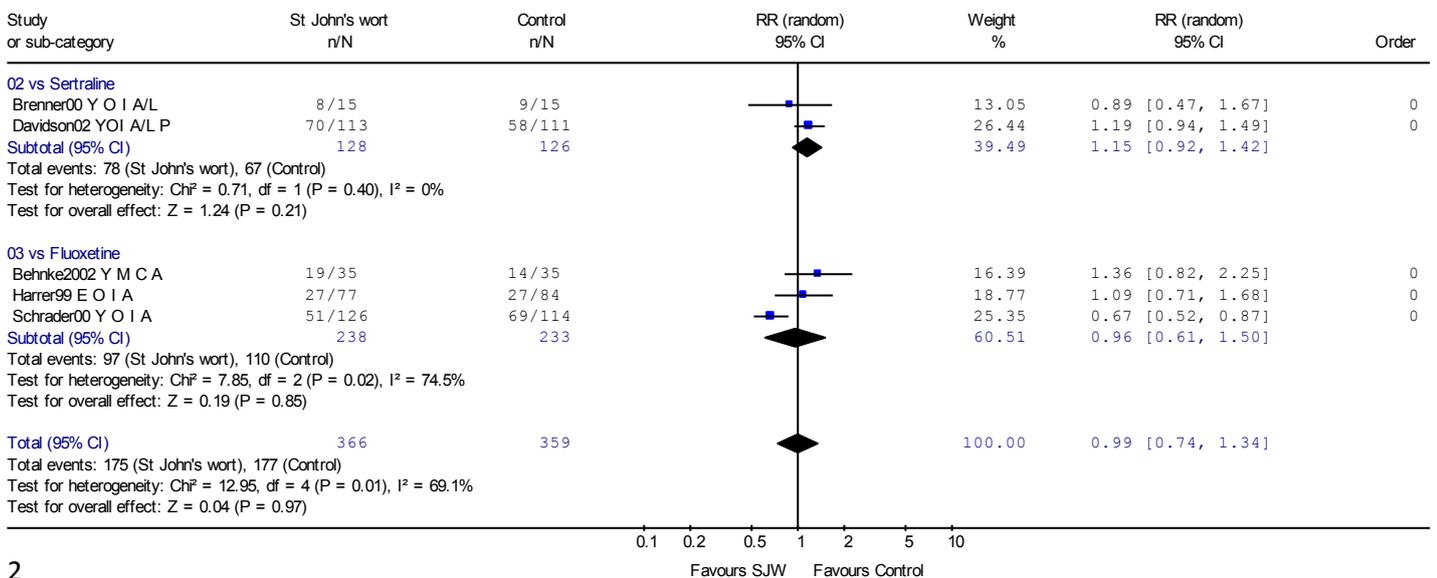
Depression in adults: treatment and management

Forest plots

Review: Pharmacology: St John's wort
 Comparison: 02 Tolerability against ADs
 Outcome: 03 Patients reporting side effects



1
 Review: Pharmacology: St John's wort
 Comparison: 03 Efficacy against SSRIs
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score

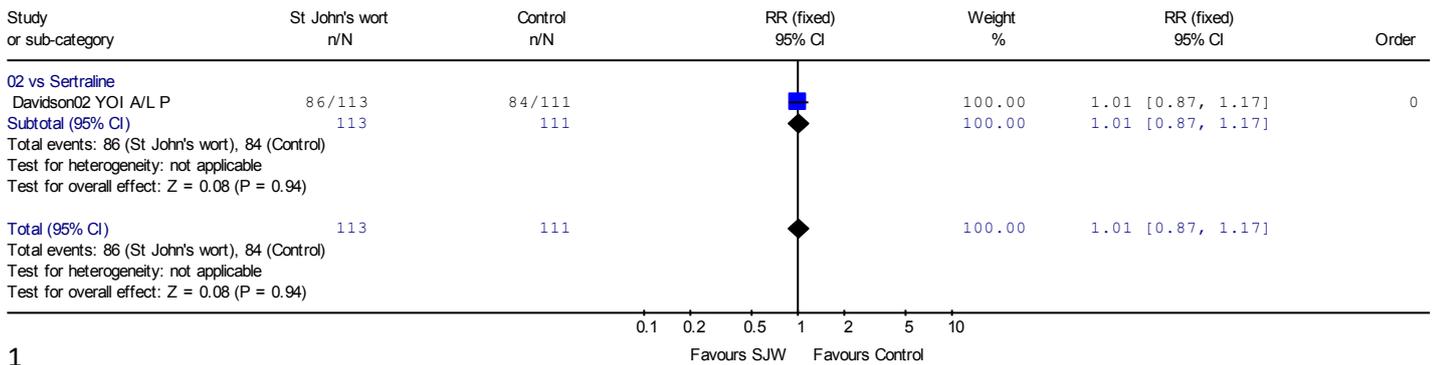


2

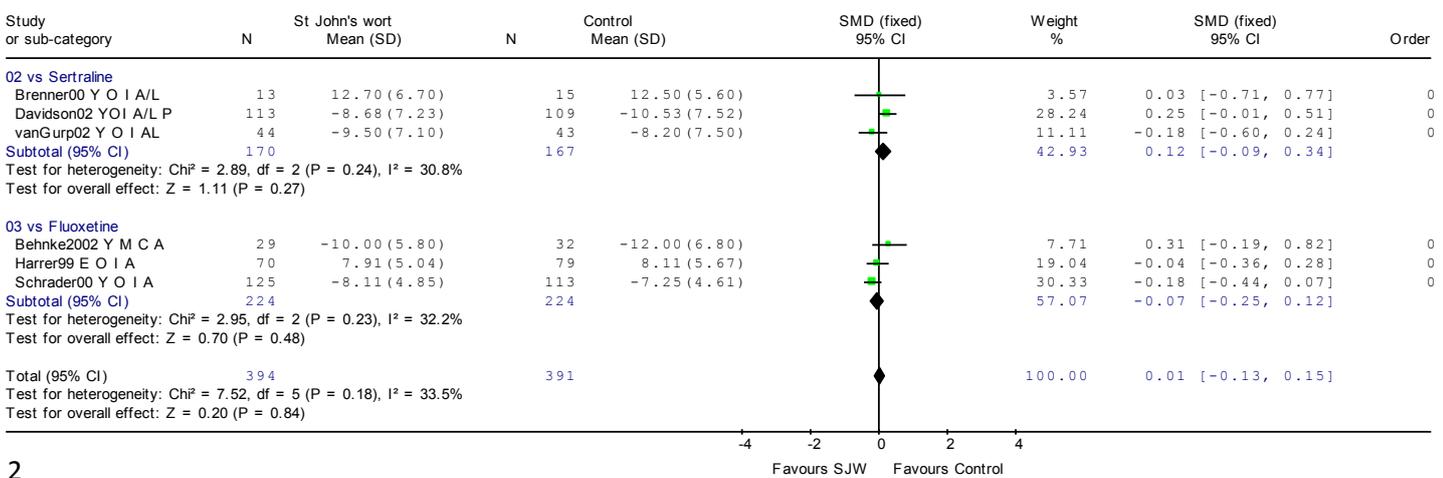
Depression in adults: treatment and management

Forest plots

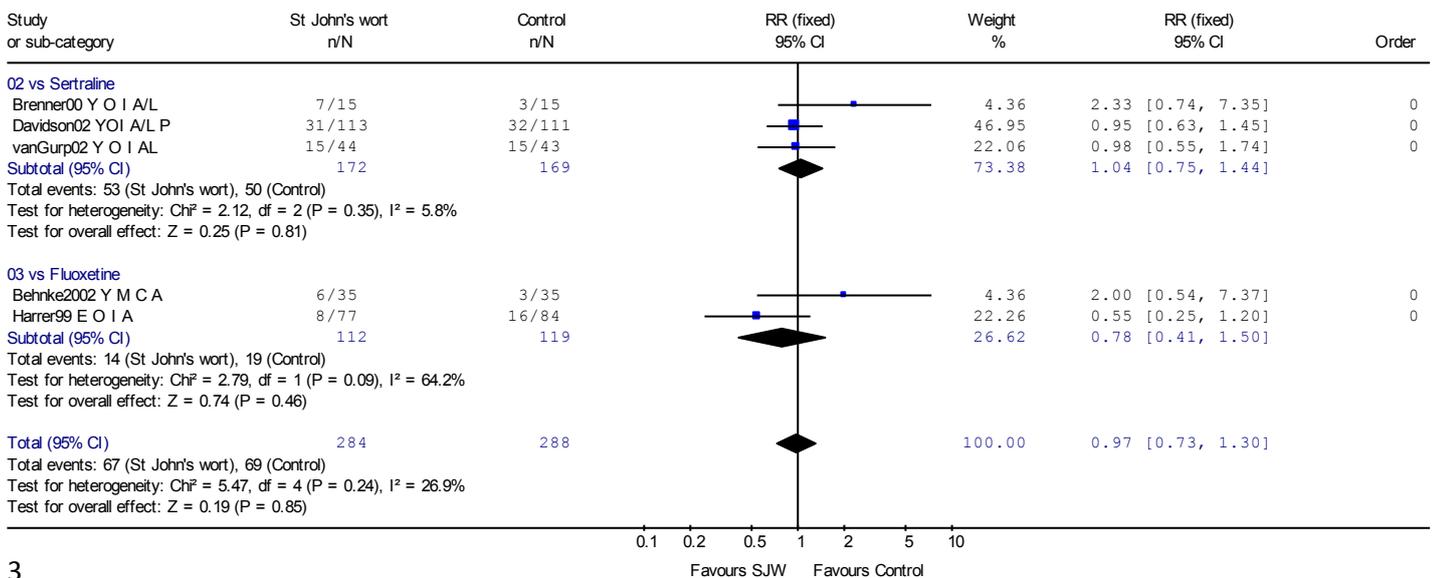
Review: Pharmacology: St John's wort
 Comparison: 03 Efficacy against SSRIs
 Outcome: 02 Number of people not achieving remission



1
 Review: Pharmacology: St John's wort
 Comparison: 03 Efficacy against SSRIs
 Outcome: 03 Mean endpoint scores



2
 Review: Pharmacology: St John's wort
 Comparison: 04 Tolerability against SSRIs
 Outcome: 01 Leaving the study early

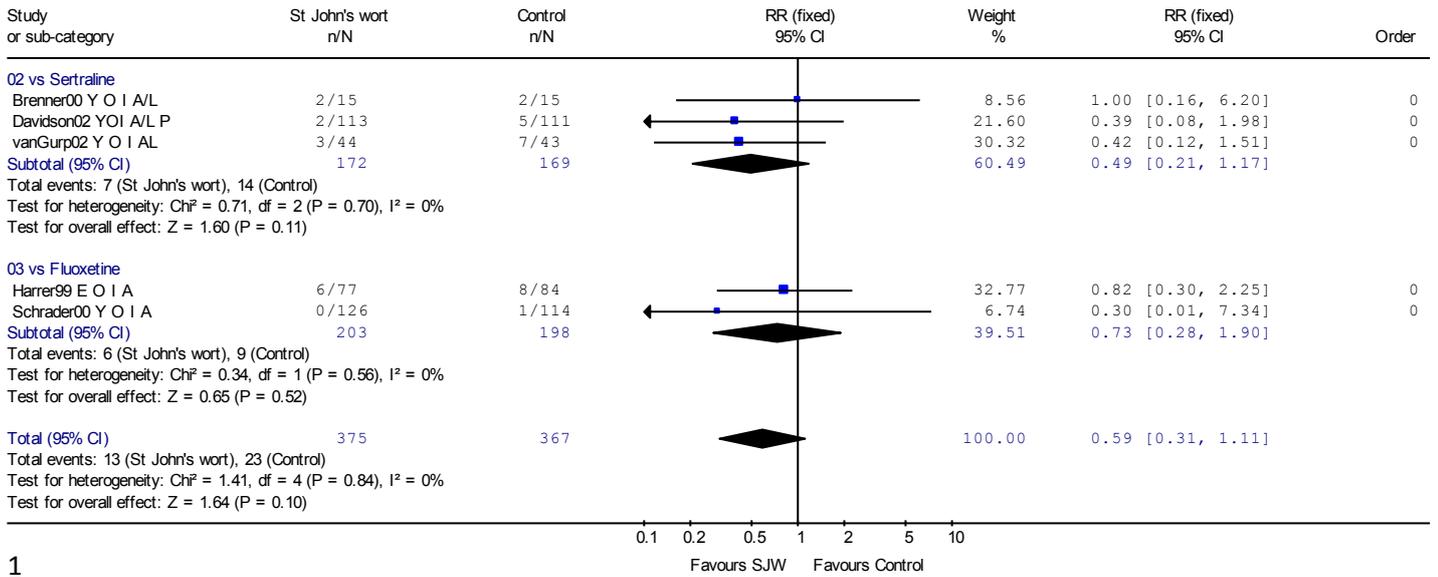


3

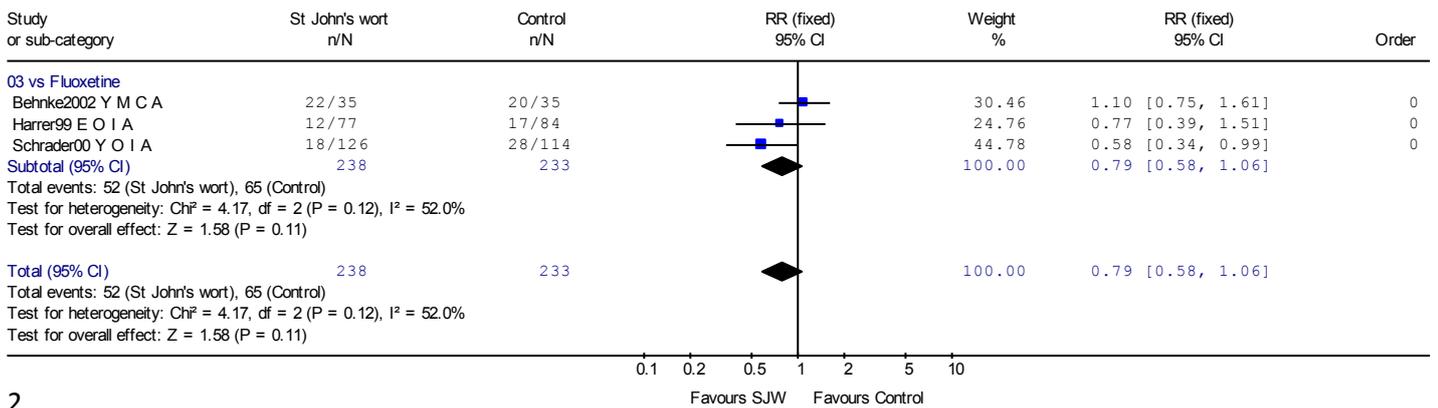
Depression in adults: treatment and management

Forest plots

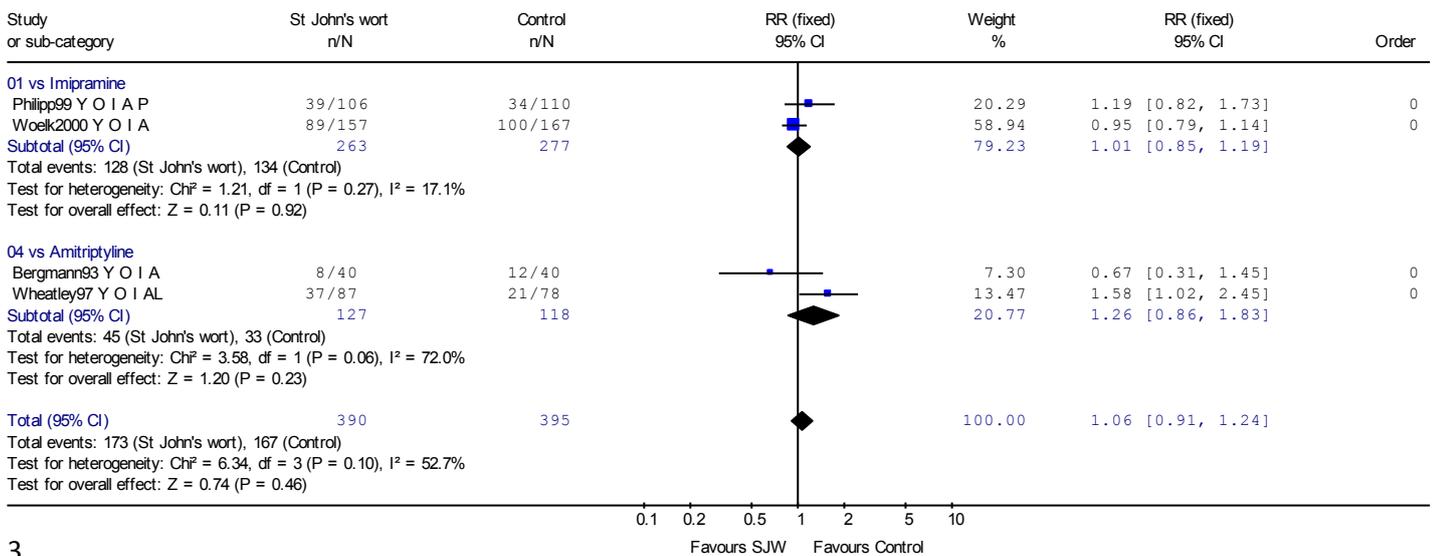
Review: Pharmacology: St John's wort
 Comparison: 04 Tolerability against SSRIs
 Outcome: 02 Leaving the study early due to side effects



1
 Review: Pharmacology: St John's wort
 Comparison: 04 Tolerability against SSRIs
 Outcome: 03 Patients reporting side effects



2
 Review: Pharmacology: St John's wort
 Comparison: 05 Efficacy against TCAs
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score

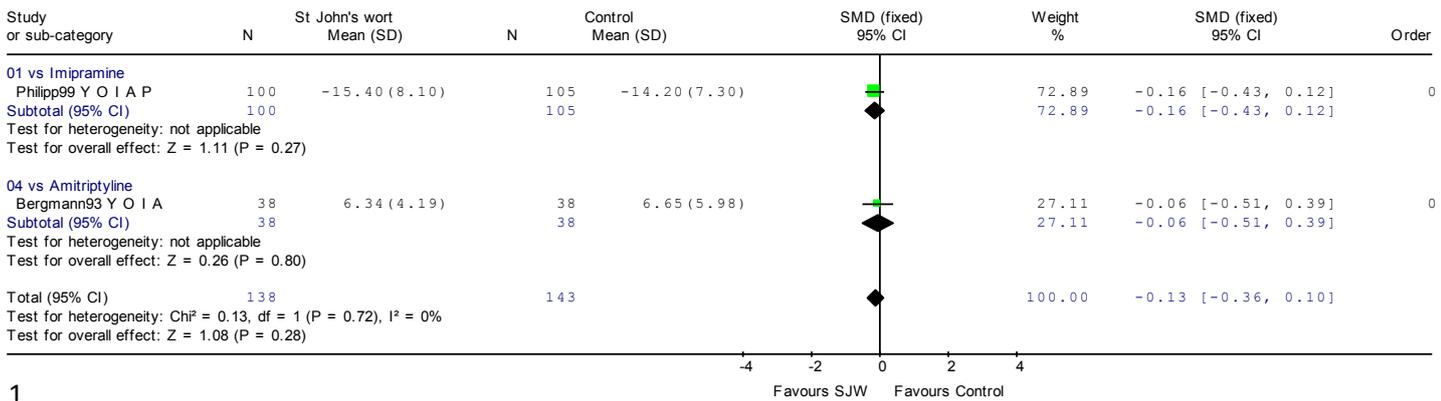


3

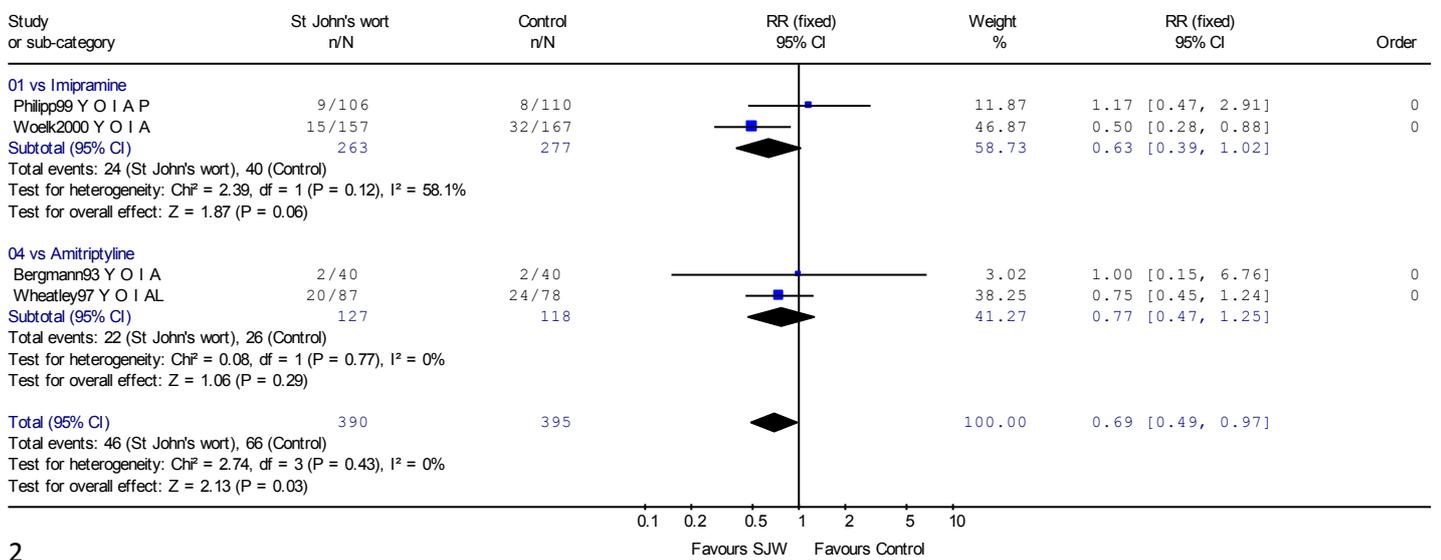
Depression in adults: treatment and management

Forest plots

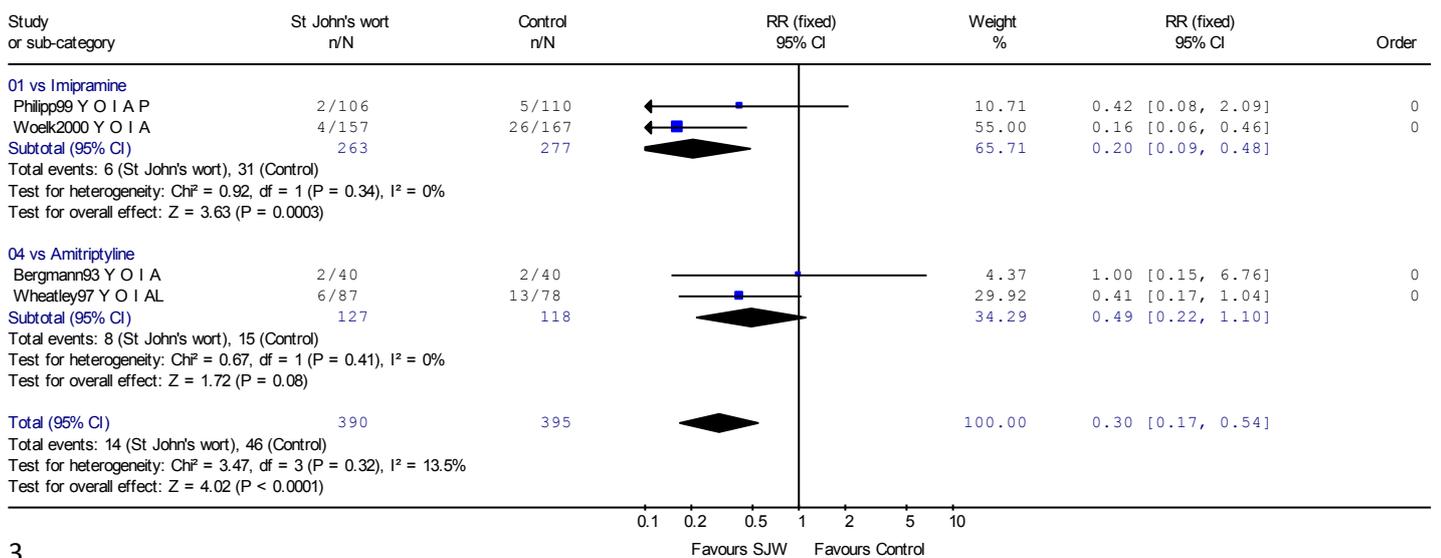
Review: Pharmacology: St John's wort
 Comparison: 05 Efficacy against TCAs
 Outcome: 03 Mean endpoint scores



1
 Review: Pharmacology: St John's wort
 Comparison: 06 Tolerability against TCAs
 Outcome: 01 Leaving the study early



2
 Review: Pharmacology: St John's wort
 Comparison: 06 Tolerability against TCAs
 Outcome: 02 Leaving the study early due to side effects

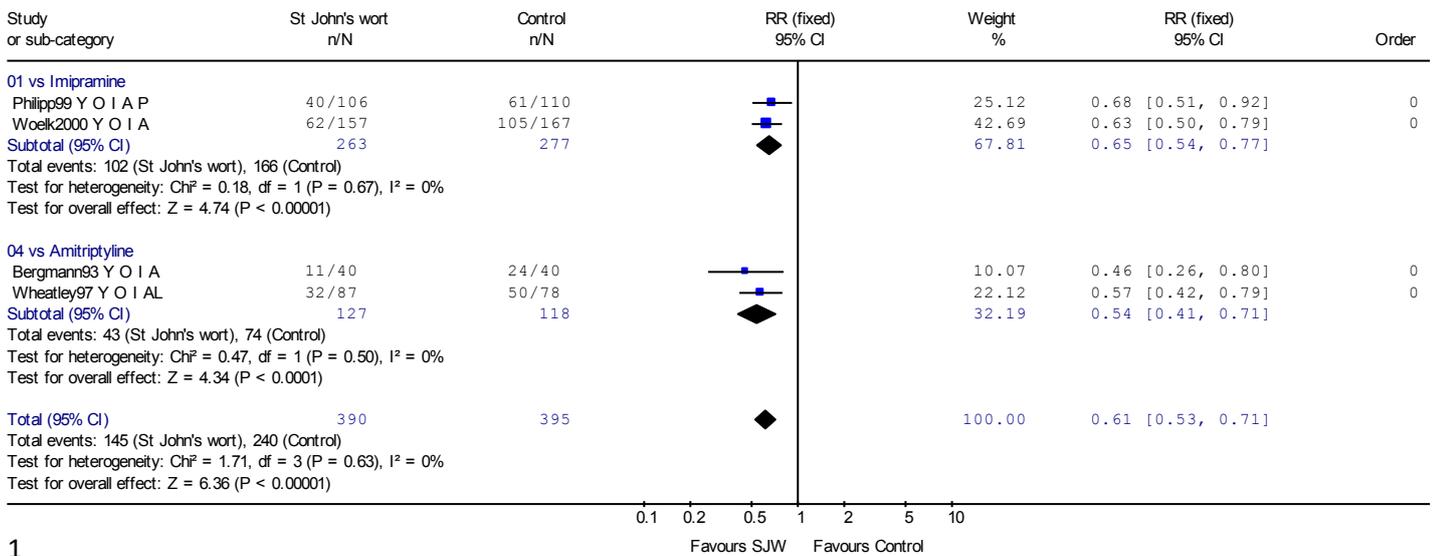


3

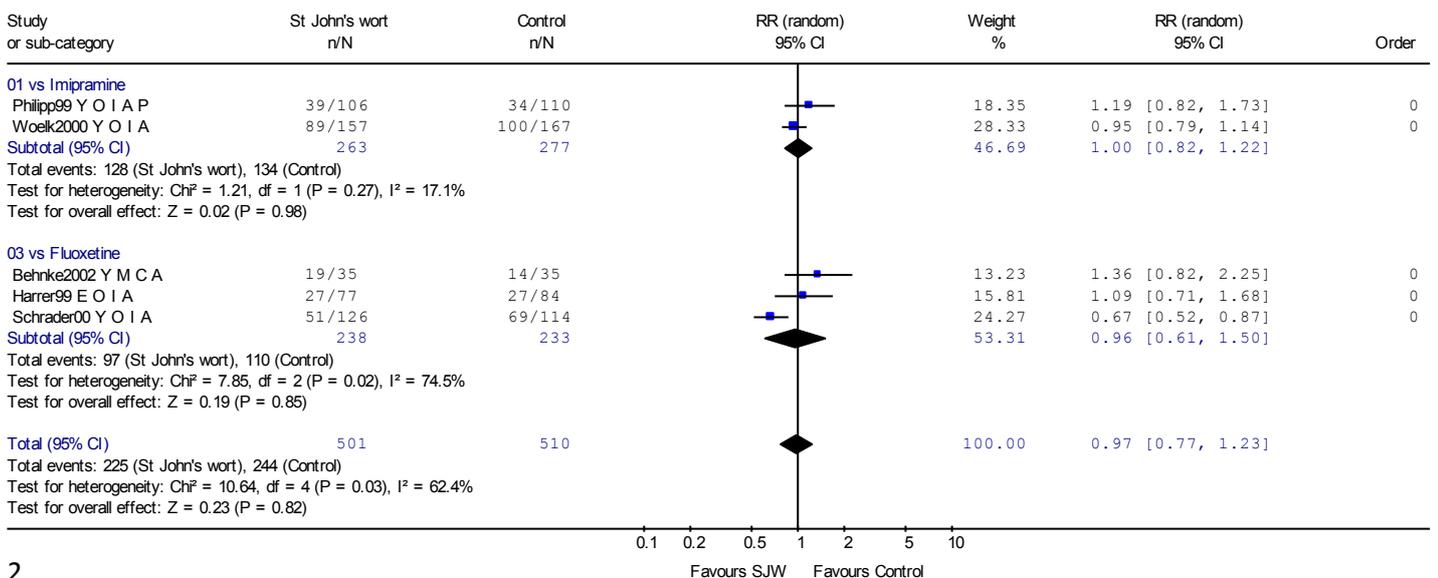
Depression in adults: treatment and management

Forest plots

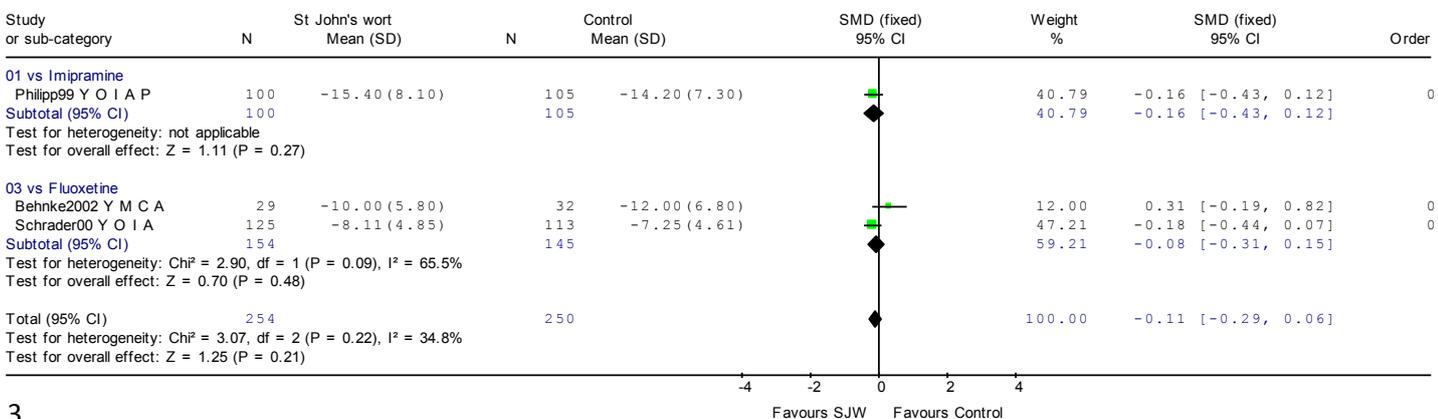
Review: Pharmacology: St John's wort
 Comparison: 06 Tolerability against TCAs
 Outcome: 03 Patients reporting side effects



1
 Review: Pharmacology: St John's wort
 Comparison: 07 Efficacy against therapeutic doses of ADs
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score



2
 Review: Pharmacology: St John's wort
 Comparison: 07 Efficacy against therapeutic doses of ADs
 Outcome: 03 Mean endpoint scores

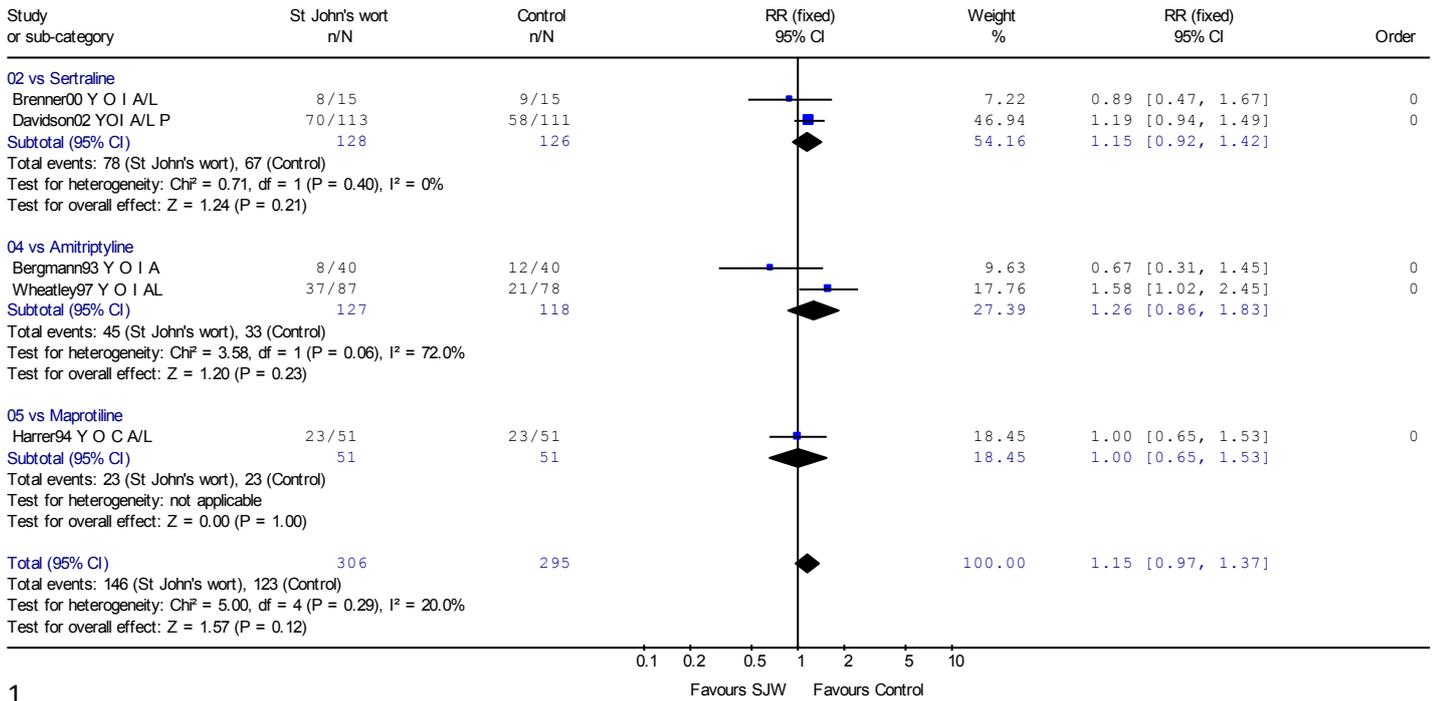


3

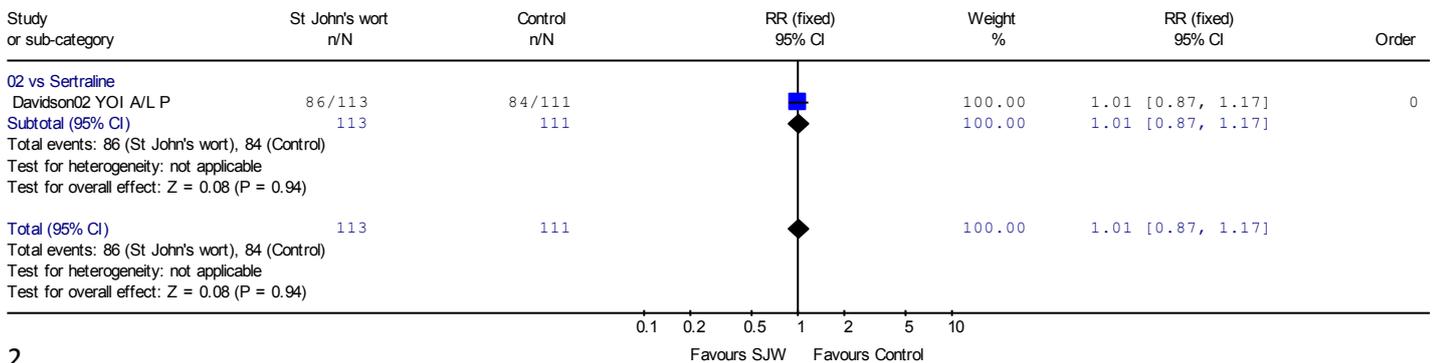
Depression in adults: treatment and management

Forest plots

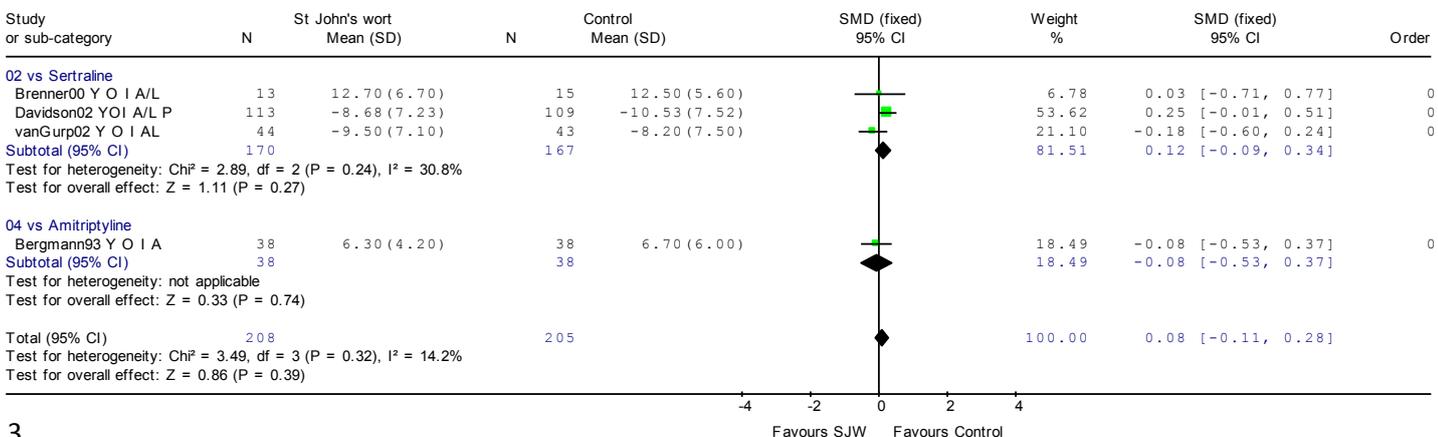
Review: Pharmacology: St John's wort
 Comparison: 08 Efficacy against low doses of ADs
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score



1
 Review: Pharmacology: St John's wort
 Comparison: 08 Efficacy against low doses of ADs
 Outcome: 02 Number of people not achieving remission



2
 Review: Pharmacology: St John's wort
 Comparison: 08 Efficacy against low doses of ADs
 Outcome: 03 Mean endpoint scores

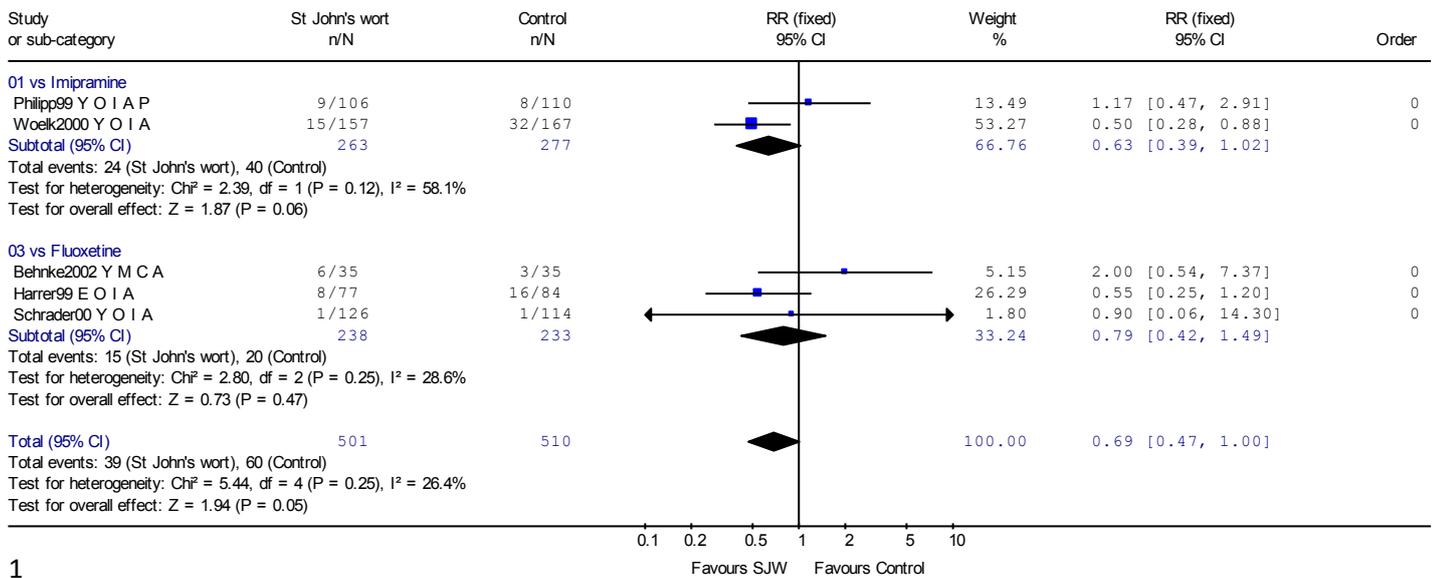


3

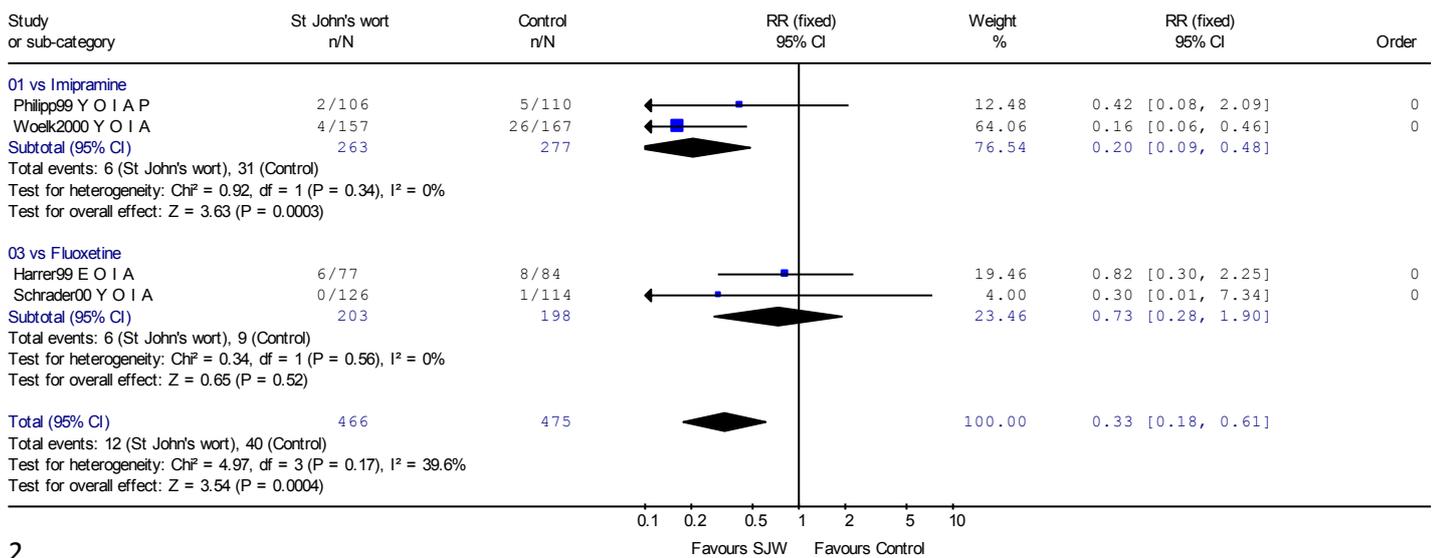
Depression in adults: treatment and management

Forest plots

Review: Pharmacology: St John's wort
 Comparison: 09 Tolerability against therapeutic doses of ADs
 Outcome: 01 Leaving the study early



1
 Review: Pharmacology: St John's wort
 Comparison: 09 Tolerability against therapeutic doses of ADs
 Outcome: 02 Leaving the study early due to side effects

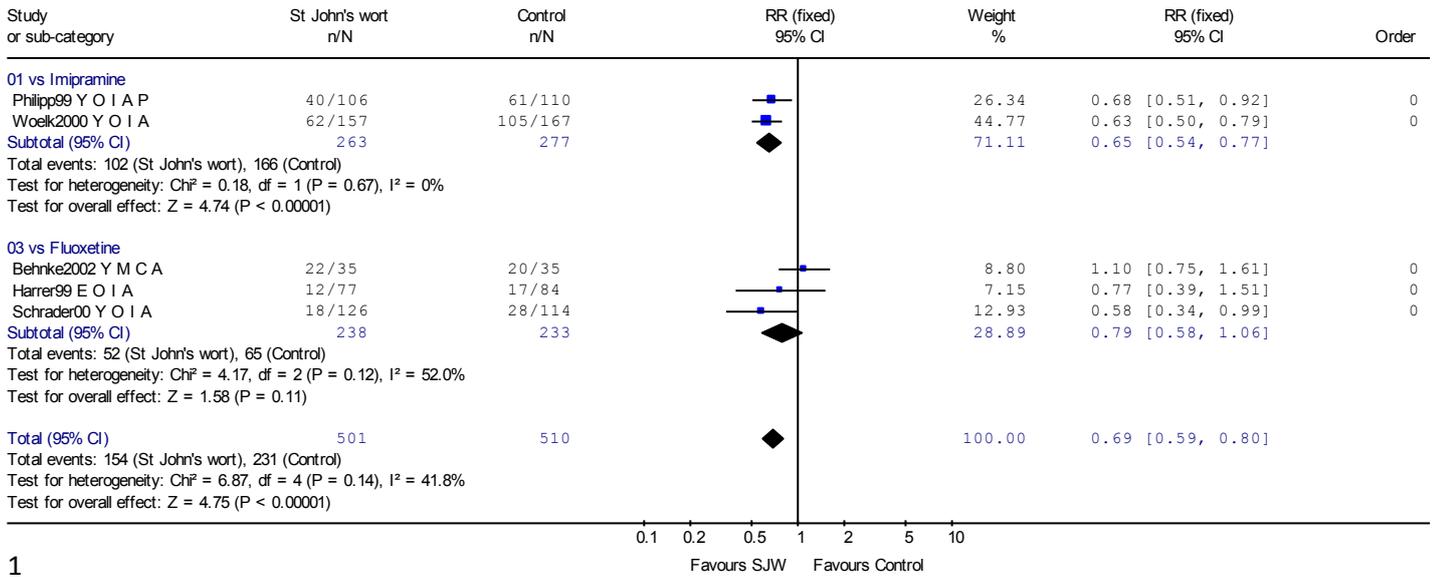


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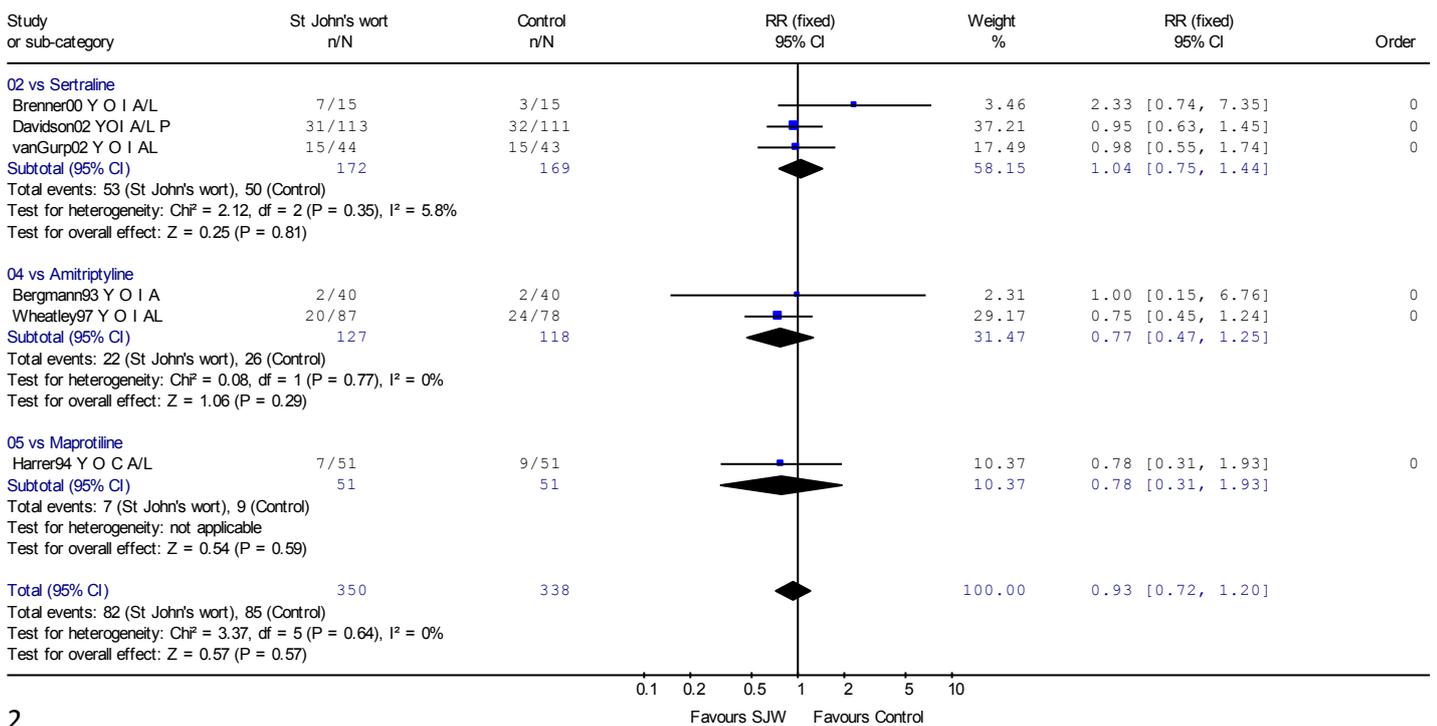
Depression in adults: treatment and management

Forest plots

Review: Pharmacology: St John's wort
 Comparison: 09 Tolerability against therapeutic doses of ADs
 Outcome: 03 Patients reporting side effects



1
 Review: Pharmacology: St John's wort
 Comparison: 10 Tolerability against low doses of ADs
 Outcome: 01 Leaving the study early

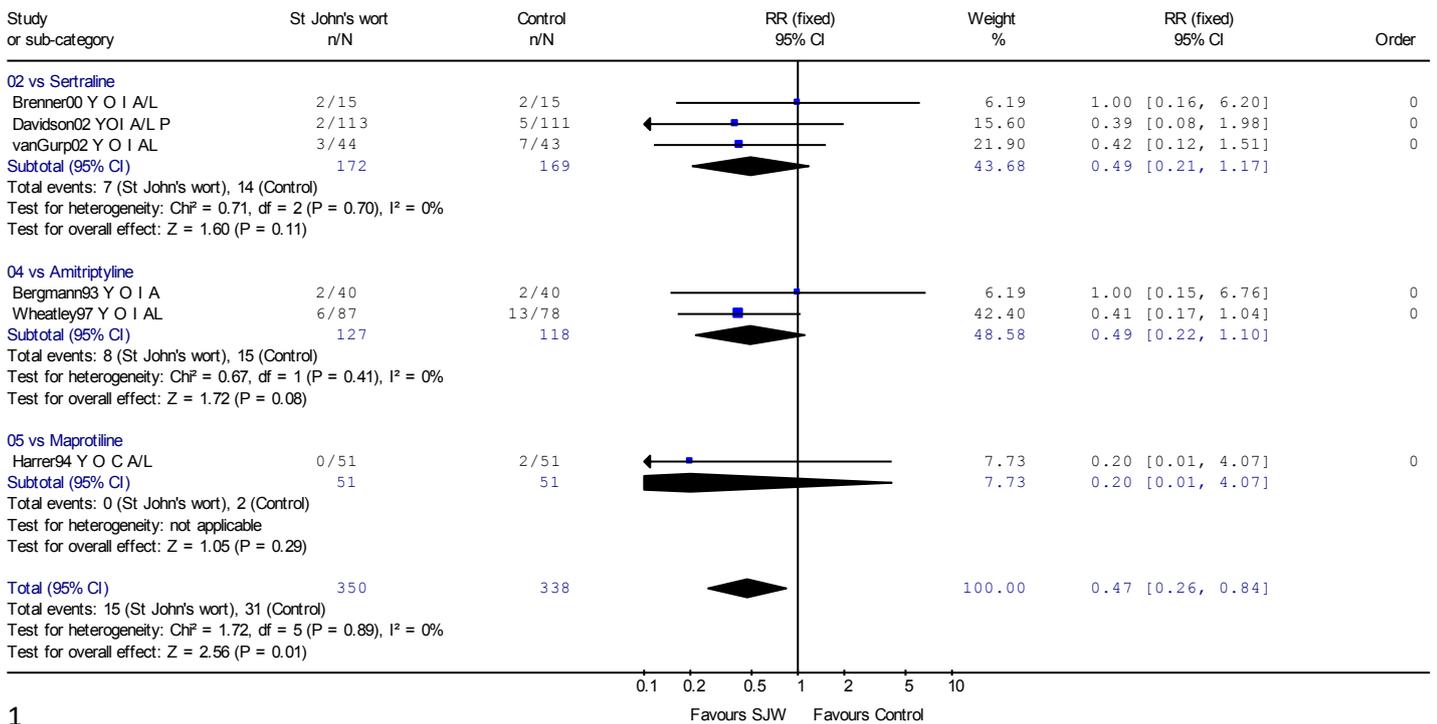


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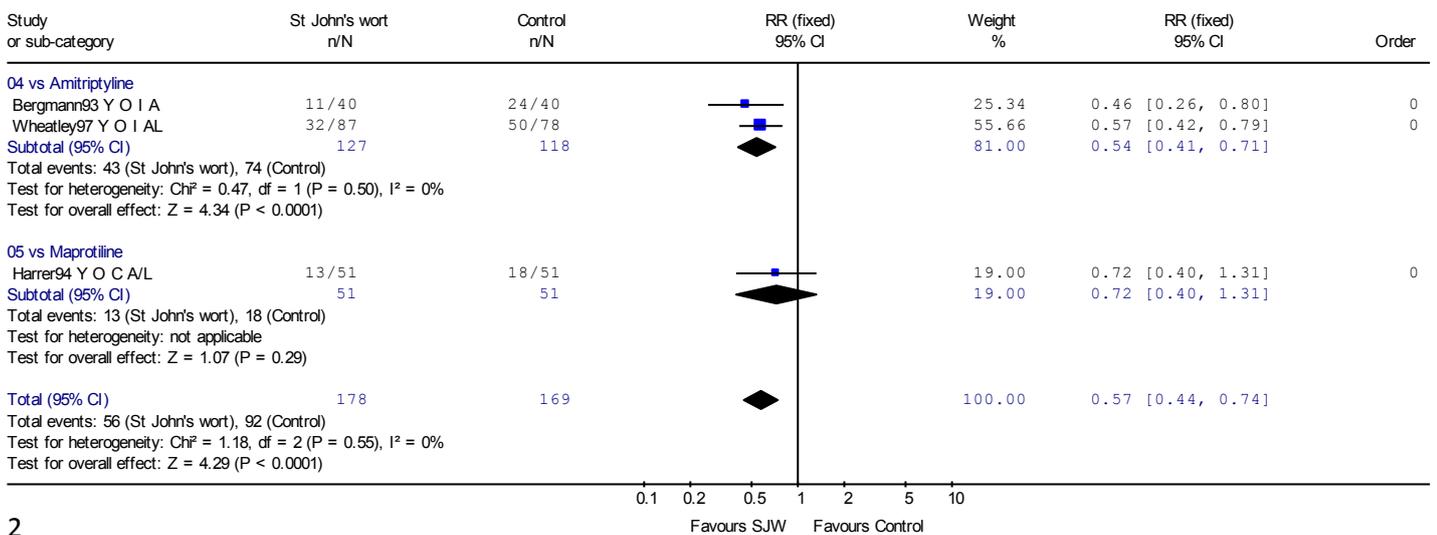
Depression in adults: treatment and management

Forest plots

Review: Pharmacology: St John's wort
 Comparison: 10 Tolerability against low doses of ADs
 Outcome: 02 Leaving the study early due to side effects



1
 Review: Pharmacology: St John's wort
 Comparison: 10 Tolerability against low doses of ADs
 Outcome: 03 Patients reporting side effects

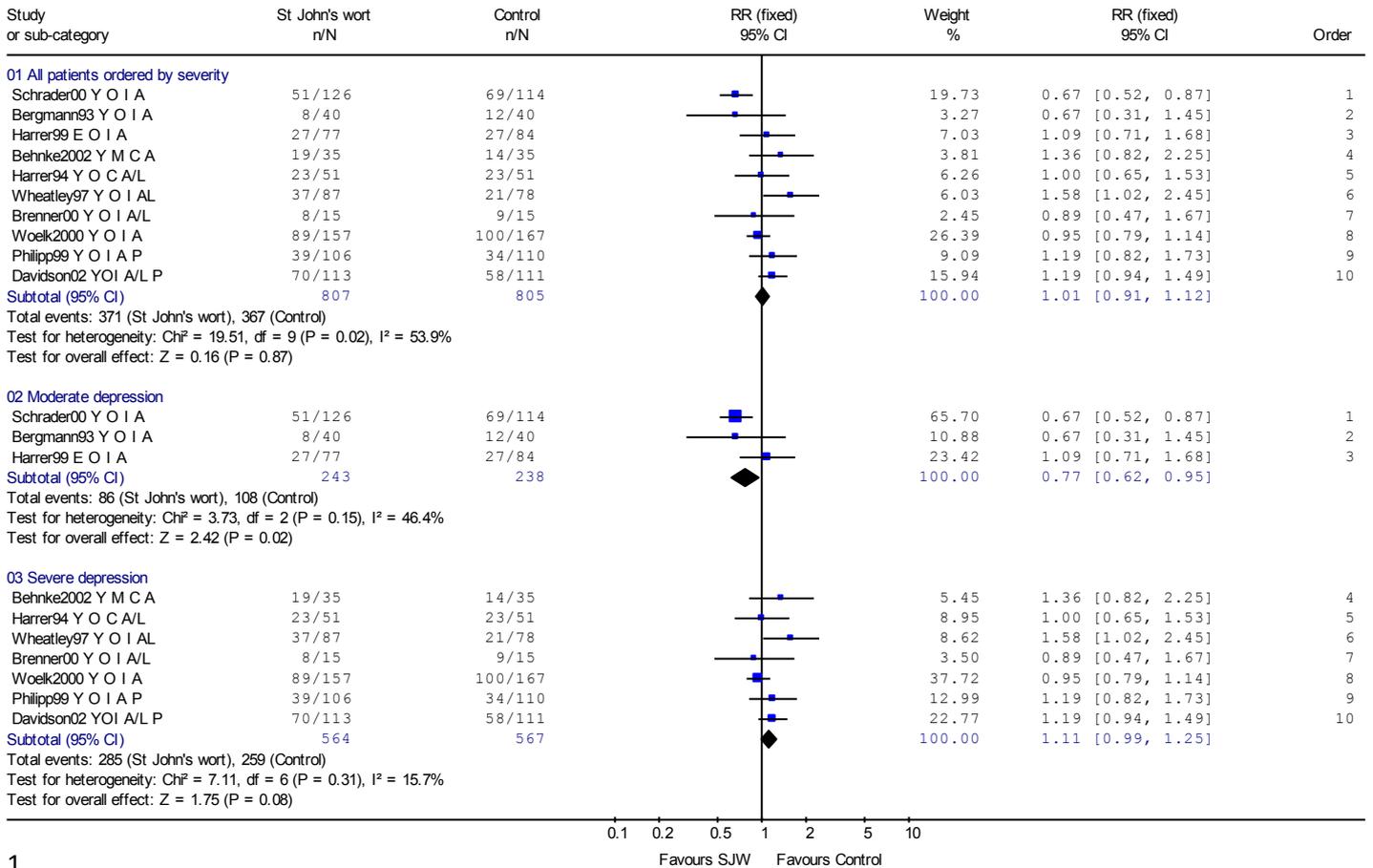


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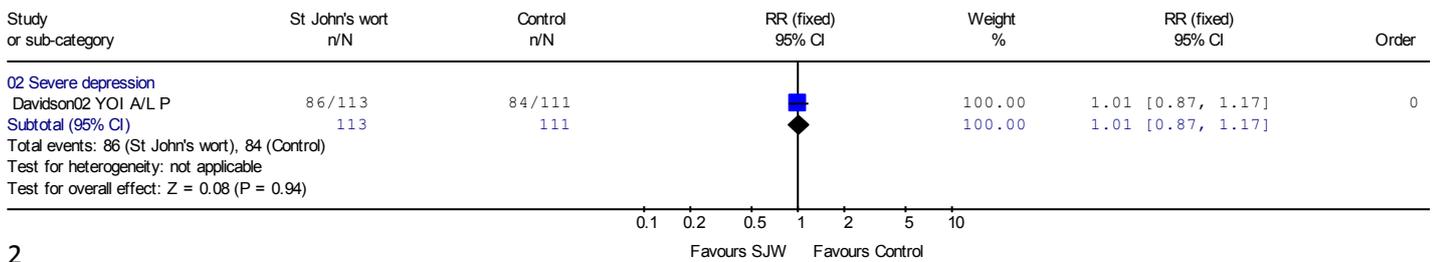
Depression in adults: treatment and management

Forest plots

Review: Pharmacology: St John's wort
 Comparison: 11 Efficacy against ADs by severity of depression
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score



1
 Review: Pharmacology: St John's wort
 Comparison: 11 Efficacy against ADs by severity of depression
 Outcome: 02 Number of people not achieving remission

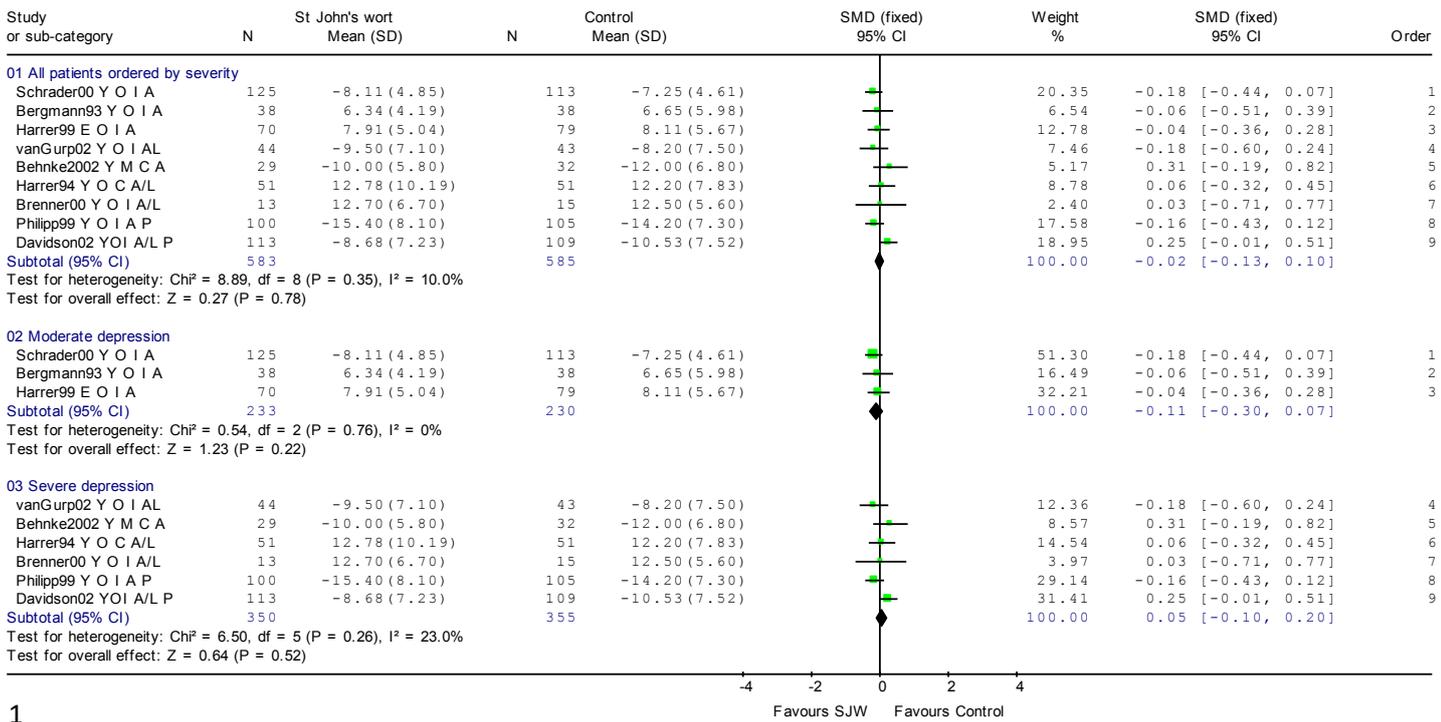


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Depression in adults: treatment and management

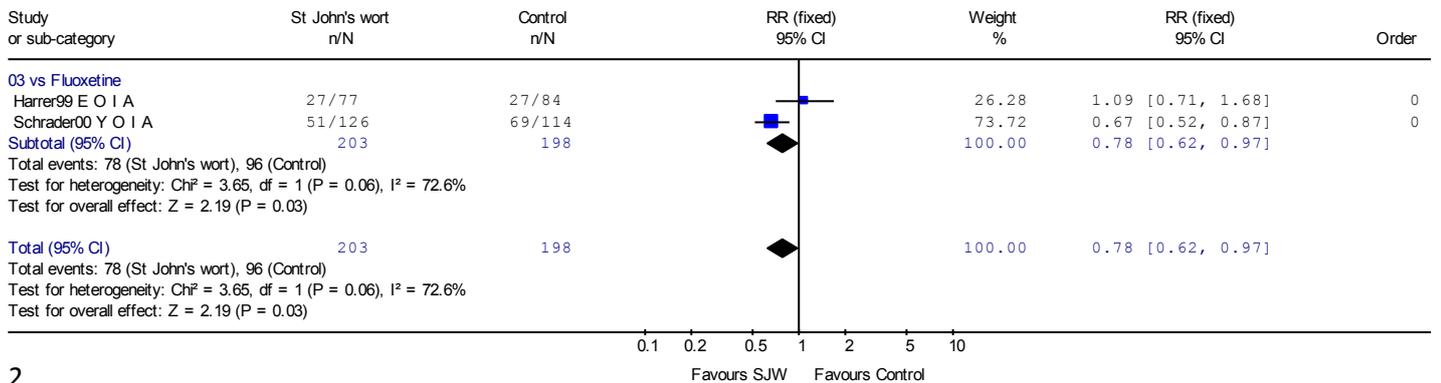
Forest plots

Review: Pharmacology: St John's wort
 Comparison: 11 Efficacy against ADs by severity of depression
 Outcome: 03 Mean endpoint scores



1

Review: Pharmacology: St John's wort
 Comparison: 12 Therapeutic dose / severity
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score / moderate depression

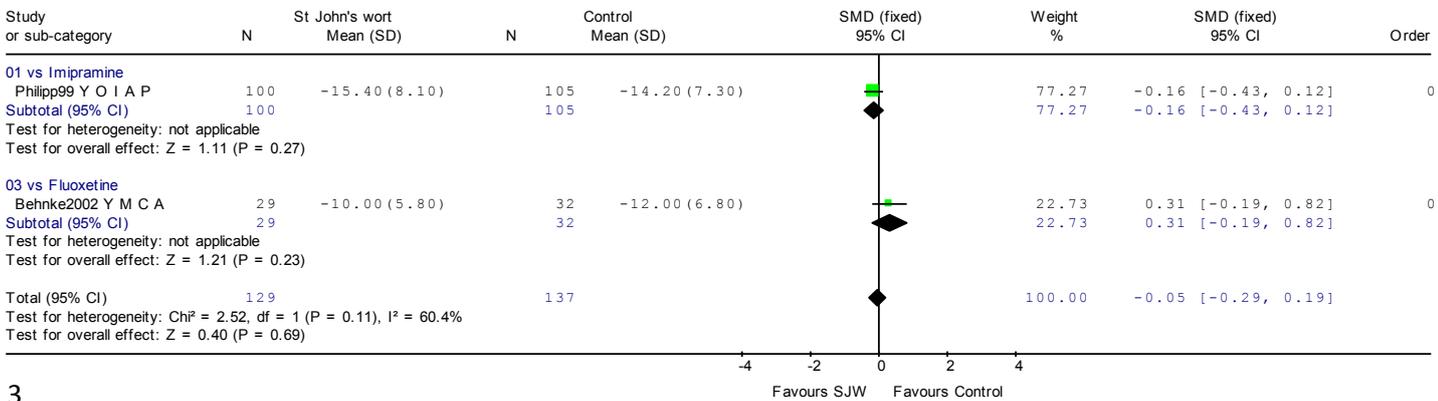
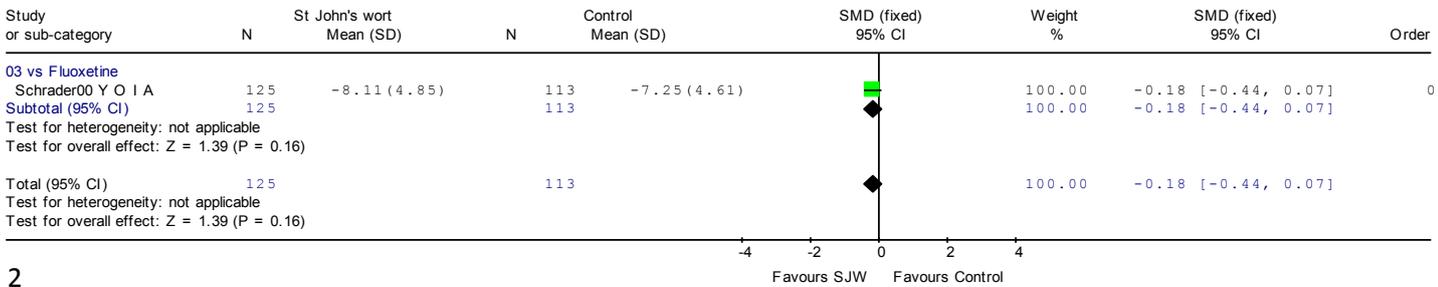
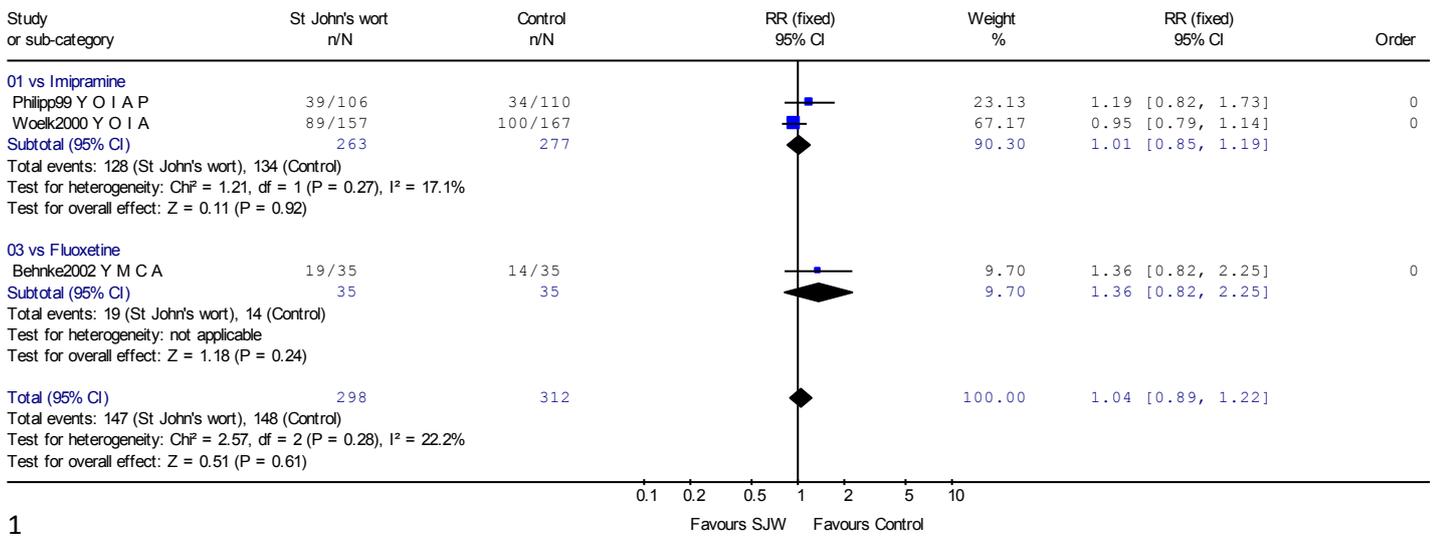


2

Depression in adults: treatment and management

Forest plots

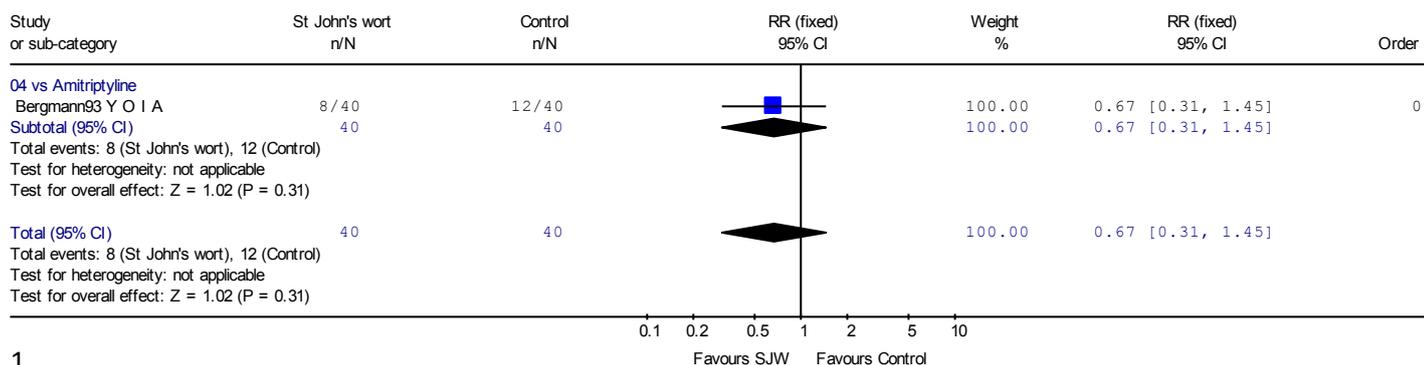
Review: Pharmacology: St John's wort
 Comparison: 12 Therapeutic dose / severity
 Outcome: 02 Number of people not achieving at least 50% reduction in depression score / severe depression



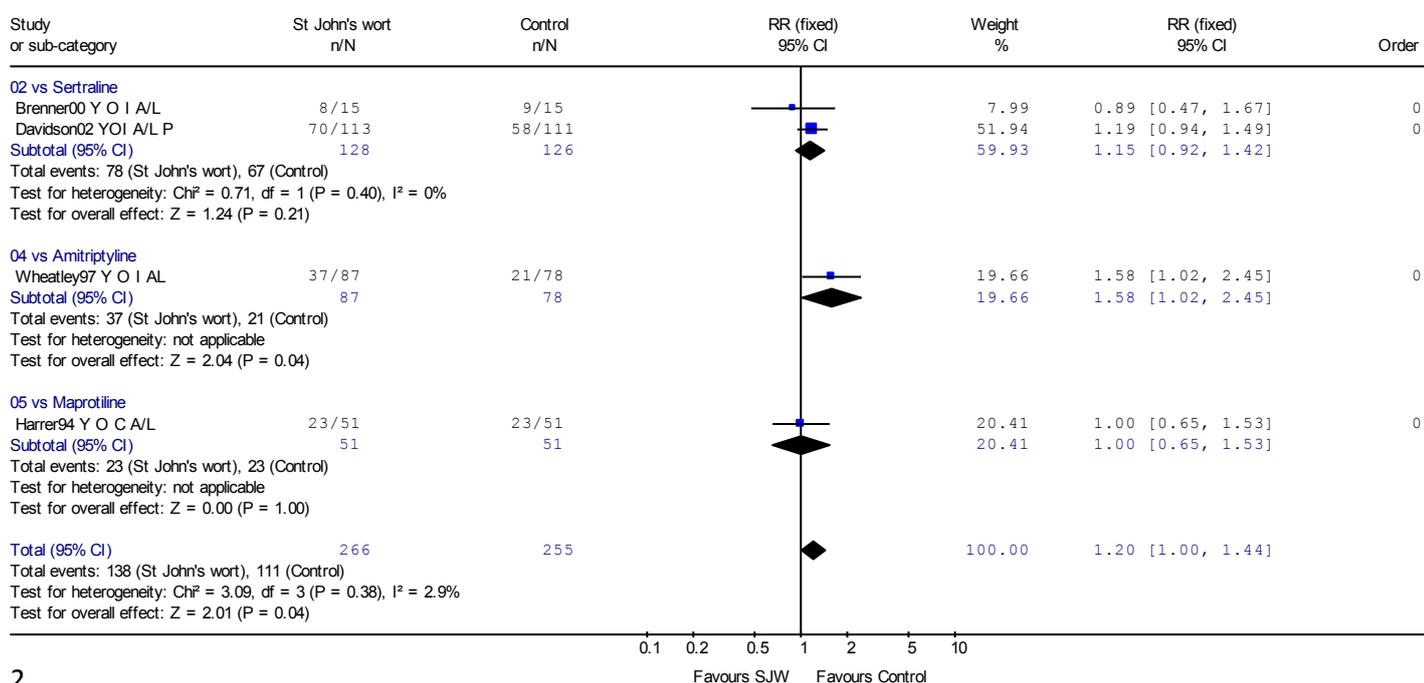
Depression in adults: treatment and management

Forest plots

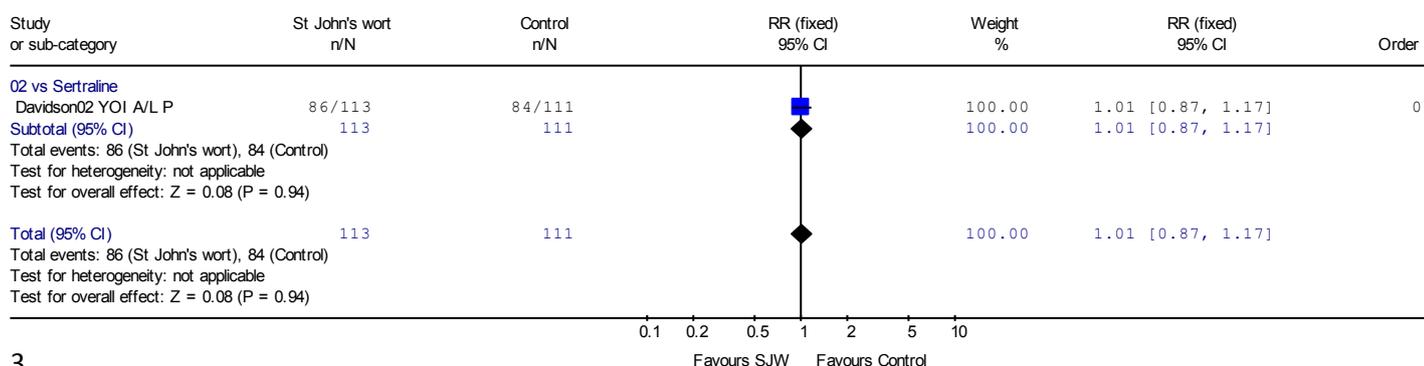
Review: Pharmacology: St John's wort
 Comparison: 13 Low dose / severity
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score / moderate depression



1
 Review: Pharmacology: St John's wort
 Comparison: 13 Low dose / severity
 Outcome: 02 Number of people not achieving at least 50% reduction in depression score / severe depression



2
 Review: Pharmacology: St John's wort
 Comparison: 13 Low dose / severity
 Outcome: 03 Number of people not achieving remission / severe depression

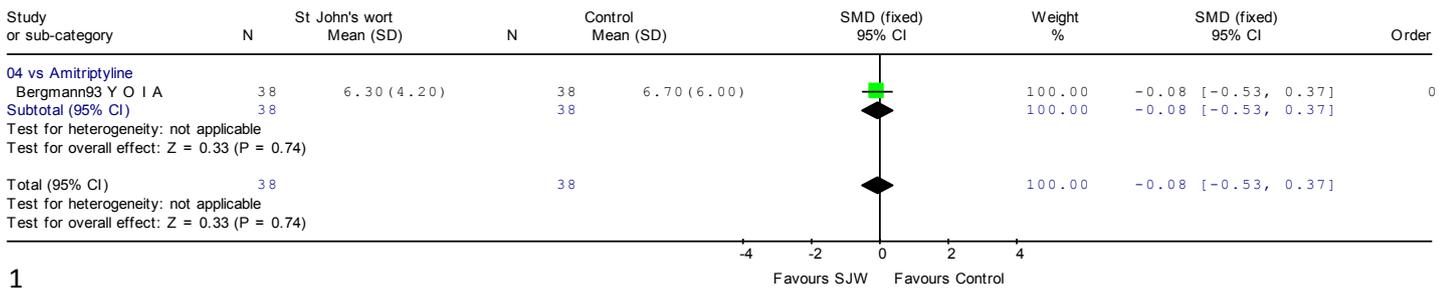


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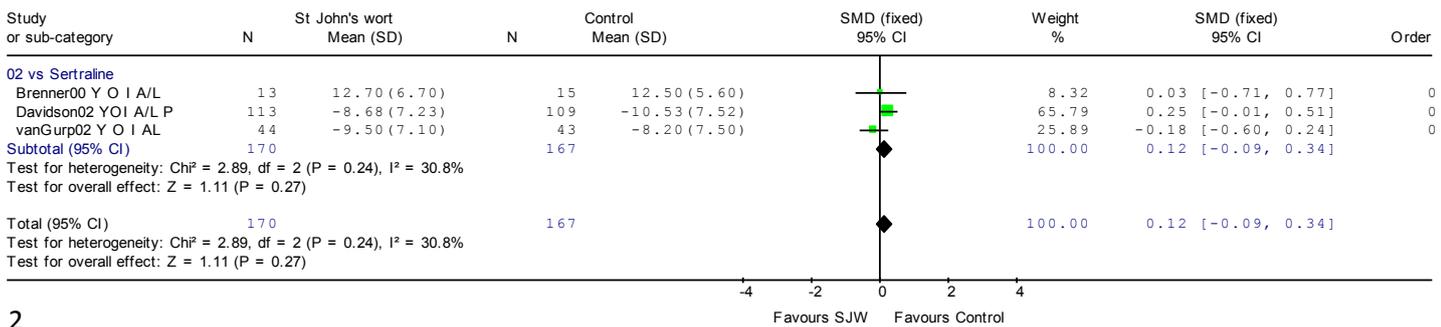
Depression in adults: treatment and management

Forest plots

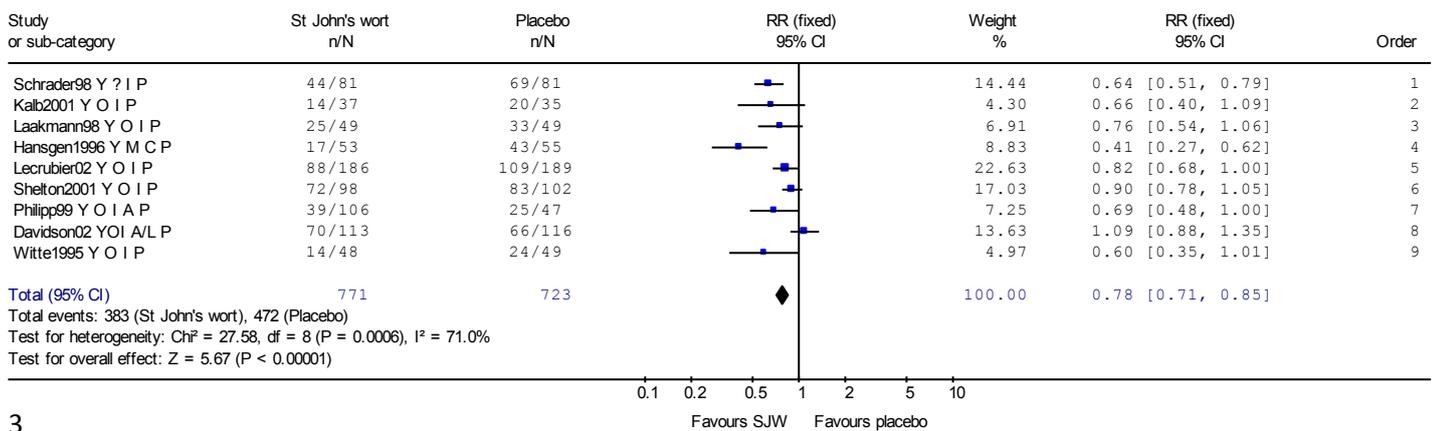
Review: Pharmacology: St John's wort
 Comparison: 13 Low dose / severity
 Outcome: 04 Mean endpoint scores / moderate depression



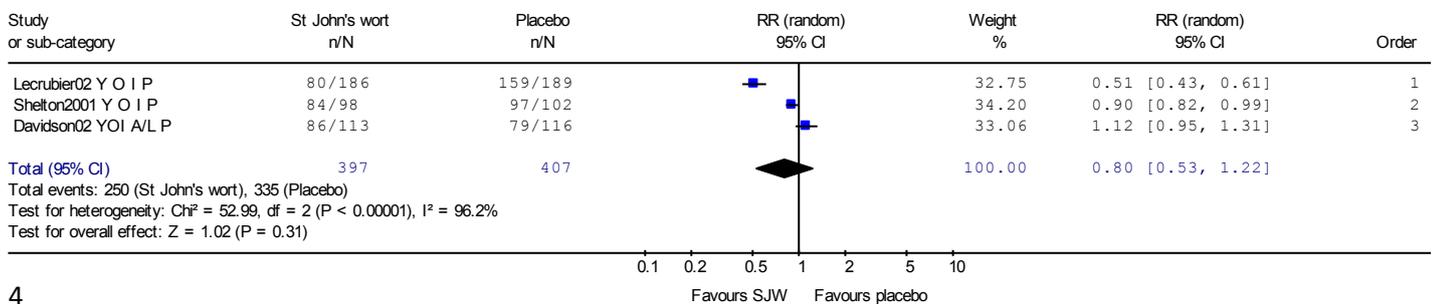
1
 Review: Pharmacology: St John's wort
 Comparison: 13 Low dose / severity
 Outcome: 05 Mean endpoint scores / severe depression



2
 Review: Pharmacology: St John's wort
 Comparison: 14 Efficacy against placebo
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score



3
 Review: Pharmacology: St John's wort
 Comparison: 14 Efficacy against placebo
 Outcome: 02 Number of people not achieving remission

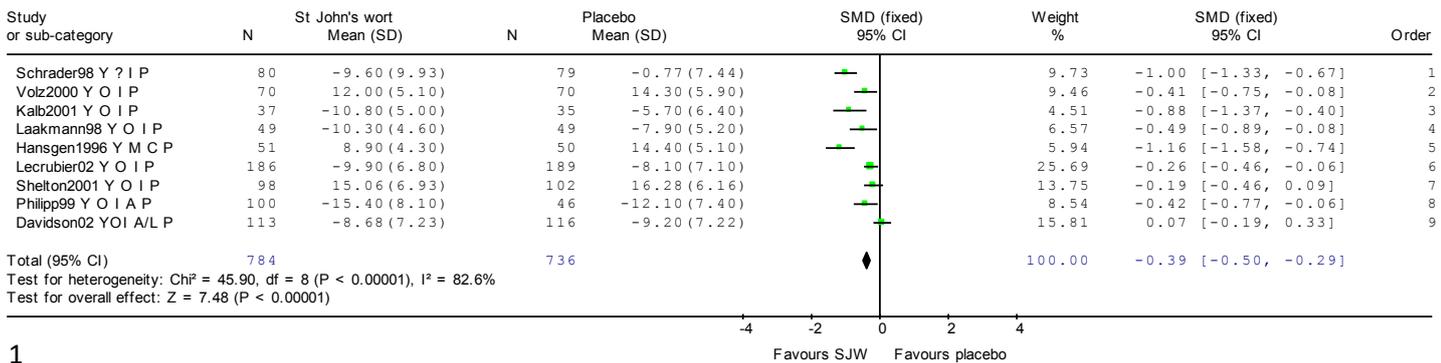


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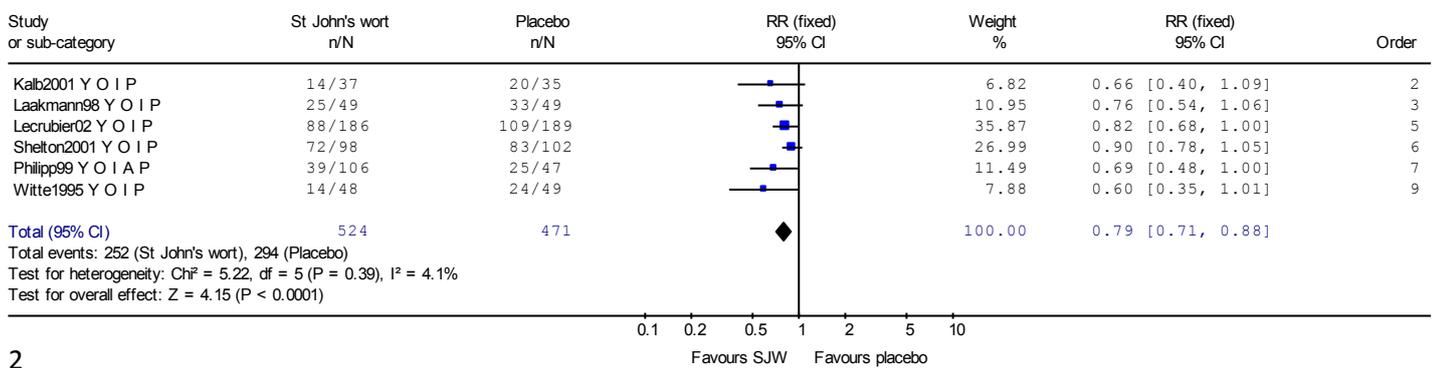
Depression in adults: treatment and management

Forest plots

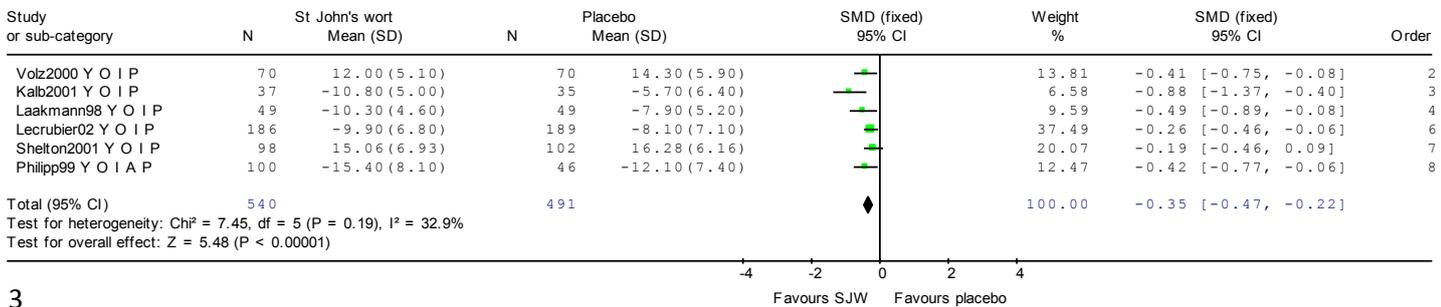
Review: Pharmacology: St John's wort
 Comparison: 14 Efficacy against placebo
 Outcome: 03 Mean endpoint scores



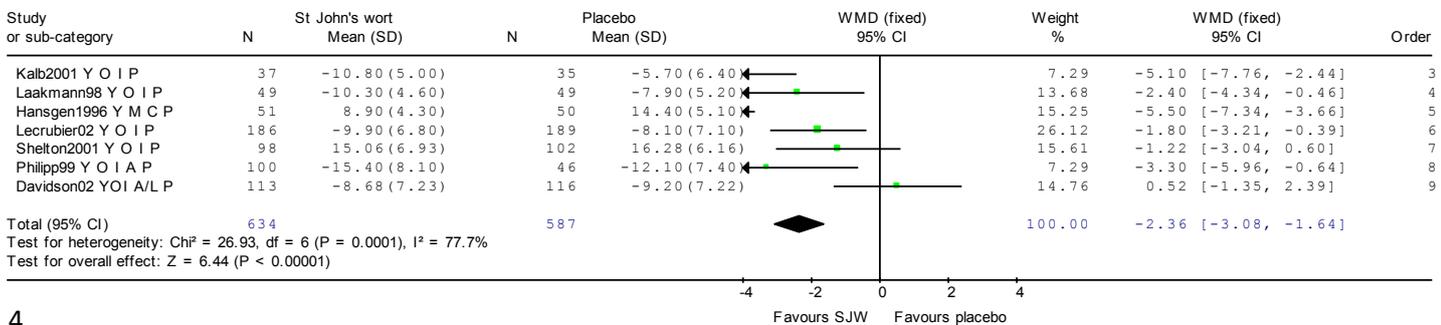
1
 Review: Pharmacology: St John's wort
 Comparison: 14 Efficacy against placebo
 Outcome: 04 Sensitivity analysis: Number of people not achieving at least 50% reduction in depression score



2
 Review: Pharmacology: St John's wort
 Comparison: 14 Efficacy against placebo
 Outcome: 05 Sensitivity analysis: Mean endpoint scores



3
 Review: Pharmacology: St John's wort
 Comparison: 14 Efficacy against placebo
 Outcome: 06 Mean endpoint scores (HRSD-17 only)

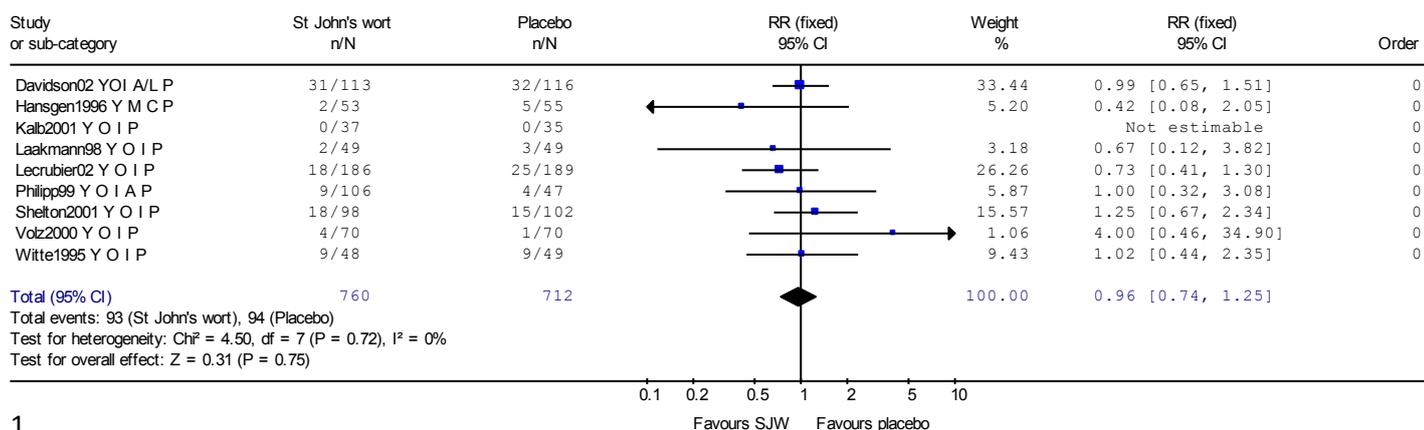


4
 Favours SJW Favours placebo

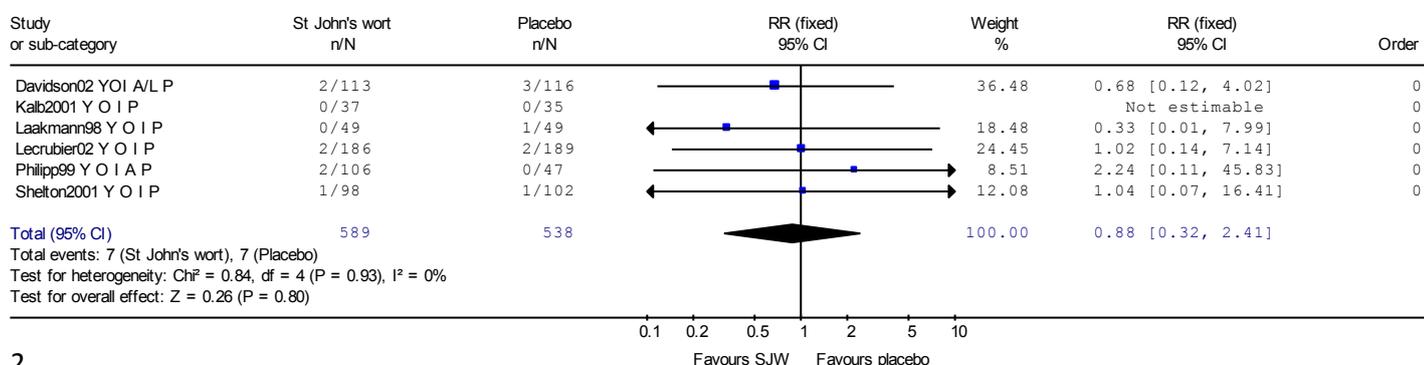
Depression in adults: treatment and management

Forest plots

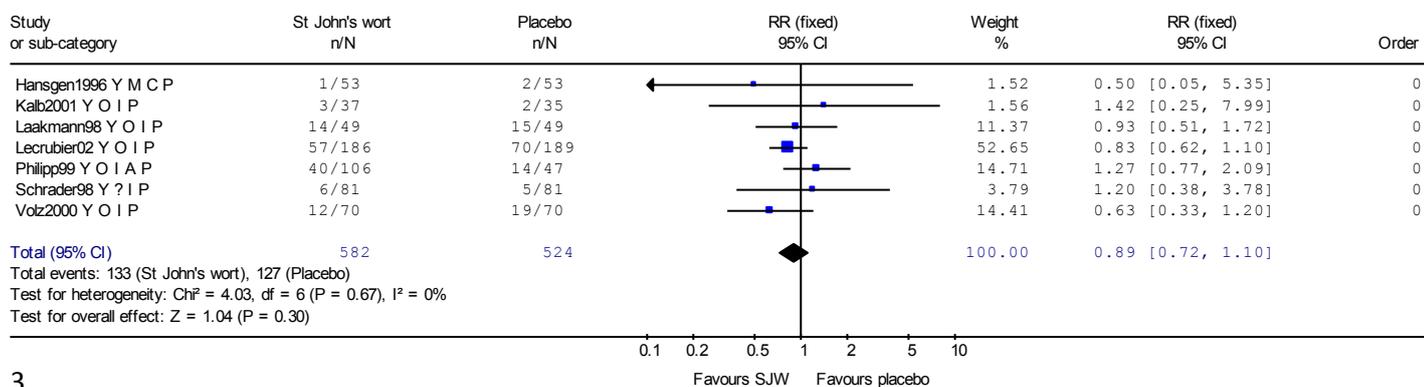
Review: Pharmacology: St John's wort
 Comparison: 15 Tolerability against placebo
 Outcome: 01 Leaving the study early



1
 Review: Pharmacology: St John's wort
 Comparison: 15 Tolerability against placebo
 Outcome: 02 Leaving the study early due to side effects



2
 Review: Pharmacology: St John's wort
 Comparison: 15 Tolerability against placebo
 Outcome: 03 Patients reporting side effects

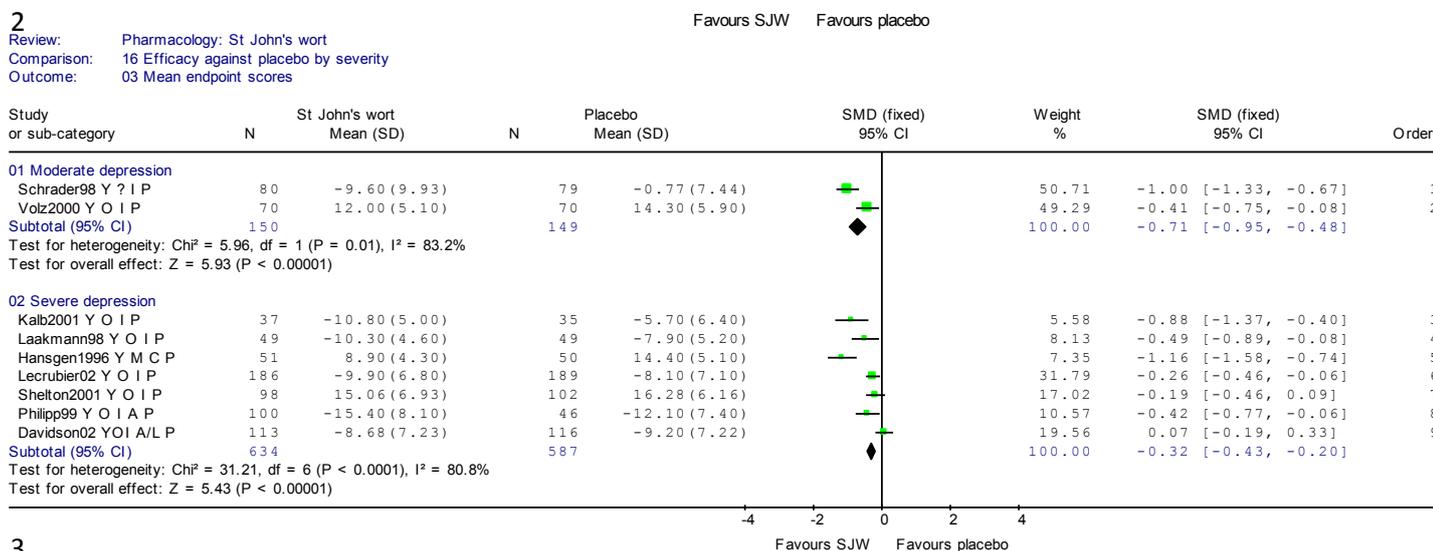
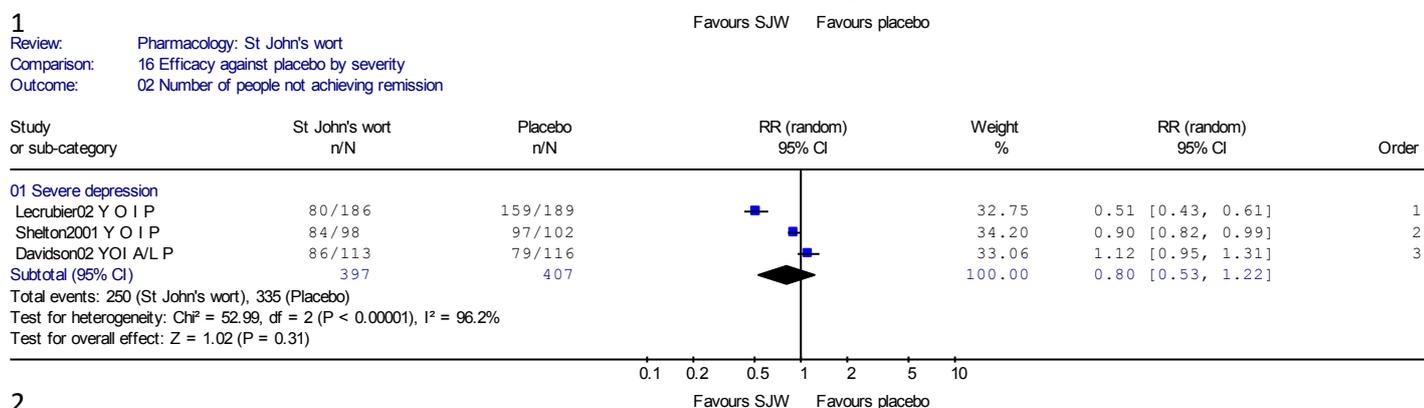
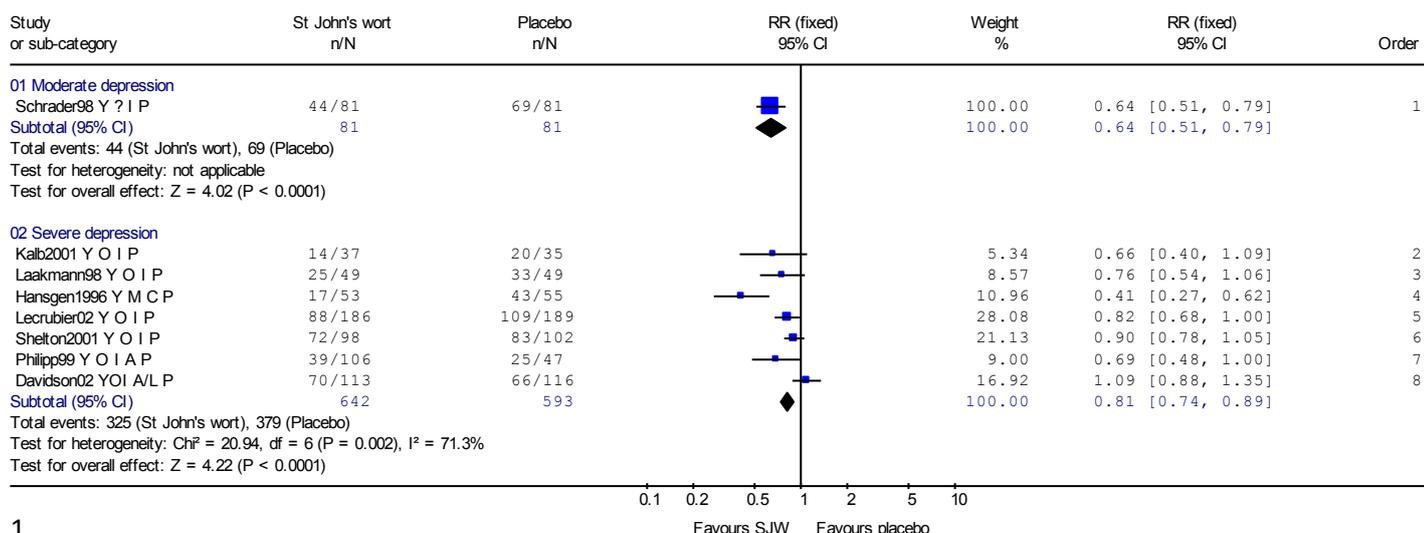


3

Depression in adults: treatment and management

Forest plots

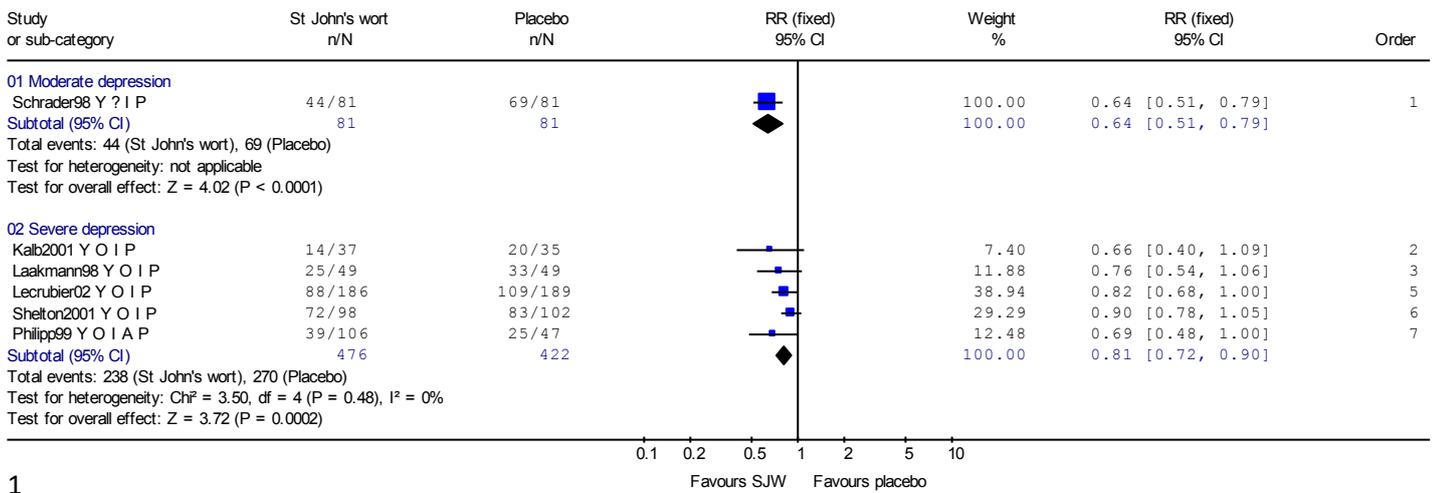
Review: Pharmacology: St John's wort
 Comparison: 16 Efficacy against placebo by severity
 Outcome: 01 Number of people not achieving at least 50% reduction in depression score



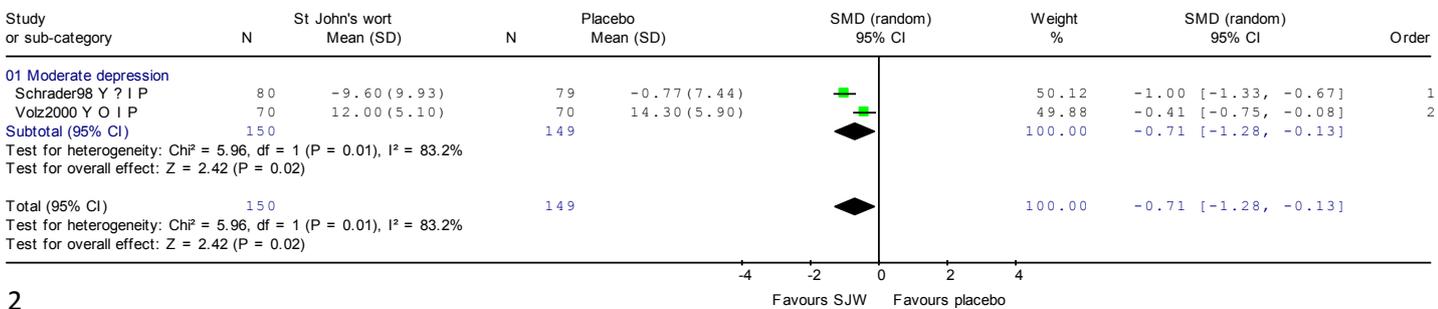
Depression in adults: treatment and management

Forest plots

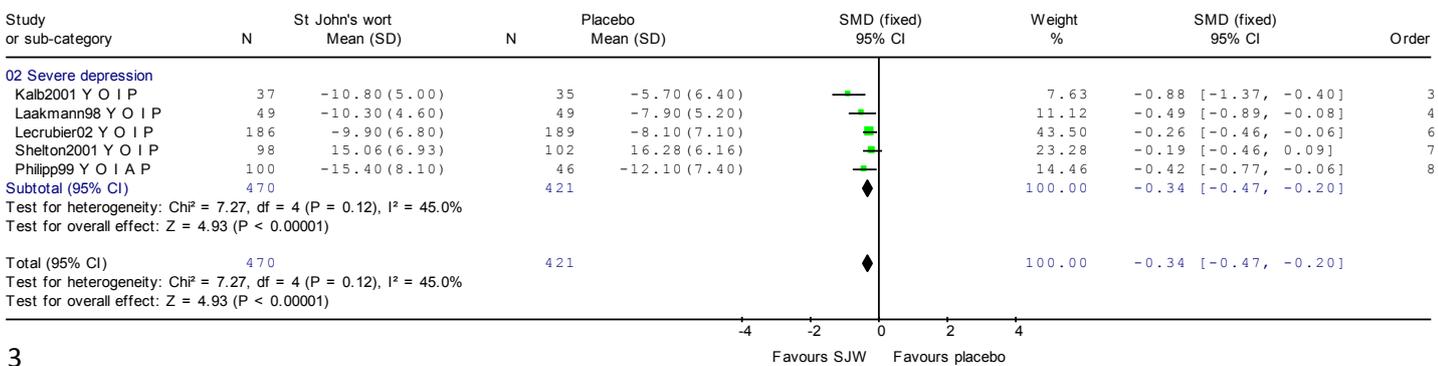
Review: Pharmacology: St John's wort
 Comparison: 16 Efficacy against placebo by severity
 Outcome: 04 Sensitivity analysis: Number of people not achieving at least 50% reduction in depression score



1
 Review: Pharmacology: St John's wort
 Comparison: 16 Efficacy against placebo by severity
 Outcome: 05 Sensitivity analysis: Mean endpoint scores



2
 Review: Pharmacology: St John's wort
 Comparison: 16 Efficacy against placebo by severity
 Outcome: 06 Sensitivity analysis: Mean endpoint scores



3
4

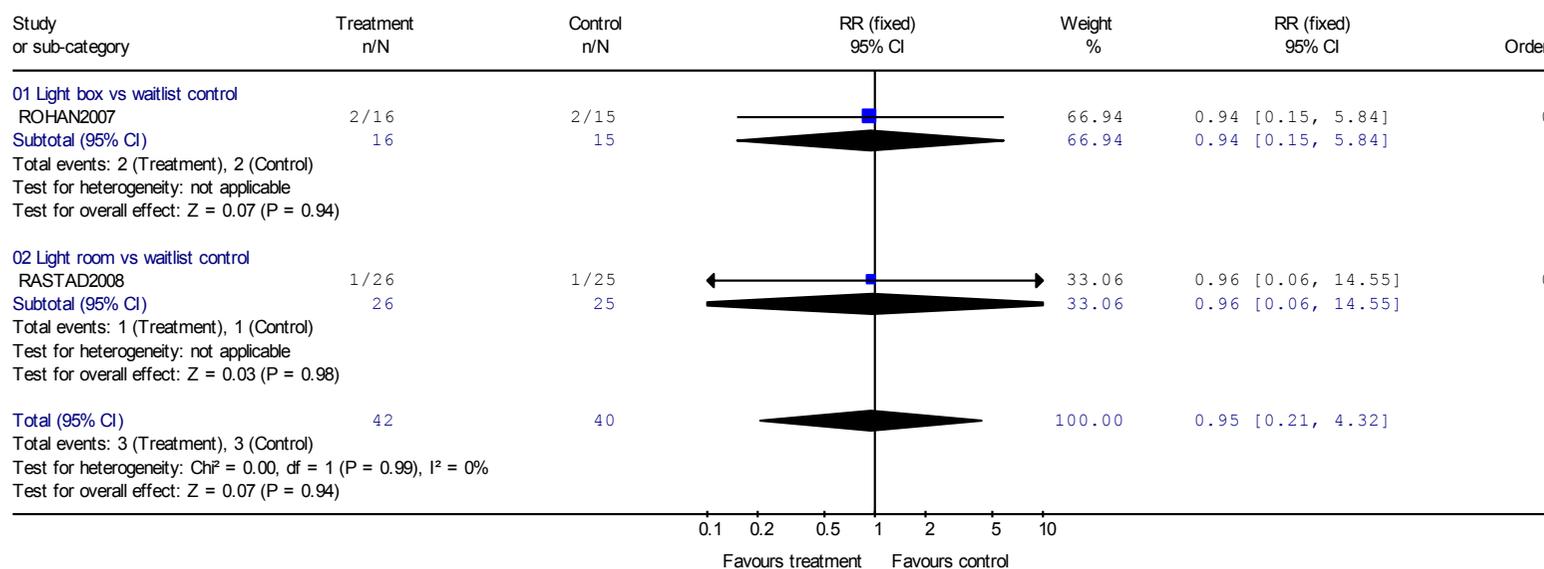
Depression in adults: treatment and management
Forest plots

Treatments for SAD

bright light versus waitlist control

Number leaving the study early for any reason

Review: Depression update pharmacology: treatments for SAD
Comparison: 01 Bright light vs waitlist control
Outcome: 01 Leaving study early for any reason

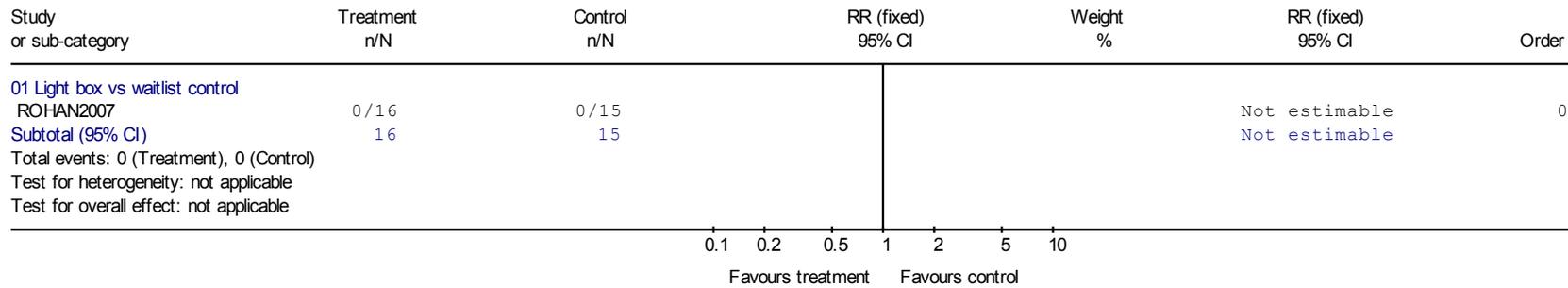


Number leaving the study early due to side effects

Depression in adults: treatment and management

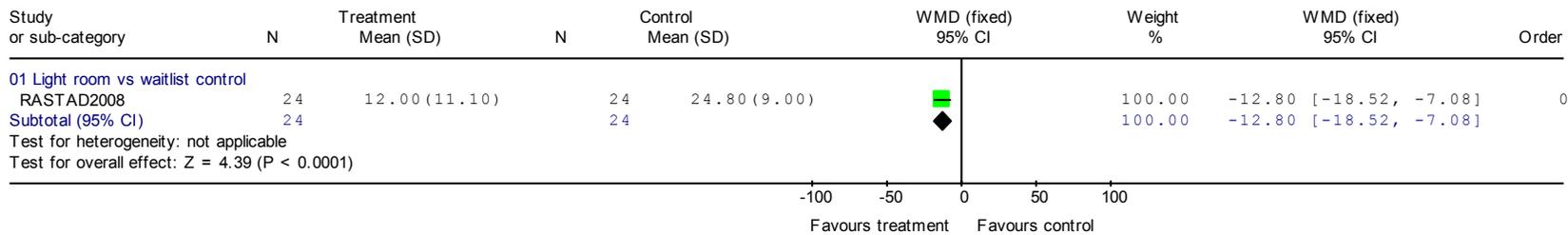
Forest plots

Review: Depression update pharmacology: treatments for SAD
 Comparison: 01 Bright light vs waitlist control
 Outcome: 02 Leaving study early due to side effects



Mean endpoint SAD depression scores (SIGH-SAD-SR) (self-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 01 Bright light vs waitlist control
 Outcome: 03 Mean self rated SAD depression scores (SIGH-SAD-SR) at endpoint

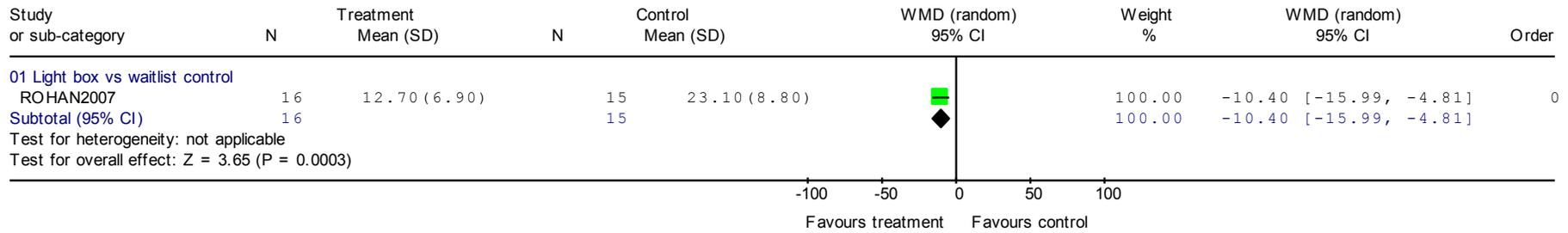


Mean endpoint SAD depression scores (SIGH-SAD) (clinician-rated)

Depression in adults: treatment and management

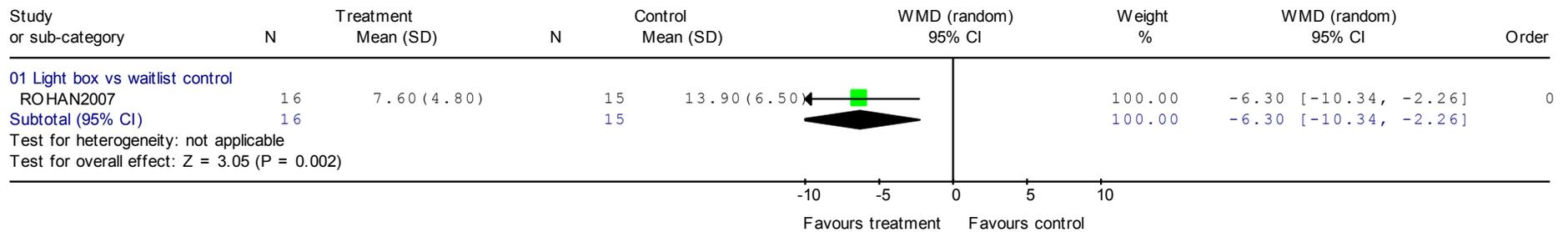
Forest plots

Review: Depression update pharmacology: treatments for SAD
 Comparison: 01 Bright light vs waitlist control
 Outcome: 04 Mean clinician rated SAD depression scores (SIGH-SAD) at endpoint



Mean endpoint depression scores (HRSD-21) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 01 Bright light vs waitlist control
 Outcome: 05 Mean clinician rated typical depression scores (HRSD-21) at endpoint

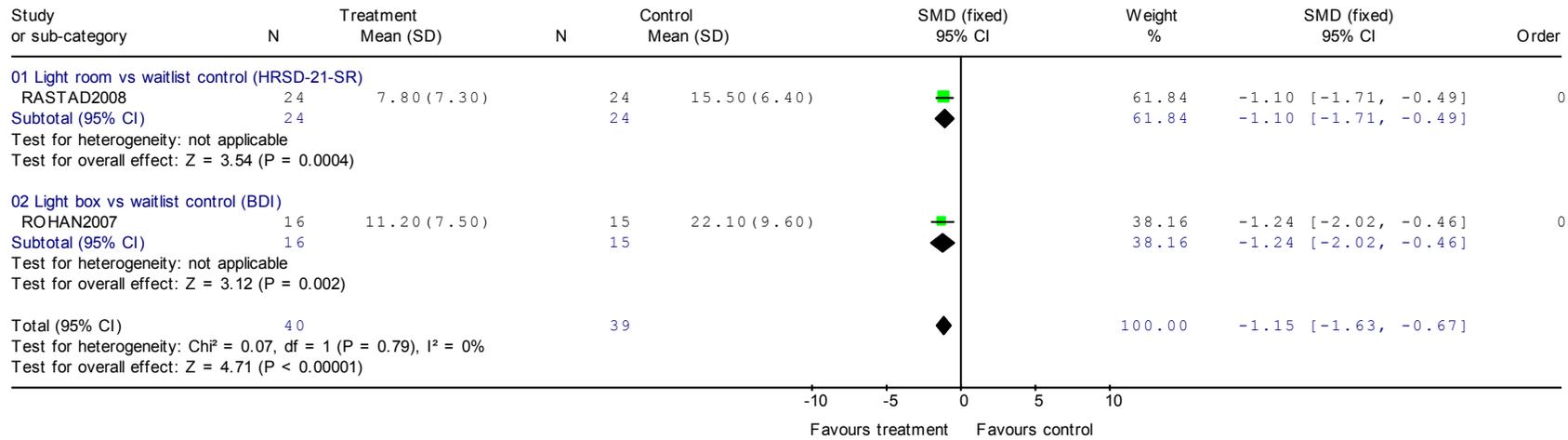


SAD.01.06. Mean depression scores at endpoint (self-rated)

Depression in adults: treatment and management

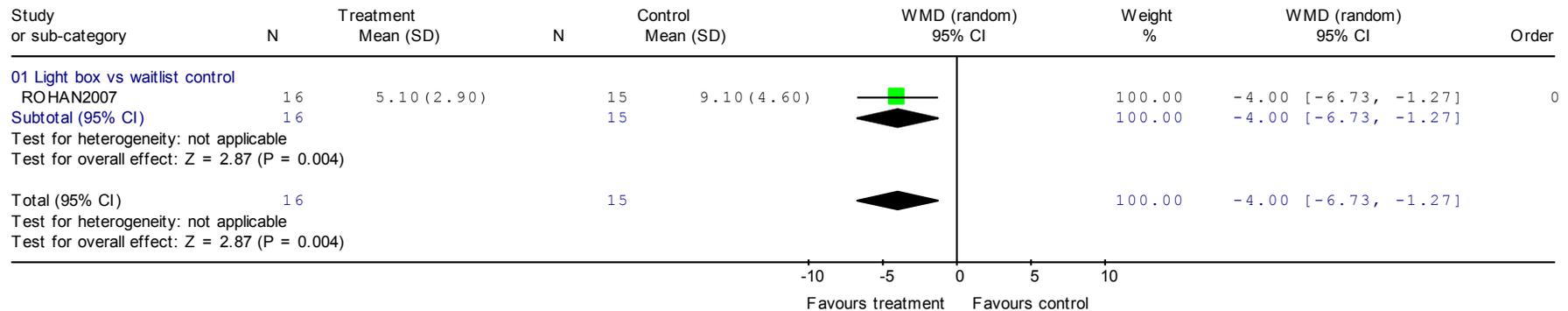
Forest plots

Review: Depression update pharmacology: treatments for SAD
 Comparison: 01 Bright light vs waitlist control
 Outcome: 06 Mean self rated depression scores at endpoint



SAD.01.07. Mean endpoint atypical depression scores (SAD subscale) (clinician-rated)

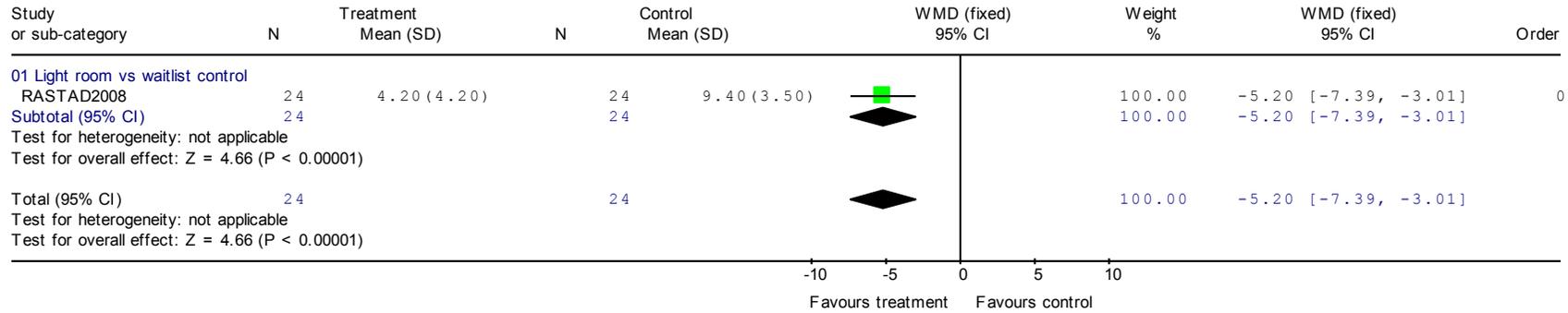
Review: Depression update pharmacology: treatments for SAD
 Comparison: 01 Bright light vs waitlist control
 Outcome: 07 Mean clinician rated atypical depression scores (SADsubscale) at endpoint



Depression in adults: treatment and management
Forest plots

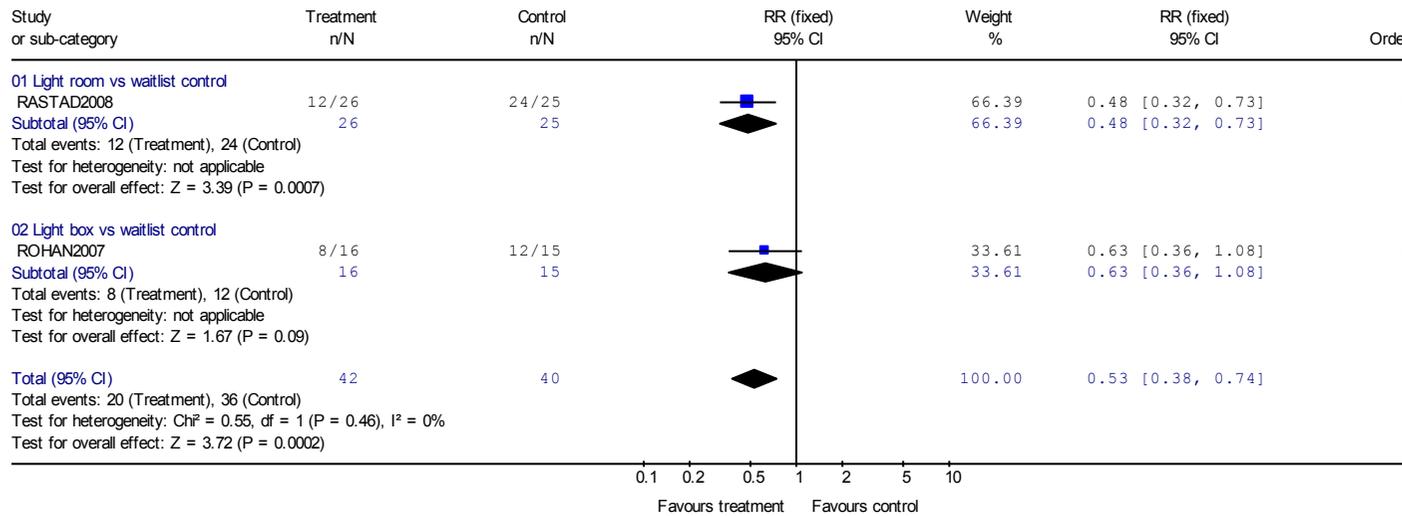
Mean endpoint atypical depression scores (SAD-SR subscale) (self-rated)

Review: Depression update pharmacology: treatments for SAD
Comparison: 01 Bright light vs waitlist control
Outcome: 08 Mean self rated atypical depression scores (SAD-SR subscale) at endpoint



Non-response data (SIGH-SAD)

Review: Depression update pharmacology: treatments for SAD
Comparison: 01 Bright light vs waitlist control
Outcome: 10 Non remission (SIGH-SAD-SR)

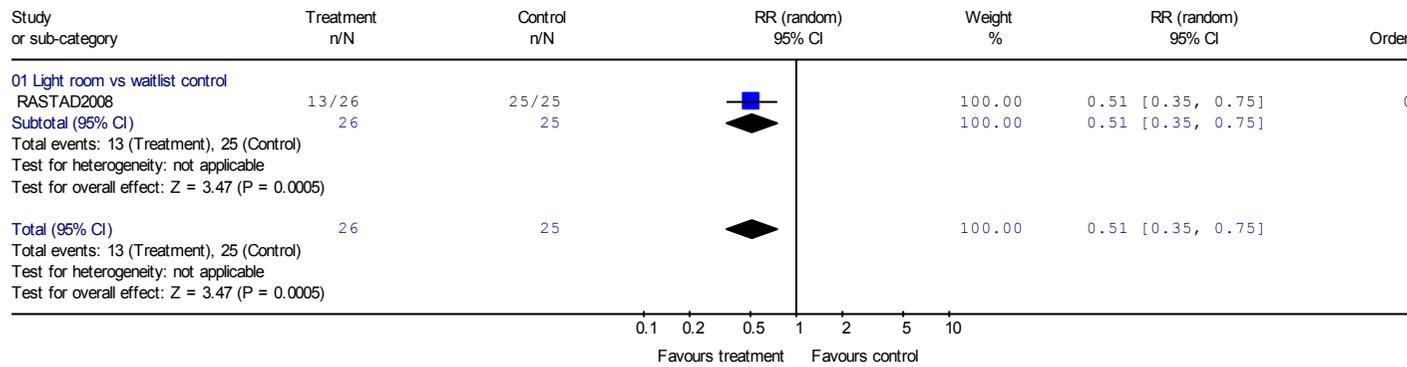


Depression in adults: treatment and management

Forest plots

Non-response data (SIGN-SAD)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 01 Bright light vs waitlist control
 Outcome: 11 Non response (SIGN-SAD)

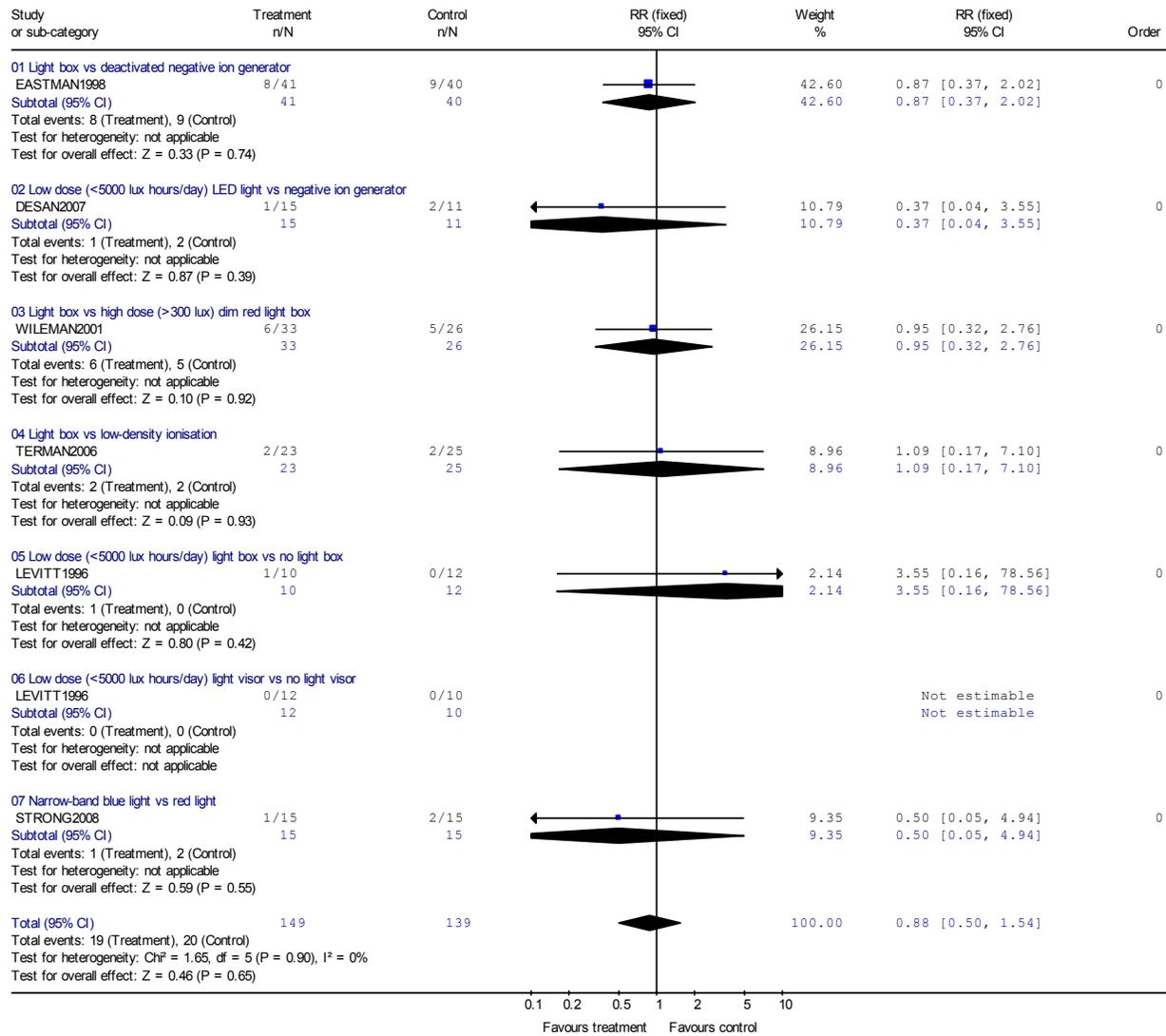


Bright light versus attentional control
 Number leaving study early for any reason

Depression in adults: treatment and management

Forest plots

Review: Depression update pharmacology: treatments for SAD
 Comparison: 02 Bright light vs attentional control
 Outcome: 01 Leaving study early for any reason

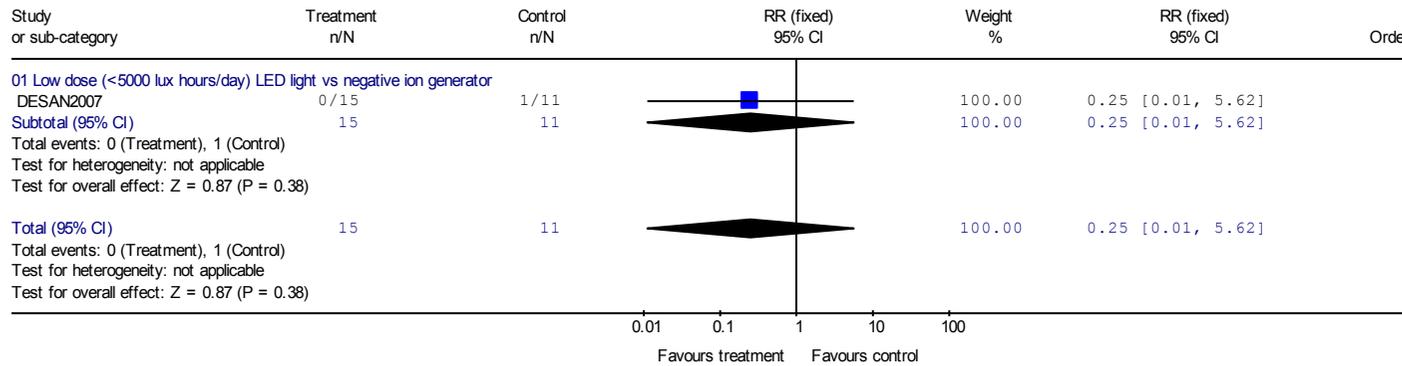


Depression in adults: treatment and management

Forest plots

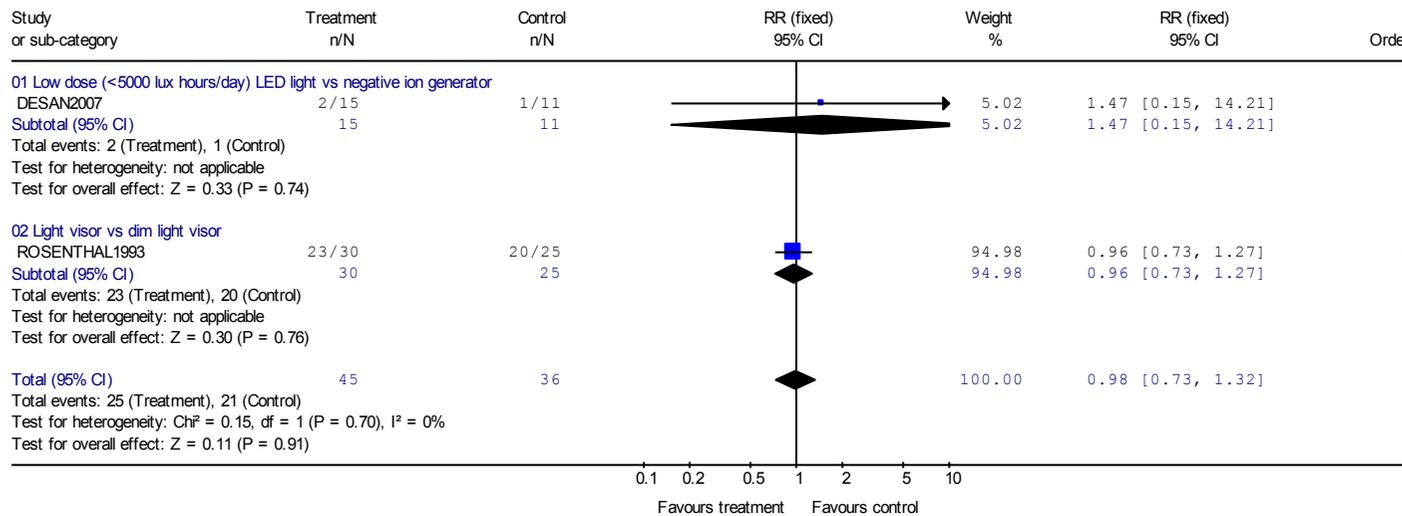
Number leaving study early due to lack of efficacy

Review: Depression update pharmacology: treatments for SAD
 Comparison: 02 Bright light vs attentional control
 Outcome: 02 Leaving study early due to lack of efficacy



Number of reported side effects

Review: Depression update pharmacology: treatments for SAD
 Comparison: 02 Bright light vs attentional control
 Outcome: 03 Reported side effects

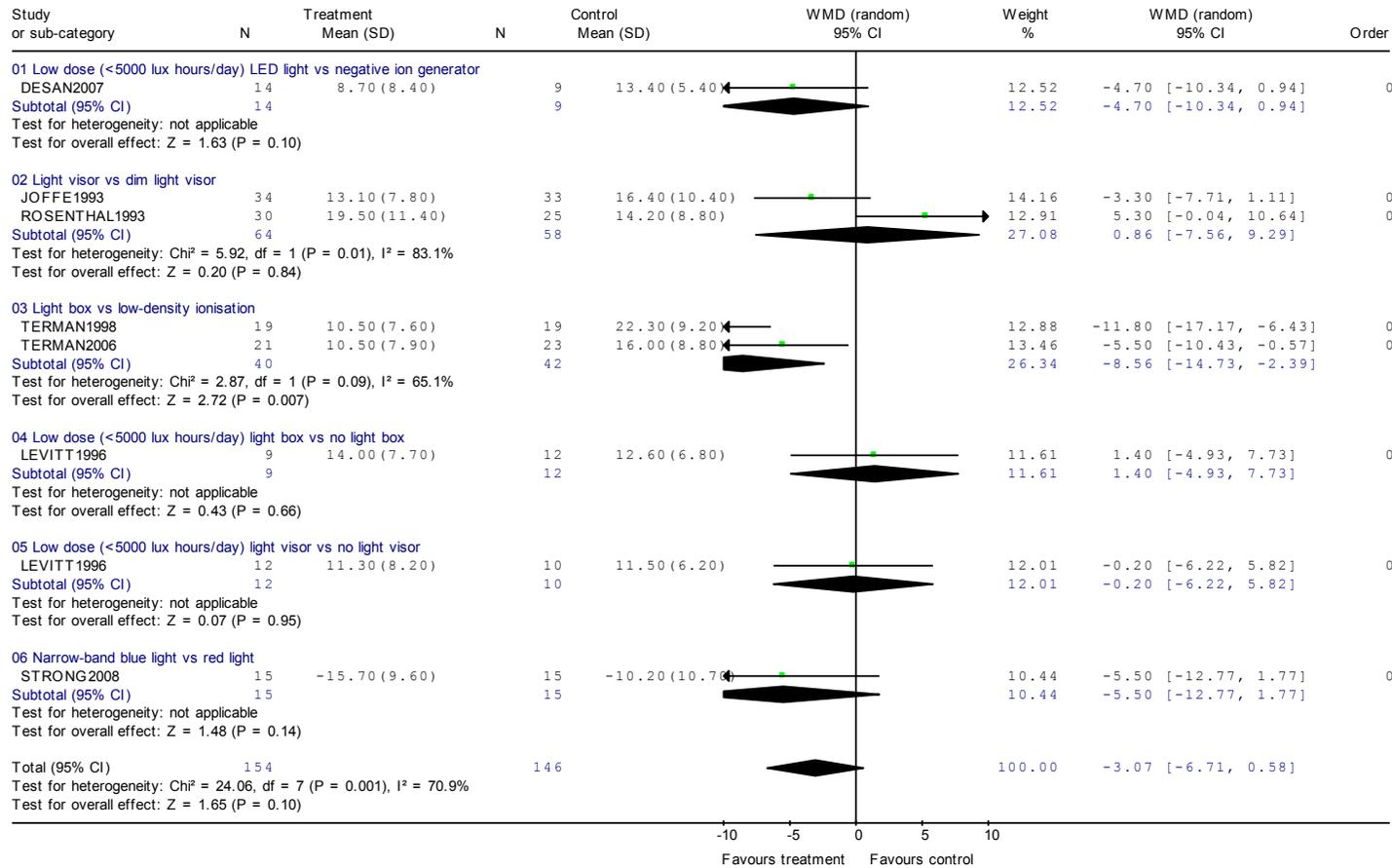


Depression in adults: treatment and management

Forest plots

Mean endpoint depression scores (SIGH-SAD) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 02 Bright light vs attentional control
 Outcome: 04 Mean clinician rated SAD depression scores (SIGH-SAD) at endpoint

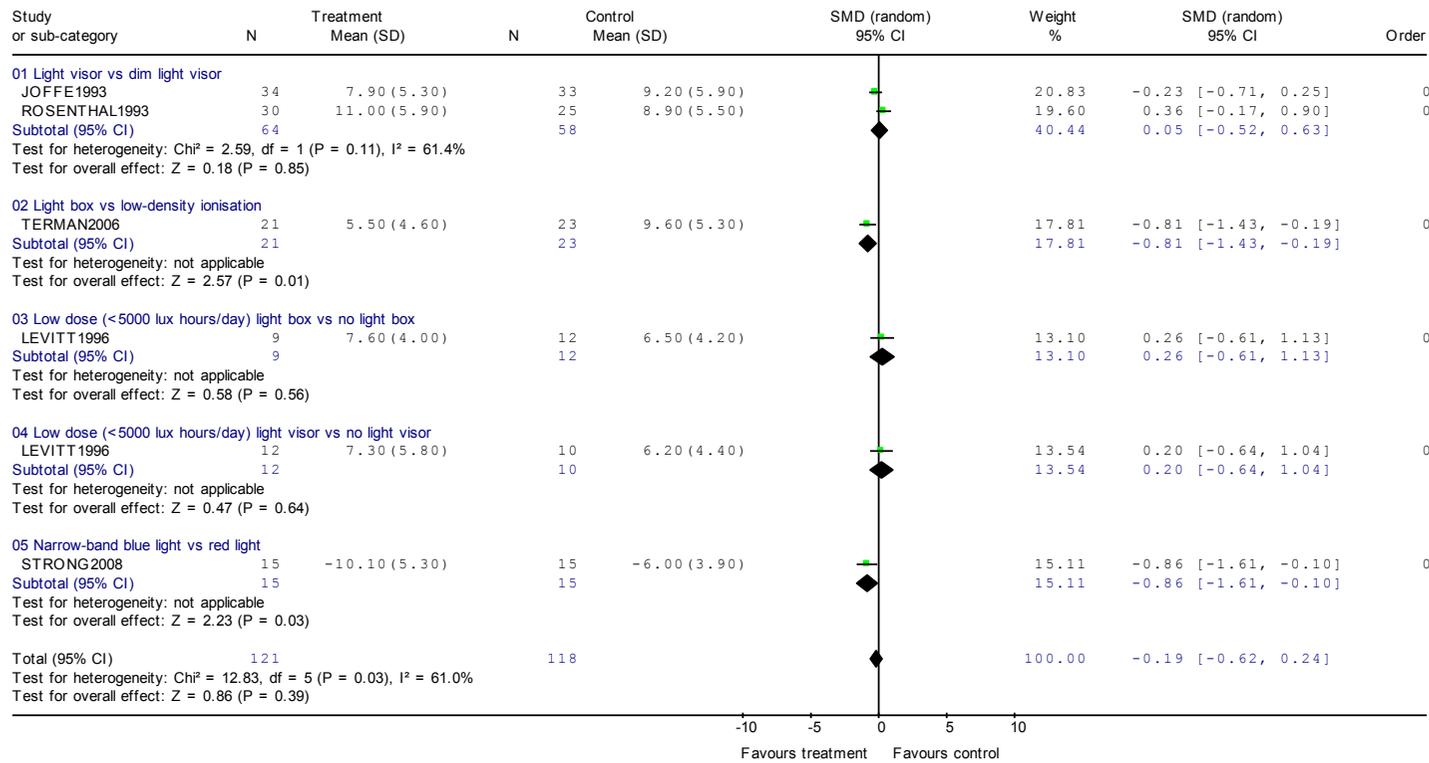


Depression in adults: treatment and management

Forest plots

Mean endpoint typical depression scores (HAM-D17/HRSD-21) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 02 Bright light vs attentional control
 Outcome: 05 Mean clinician rated typical depression scores (HAM-D17/HRSD-21) at endpoint

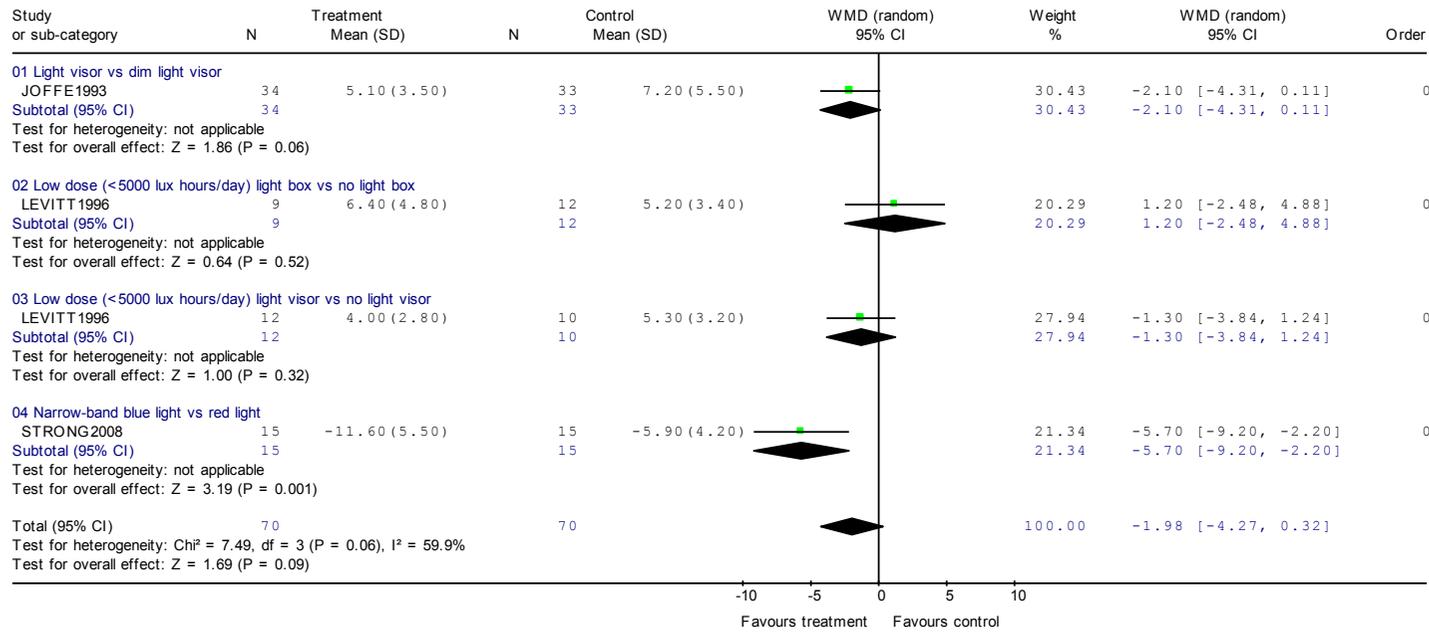


Depression in adults: treatment and management

Forest plots

Mean endpoint atypical depression scores (SAD subscale) (clinician-rated)

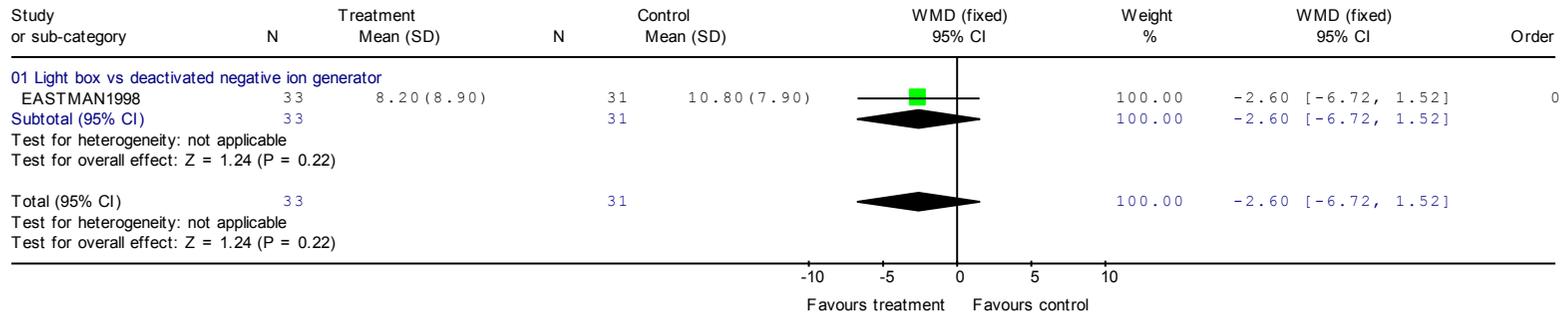
Review: Depression update pharmacology: treatments for SAD
 Comparison: 02 Bright light vs attentional control
 Outcome: 06 Mean clinician rated atypical depression scores (SAD subscale) at endpoint



Depression in adults: treatment and management
Forest plots

Mean endpoint depression scores (BDI) (self-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 02 Bright light vs attentional control
 Outcome: 07 Mean self rated depression scores (BDI) at endpoint

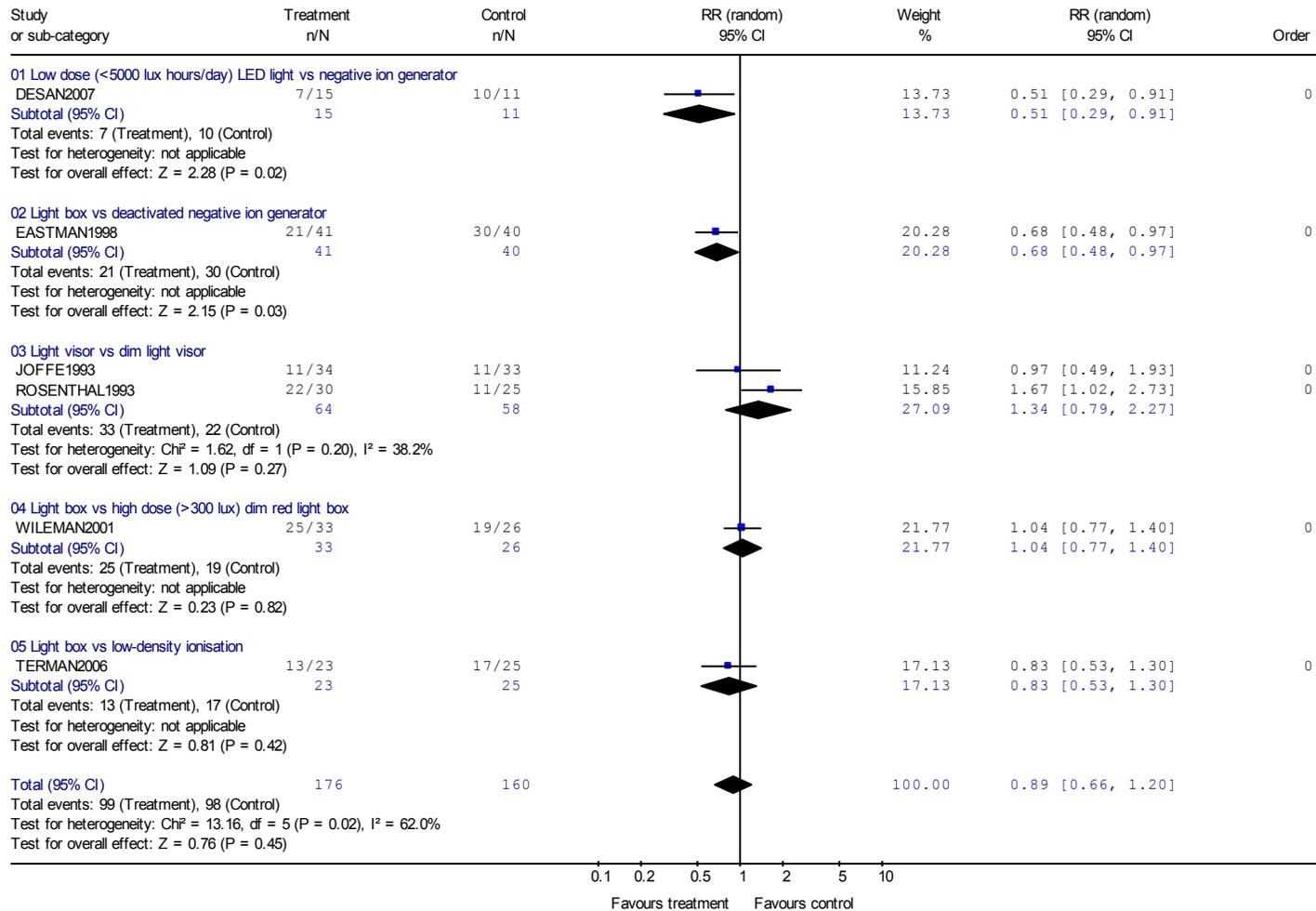


Depression in adults: treatment and management

Forest plots

Non-remission data (SIGH-SAD, SIGH-SAD-SR or HDRS)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 02 Bright light vs attentional control
 Outcome: 08 Non remission (SIGH-SAD or SIGH-SAD-SR or HDRS)

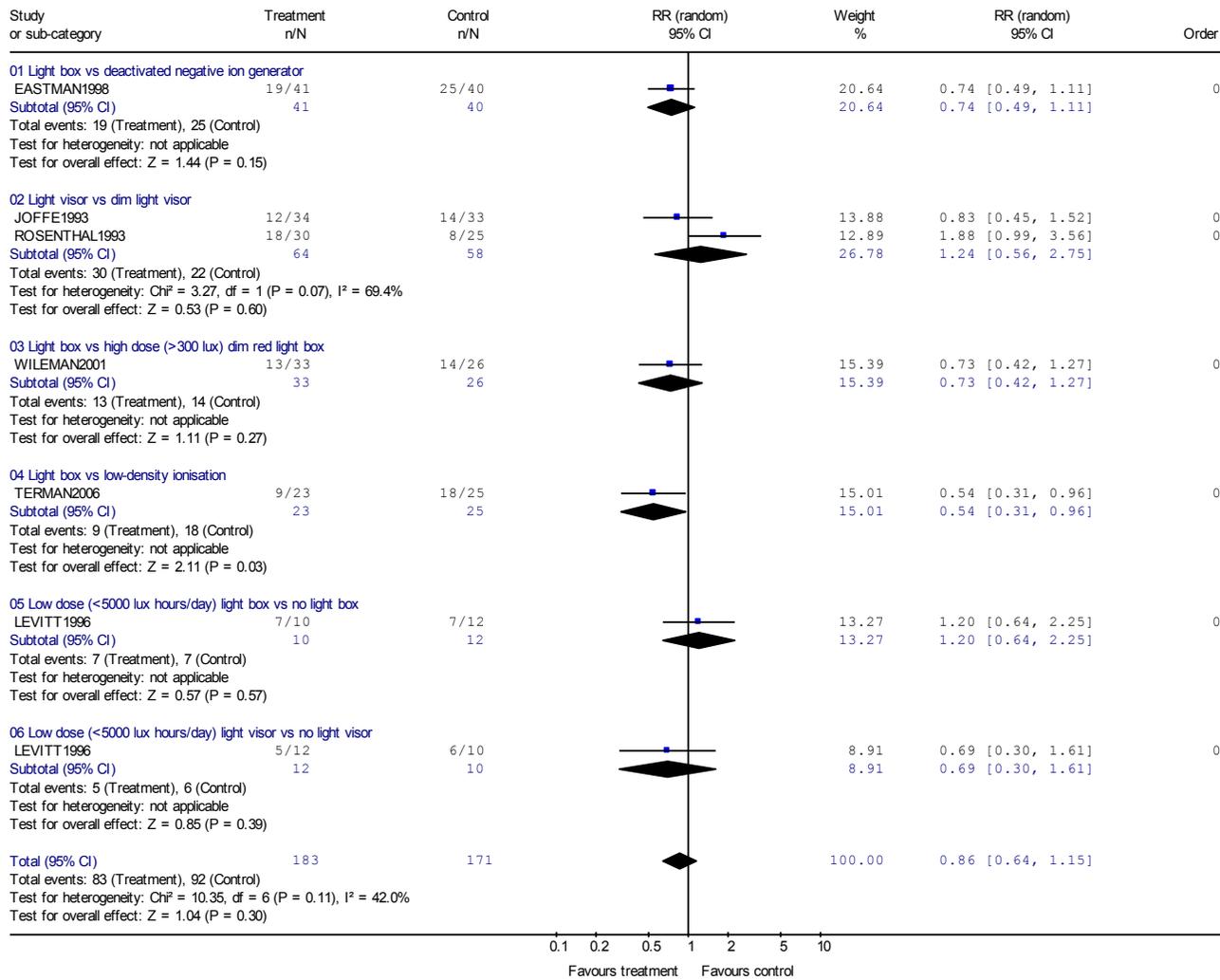


Depression in adults: treatment and management

Forest plots

Non-response data (SIGH-SAD)

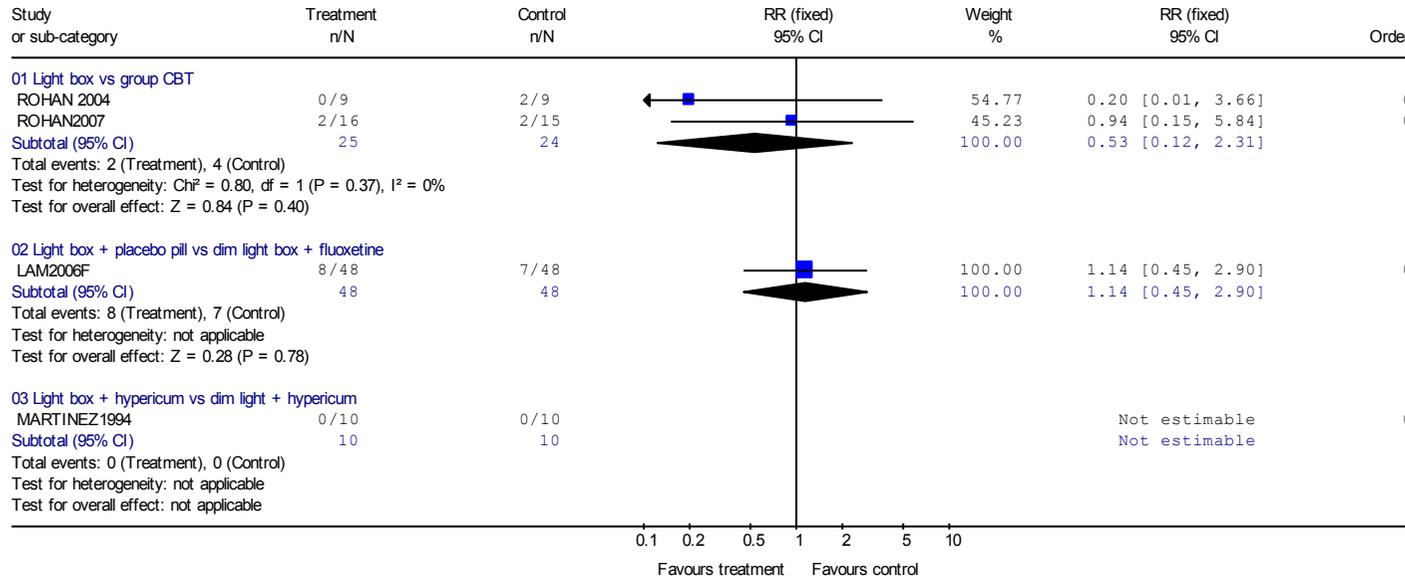
Review: Depression update pharmacology: treatments for SAD
 Comparison: 02 Bright light vs attentional control
 Outcome: 09 Non response (SIGH-SAD)



Depression in adults: treatment and management
Forest plots

Bright light versus active treatment control
Number leaving study early for any reason

Review: Depression update pharmacology: treatments for SAD
Comparison: 03 Bright light vs active treatment control
Outcome: 01 Leaving study early for any reason

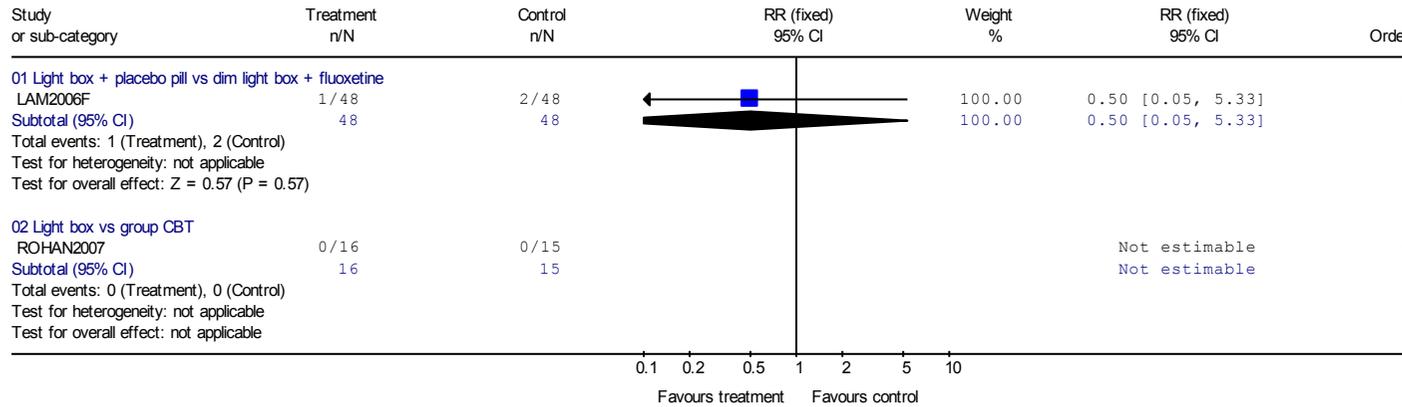


Number leaving study early due to side effects

Depression in adults: treatment and management

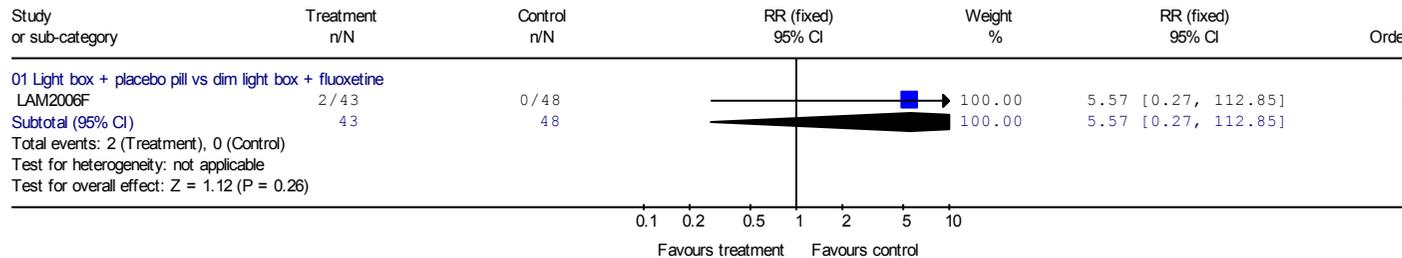
Forest plots

Review: Depression update pharmacology: treatments for SAD
 Comparison: 03 Bright light vs active treatment control
 Outcome: 02 Leaving study early due to side effects



Number leaving study early due to lack of efficacy

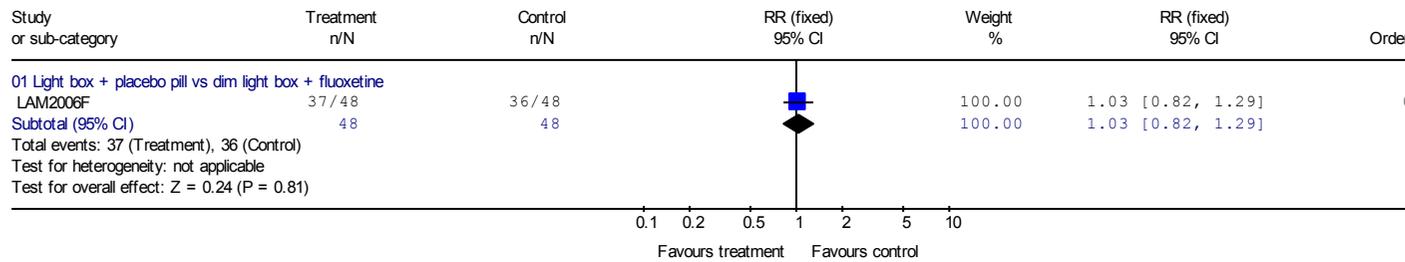
Review: Depression update pharmacology: treatments for SAD
 Comparison: 03 Bright light vs active treatment control
 Outcome: 03 Leaving study early due to lack of efficacy



Depression in adults: treatment and management
Forest plots

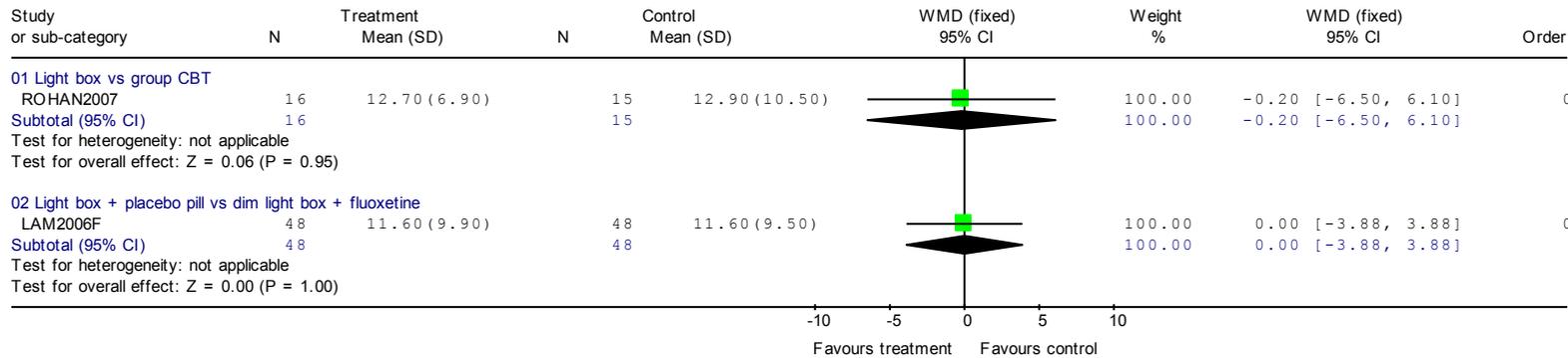
Number of reported side effects

Review: Depression update pharmacology: treatments for SAD
Comparison: 03 Bright light vs active treatment control
Outcome: 04 Reported side effects



Mean SAD depression endpoint scores (SIGH-SAD) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
Comparison: 03 Bright light vs active treatment control
Outcome: 05 Mean clinician rated SAD depression scores (SIGH-SAD) at endpoint

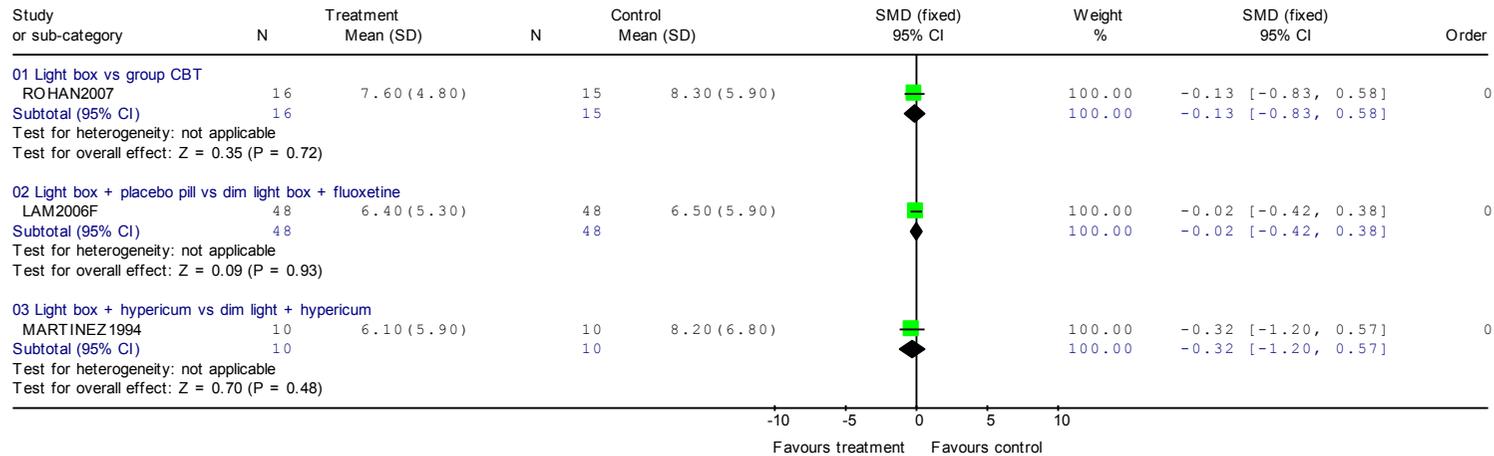


Mean atypical depression endpoint scores (HAM-D17/HRSD-21) (clinician-rated)

Depression in adults: treatment and management

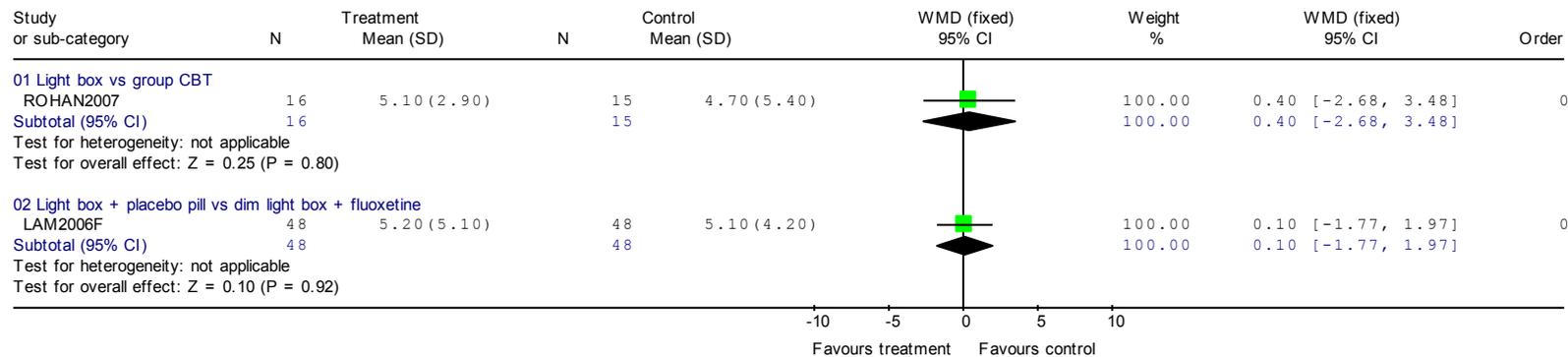
Forest plots

Review: Depression update pharmacology: treatments for SAD
 Comparison: 03 Bright light vs active treatment control
 Outcome: 06 Mean clinician rated typical depression scores (HAMD-17/HRSD-21) at endpoint



Mean atypical depression endpoint scores (SAD subscale) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 03 Bright light vs active treatment control
 Outcome: 07 Mean clinician rated atypical depression scores (SADsubscale) at endpoint

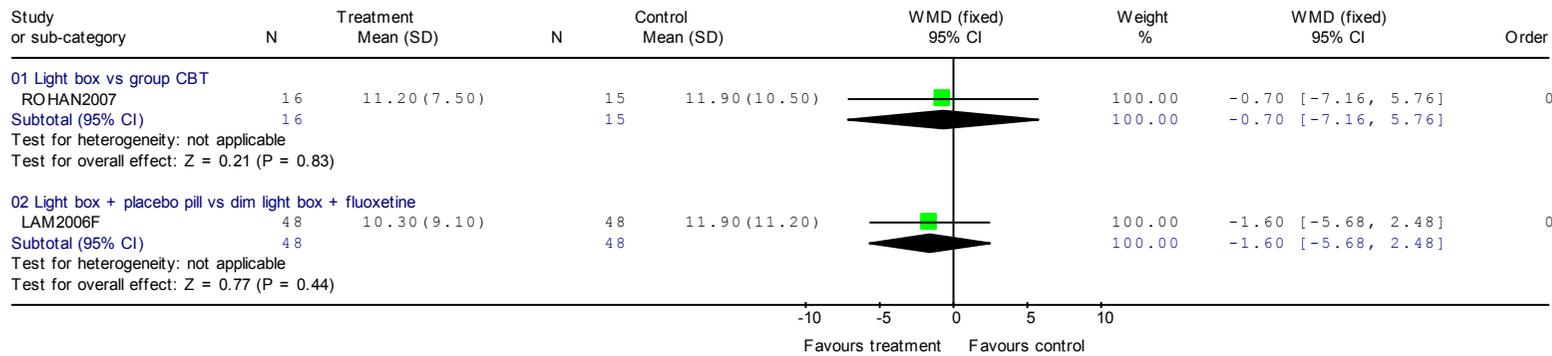


Depression in adults: treatment and management

Forest plots

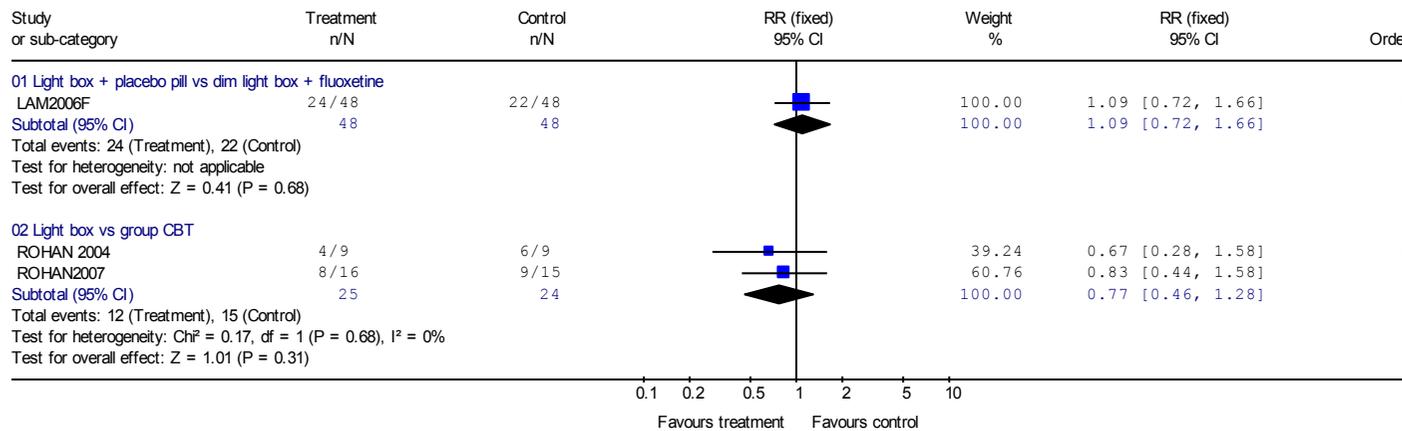
Mean depression endpoint scores (BDI) (self-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 03 Bright light vs active treatment control
 Outcome: 08 Mean self rated depression scores (BDI) at endpoint



Non-remission data

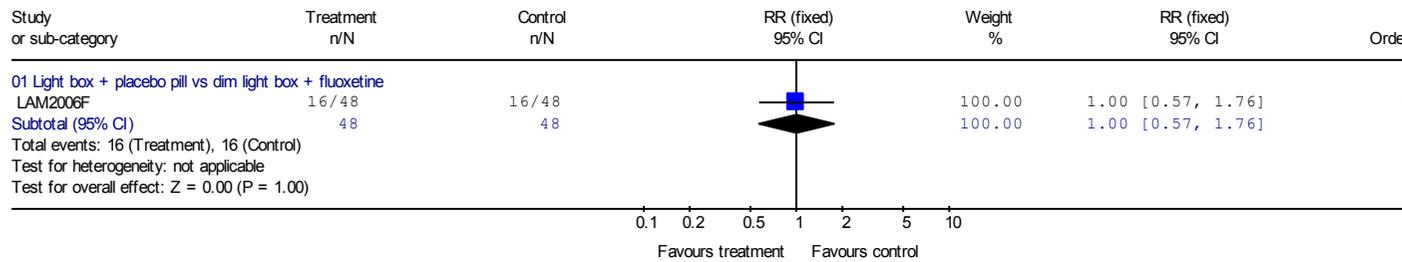
Review: Depression update pharmacology: treatments for SAD
 Comparison: 03 Bright light vs active treatment control
 Outcome: 09 Non remission



Depression in adults: treatment and management Forest plots

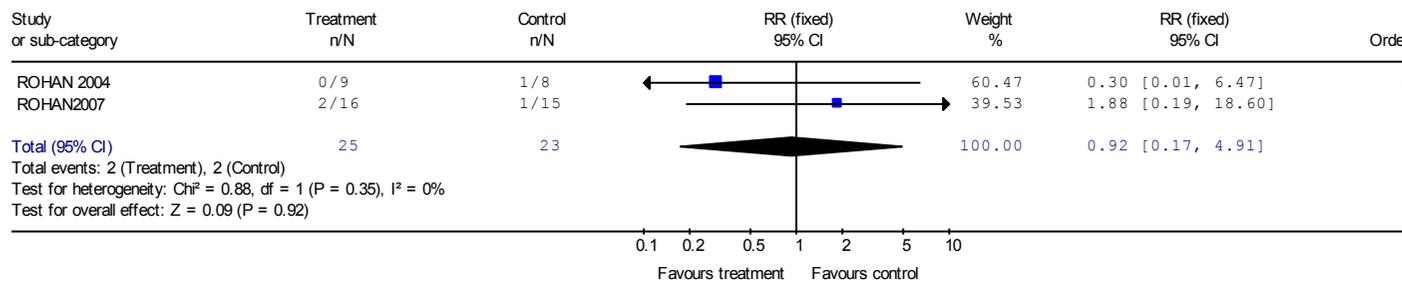
SAD.03.10. Non-response data

Review: Depression update pharmacology: treatments for SAD
 Comparison: 03 Bright light vs active treatment control
 Outcome: 10 Non response



Bright light versus light + CBT combination Number leaving study early for any reason

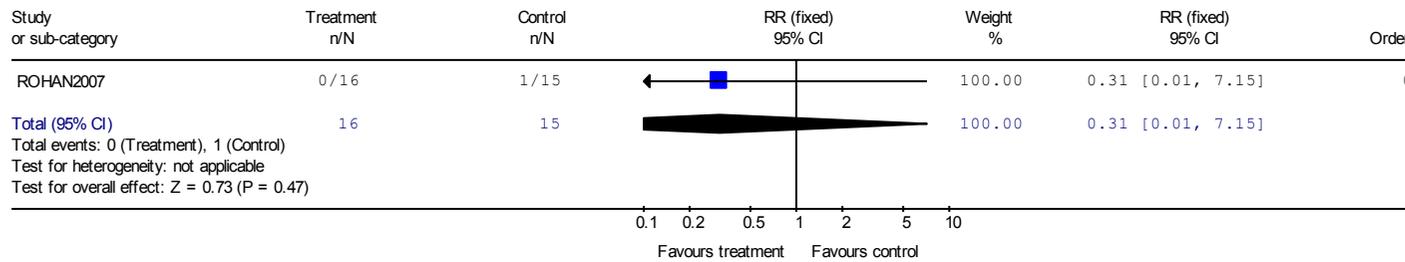
Review: Depression update pharmacology: treatments for SAD
 Comparison: 04 Bright light vs light + CBT combo
 Outcome: 01 Leaving study early for any reason



Depression in adults: treatment and management Forest plots

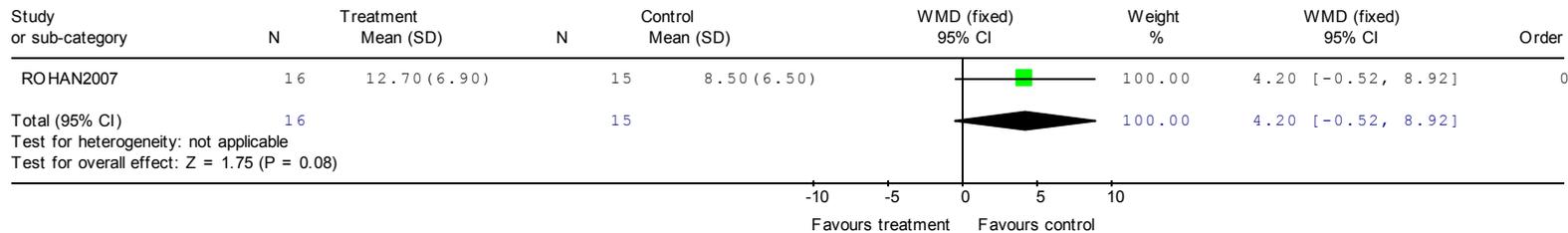
Number leaving study early due to side effects

Review: Depression update pharmacology: treatments for SAD
 Comparison: 04 Bright light vs light + CBT combo
 Outcome: 02 Leaving study early due to side effects



Mean SAD depression endpoint scores (SIGH-SAD) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 04 Bright light vs light + CBT combo
 Outcome: 03 Mean clinician rated SAD depression scores (SIGH-SAD) at endpoint

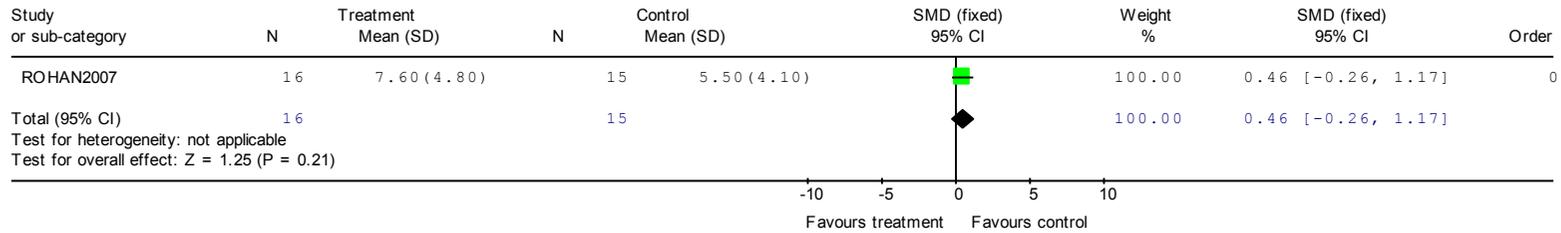


Depression in adults: treatment and management

Forest plots

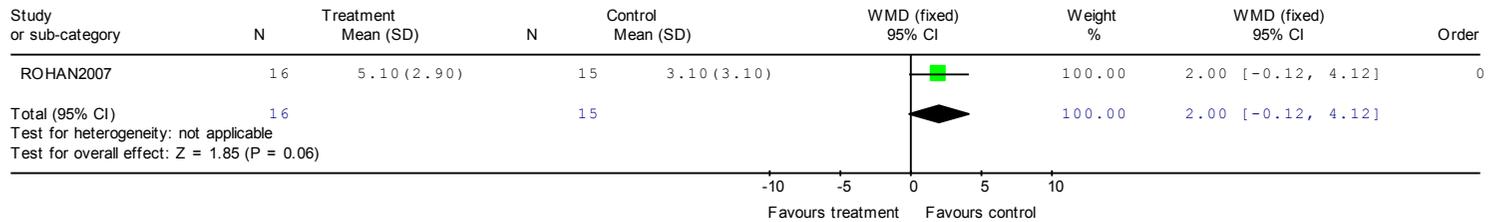
Mean typical depression endpoint scores (HAM-D17/HRSD-21) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 04 Bright light vs light + CBT combo
 Outcome: 04 Mean clinician rated typical depression scores (HAM-D17/HRSD-21) at endpoint



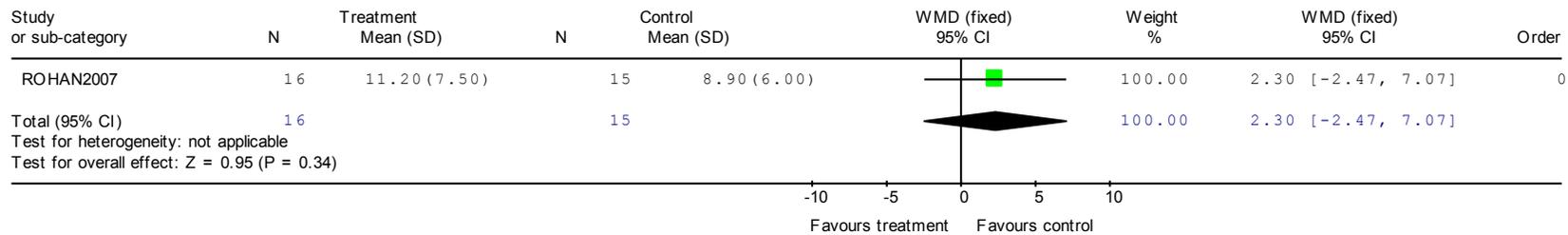
Mean atypical depression endpoint scores (SAD subscale) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 04 Bright light vs light + CBT combo
 Outcome: 05 Mean clinician rated atypical depression scores (SAD subscale) at endpoint



Mean depression endpoint scores (BDI) (self-rated)

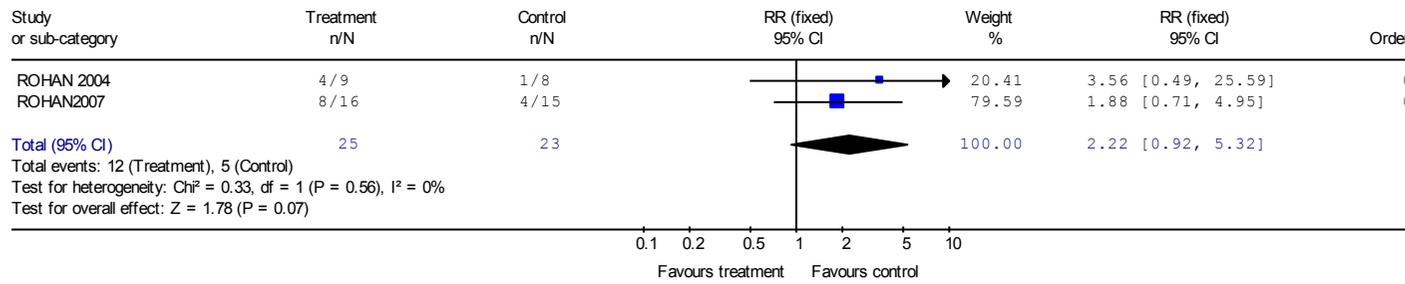
Review: Depression update pharmacology: treatments for SAD
 Comparison: 04 Bright light vs light + CBT combo
 Outcome: 06 Mean self rated depression scores (BDI) at endpoint



Depression in adults: treatment and management
Forest plots

Non-remission data (SIGH-SAD)

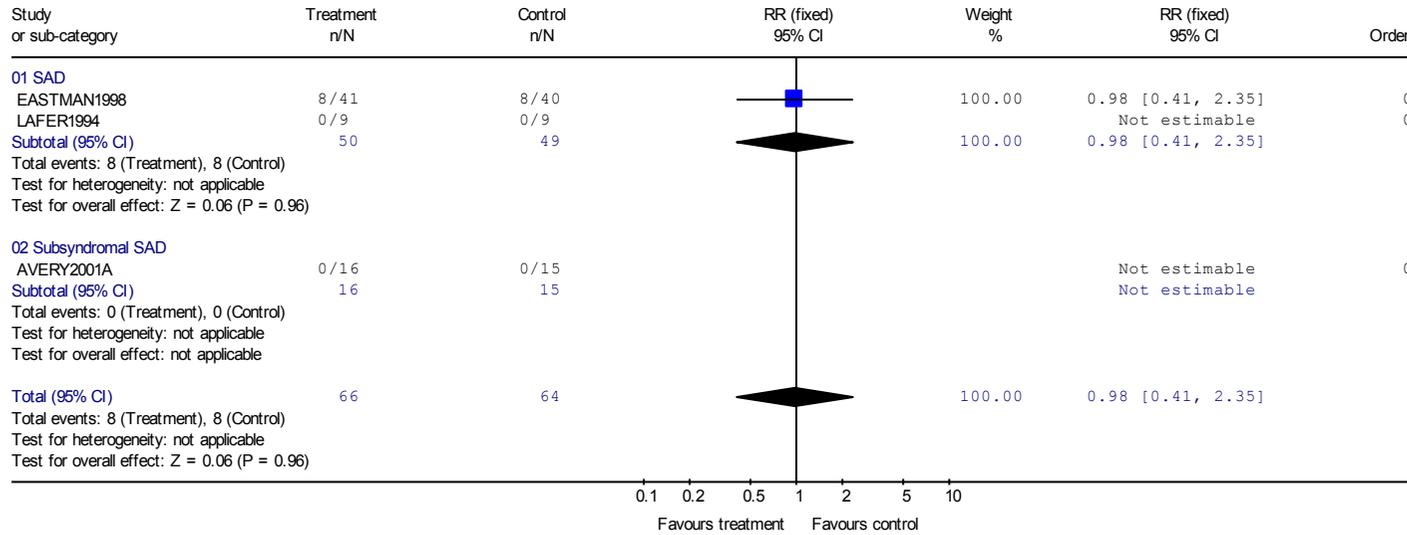
Review: Depression update pharmacology: treatments for SAD
Comparison: 04 Bright light vs light + CBT combo
Outcome: 07 Non remission (SIGH-SAD)



Depression in adults: treatment and management
Forest plots

Morning versus afternoon/evening bright light box
Number leaving study early for any reason

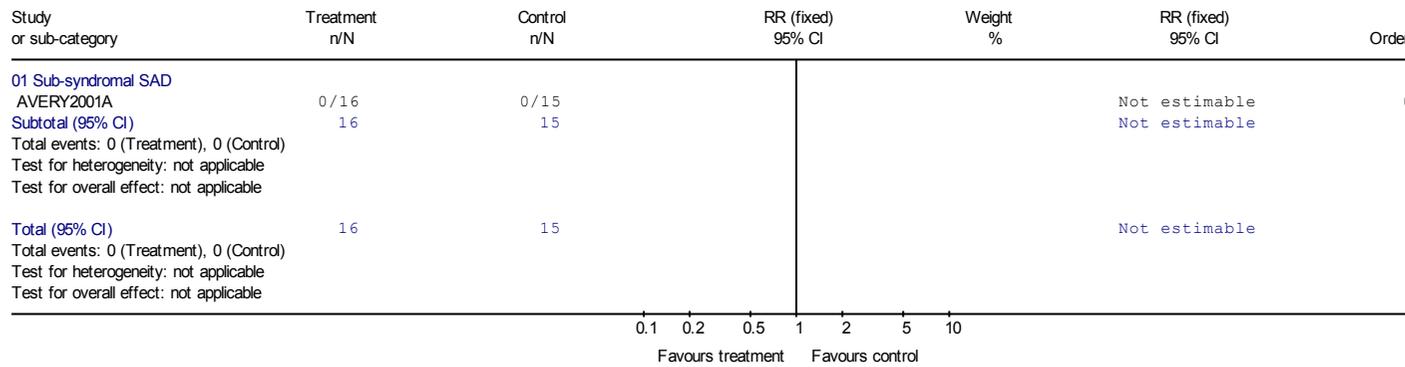
Review: Depression update pharmacology: treatments for SAD
Comparison: 05 Morning vs afternoon/evening bright light box
Outcome: 01 Leaving study early for any reason



Depression in adults: treatment and management Forest plots

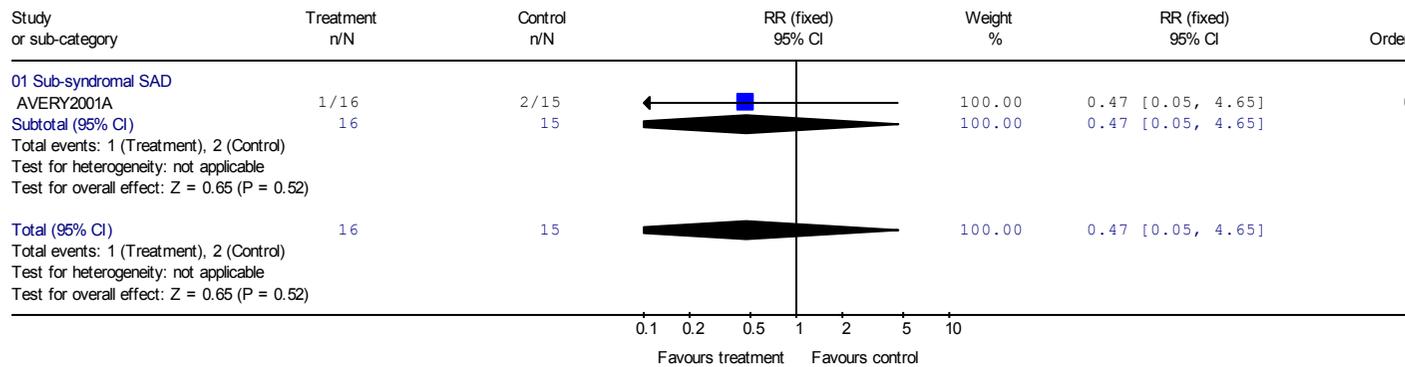
Number leaving study early due to side effects

Review: Depression update pharmacology: treatments for SAD
 Comparison: 05 Morning vs afternoon/evening bright light box
 Outcome: 02 Leaving study early due to side effects



Number of reported side effects

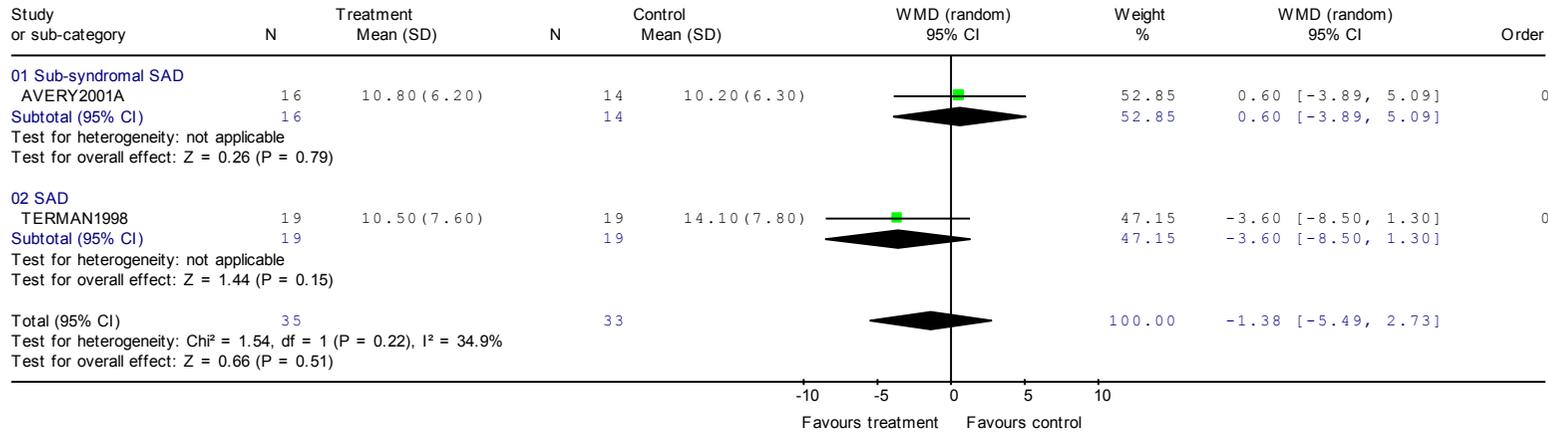
Review: Depression update pharmacology: treatments for SAD
 Comparison: 05 Morning vs afternoon/evening bright light box
 Outcome: 03 Reported side effects



Depression in adults: treatment and management
Forest plots

Mean SAD depression endpoint scores (SIGH-SAD) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 05 Morning vs afternoon/evening bright light box
 Outcome: 04 Mean clinician rated SAD depression scores (SIGH-SAD) at endpoint

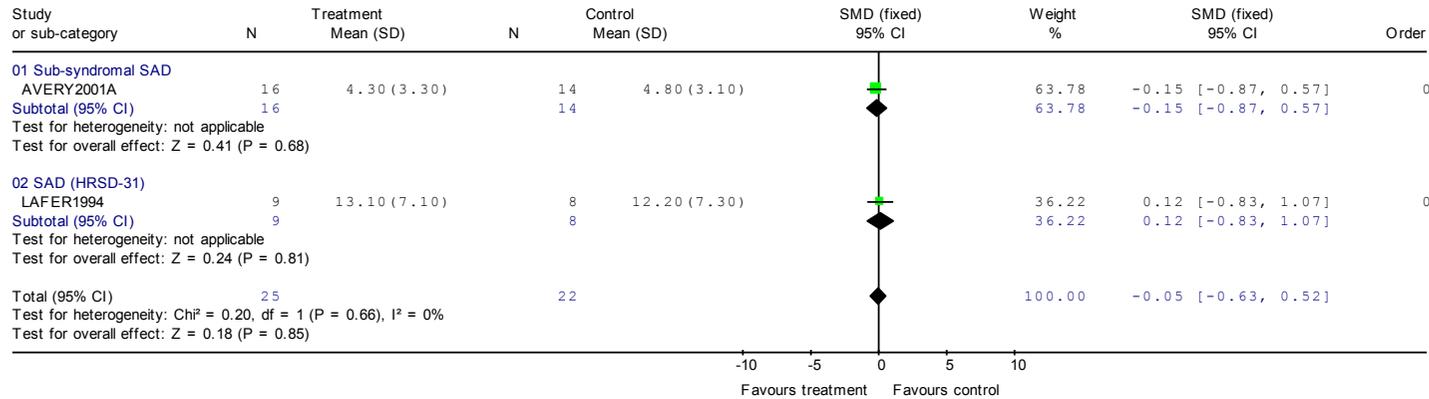


Depression in adults: treatment and management

Forest plots

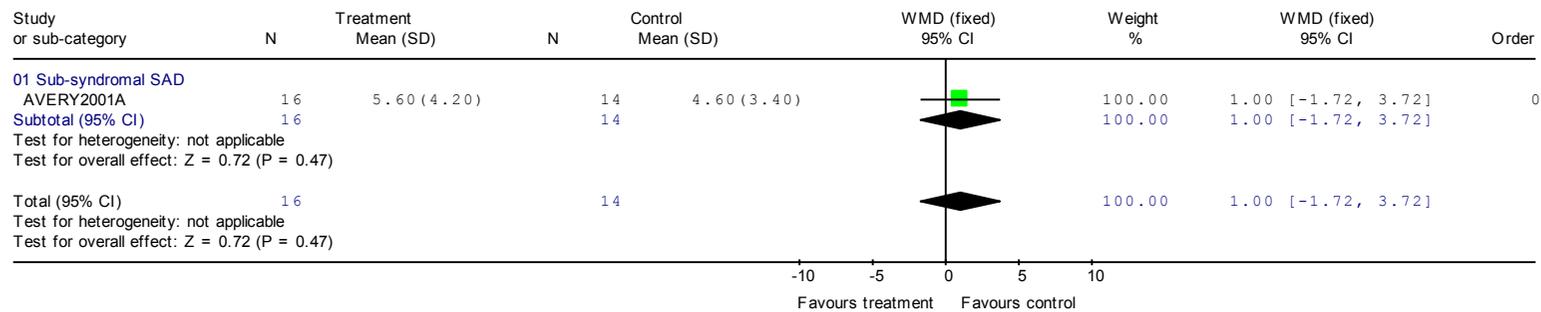
Mean typical depression endpoint scores (HAM-D17/HRSD-31) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 05 Morning vs afternoon/evening bright light box
 Outcome: 05 Mean clinician rated typical depression scores (HAM-D17/HRSD-31) at endpoint



Mean atypical depression endpoint scores (SAD subscale) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 05 Morning vs afternoon/evening bright light box
 Outcome: 06 Mean clinician rated atypical depression scores (SAD-subscale) at endpoint

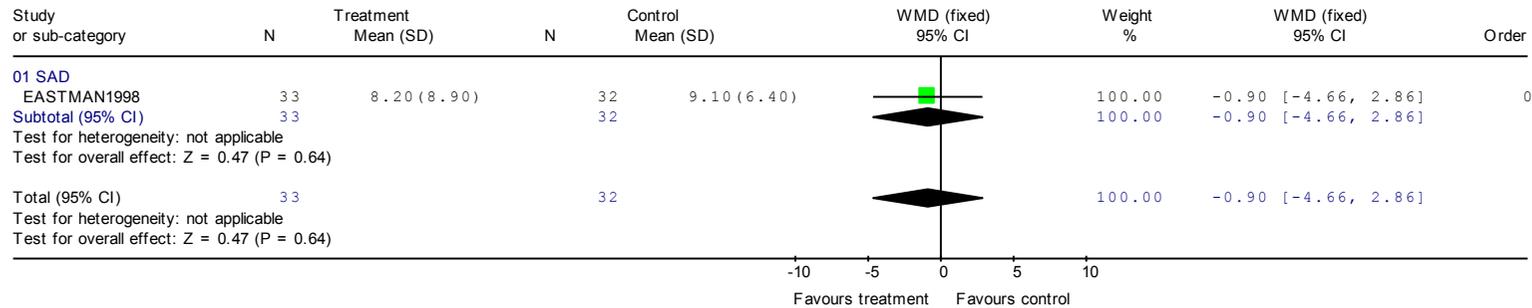


Depression in adults: treatment and management

Forest plots

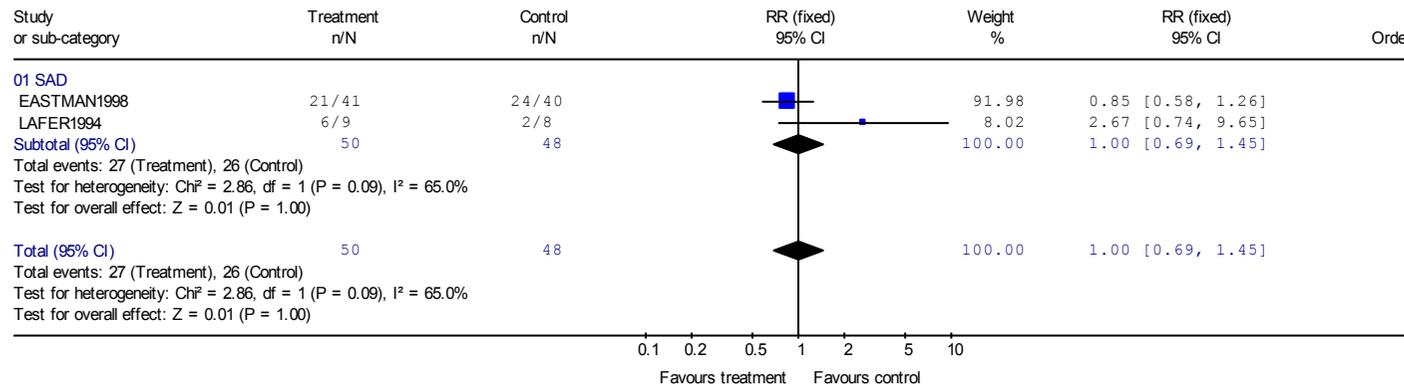
Mean depression endpoint scores (BDI) (self-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 05 Morning vs afternoon/evening bright light box
 Outcome: 07 Mean self rated depression scores (BDI) at endpoint



Non-remission data

Review: Depression update pharmacology: treatments for SAD
 Comparison: 05 Morning vs afternoon/evening bright light box
 Outcome: 08 Non remission

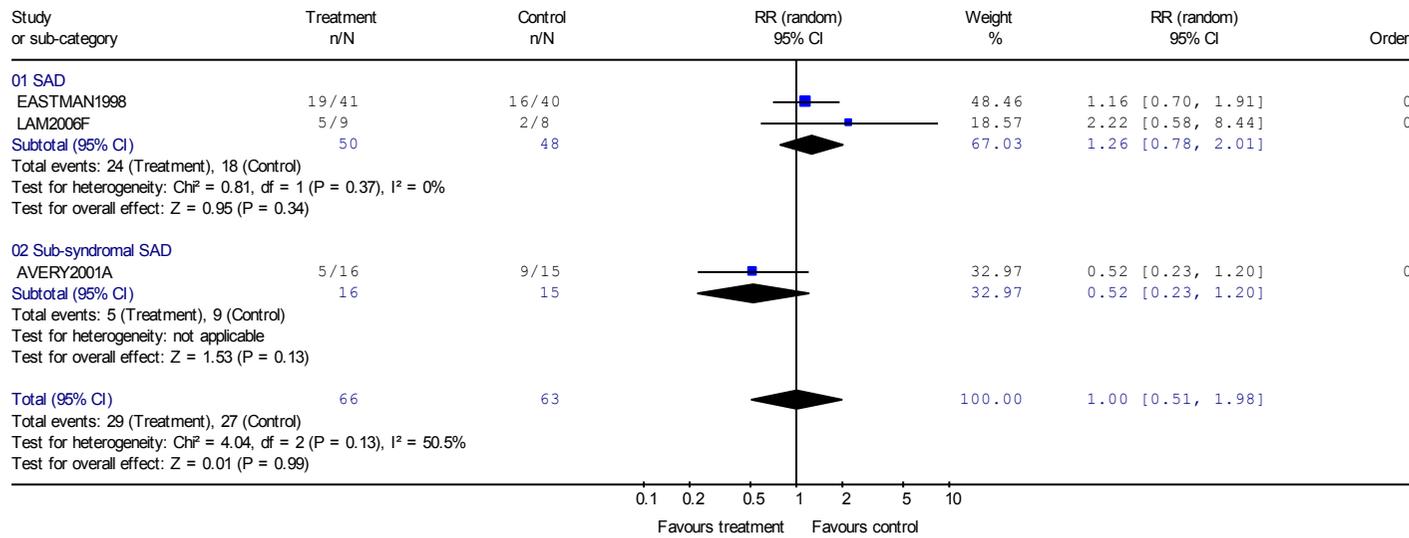


Depression in adults: treatment and management

Forest plots

Non-response data

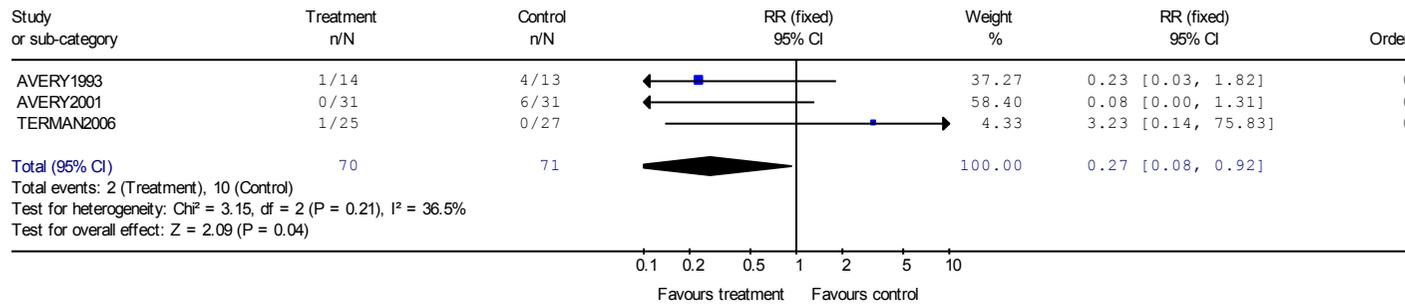
Review: Depression update pharmacology: treatments for SAD
 Comparison: 05 Morning vs afternoon/evening bright light box
 Outcome: 09 Non response



Depression in adults: treatment and management
Forest plots

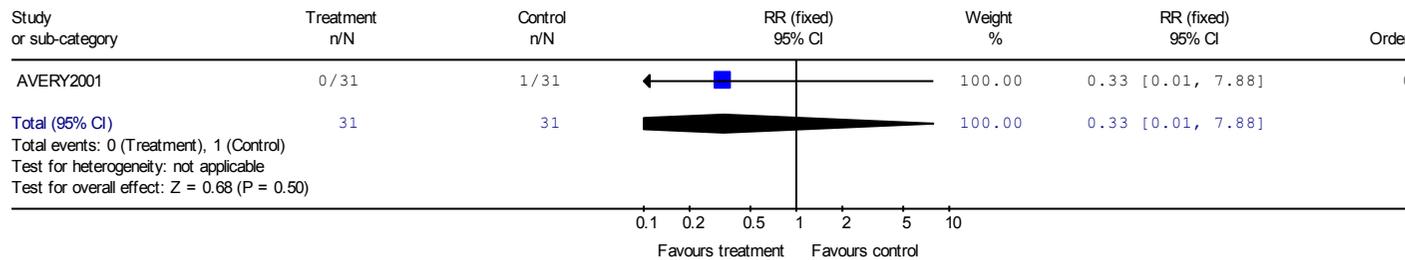
Dawn simulation versus attentional control
Number leaving study early for any reason

Review: Depression update pharmacology: treatments for SAD
Comparison: 06 Dawn simulation vs attentional control
Outcome: 01 Leaving study early for any reason



Number leaving study early due to side effects

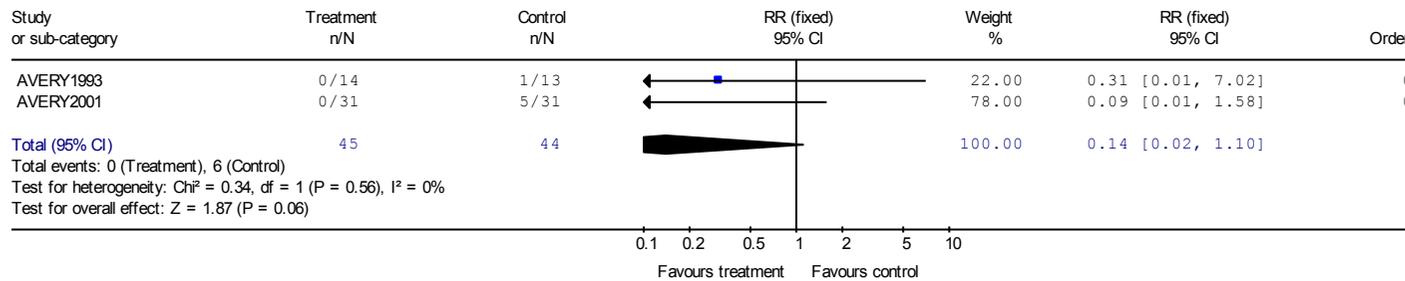
Review: Depression update pharmacology: treatments for SAD
Comparison: 06 Dawn simulation vs attentional control
Outcome: 02 Leaving study early due to side effects



Depression in adults: treatment and management
Forest plots

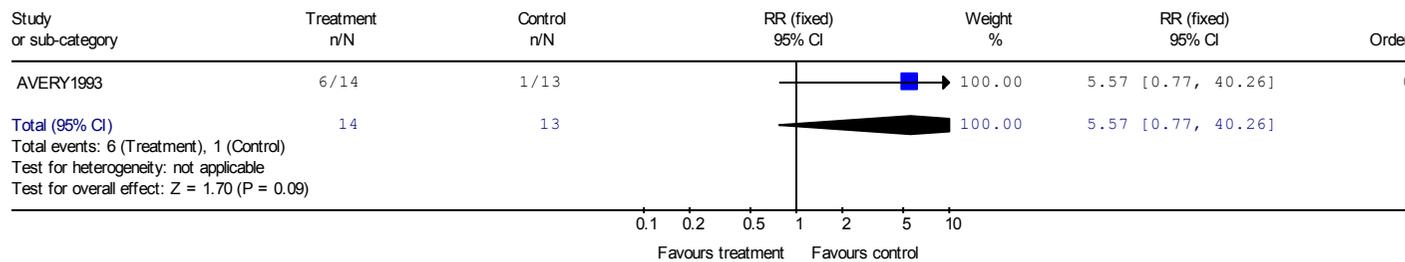
Number leaving study early due to lack of efficacy

Review: Depression update pharmacology: treatments for SAD
Comparison: 06 Dawn simulation vs attentional control
Outcome: 03 Leaving study early due to lack of efficacy



Number of reported side effects

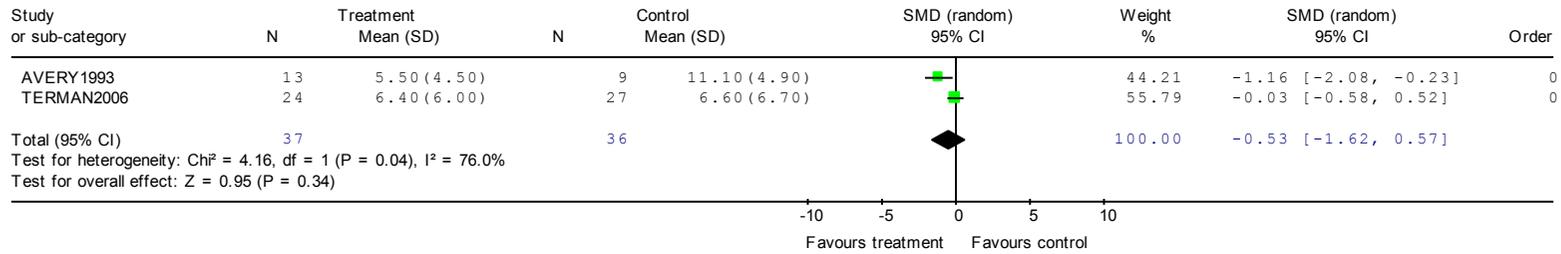
Review: Depression update pharmacology: treatments for SAD
Comparison: 06 Dawn simulation vs attentional control
Outcome: 04 Reported side effects



Depression in adults: treatment and management
Forest plots

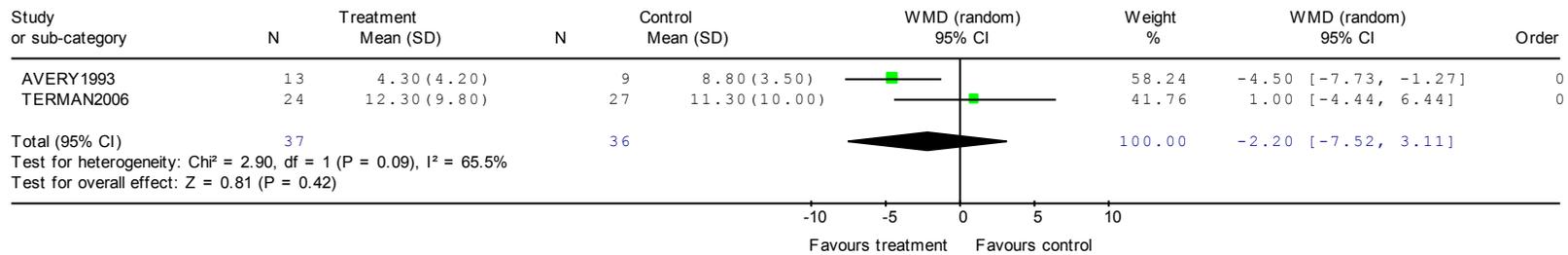
Mean typical depression endpoint scores (HAM-D17/HRSD-21) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
Comparison: 06 Dawn simulation vs attentional control
Outcome: 05 Mean clinician rated typical depression scores (HAM-D17/HRSD-21) at endpoint



Mean atypical depression endpoint scores (SAD subscale) (clinician-rated)

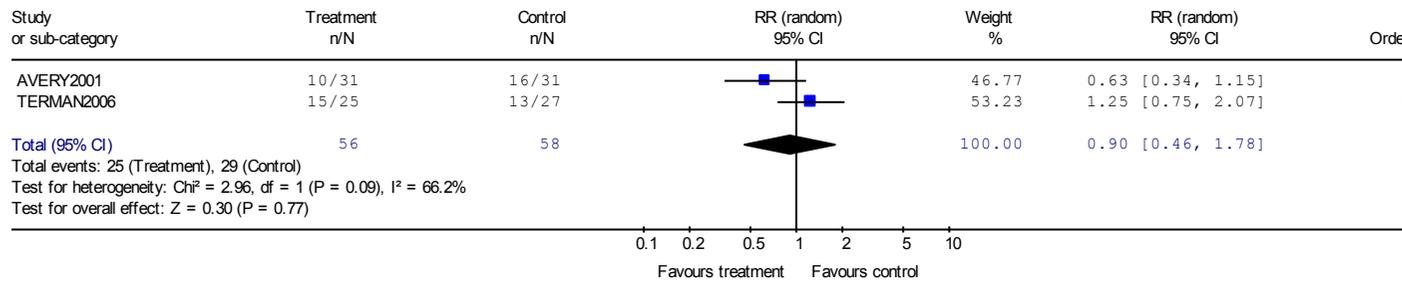
Review: Depression update pharmacology: treatments for SAD
Comparison: 06 Dawn simulation vs attentional control
Outcome: 06 Mean clinician rated atypical depression scores (SAD-subscale) at endpoint



Depression in adults: treatment and management Forest plots

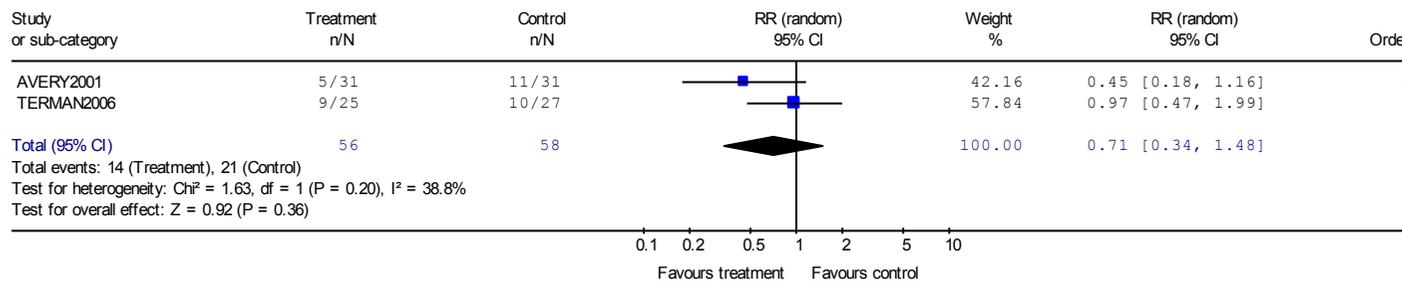
Non-remission data (SIGH-SAD)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 06 Dawn simulation vs attentional control
 Outcome: 07 Non remission (SIGH-SAD)



Non-response data (SIGH-SAD)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 06 Dawn simulation vs attentional control
 Outcome: 08 Non response (SIGH-SAD)

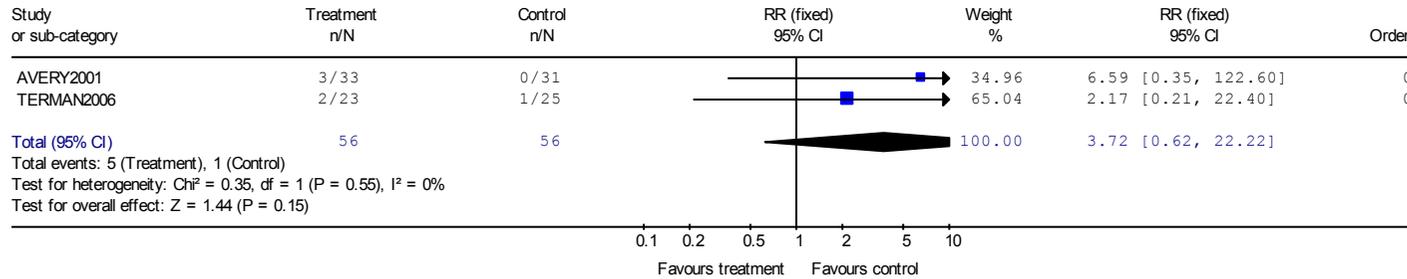


Depression in adults: treatment and management
Forest plots

Bright light versus dawn simulation

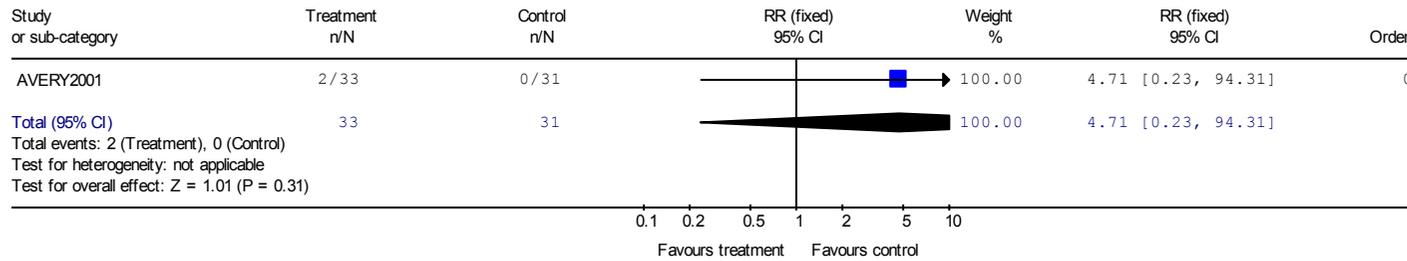
Number leaving study early for any reason

Review: Depression update pharmacology: treatments for SAD
Comparison: 07 Bright light box vs dawn simulation
Outcome: 01 Leaving study early for any reason



Number leaving study early due to side effects

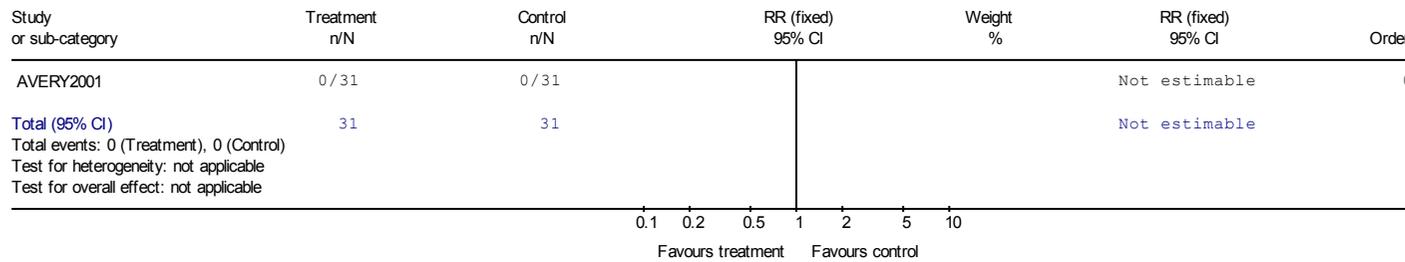
Review: Depression update pharmacology: treatments for SAD
Comparison: 07 Bright light box vs dawn simulation
Outcome: 02 Leaving study early due to side effects



Depression in adults: treatment and management
Forest plots

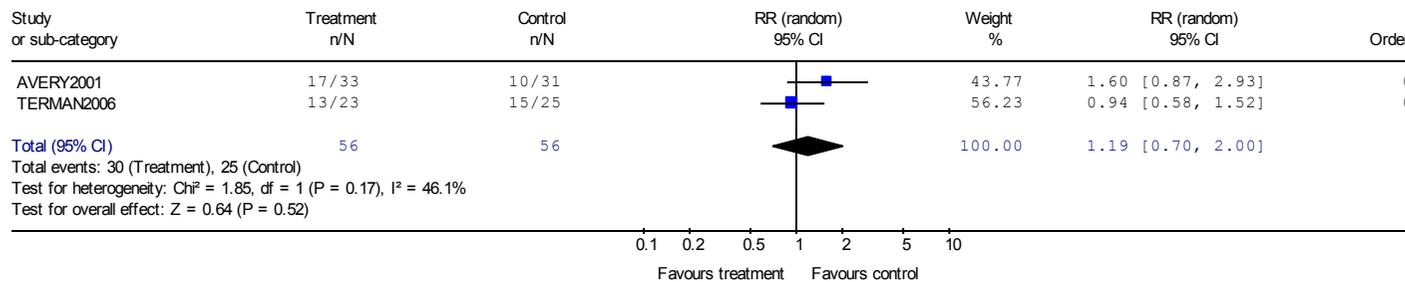
Number leaving study early due to lack of efficacy

Review: Depression update pharmacology: treatments for SAD
Comparison: 07 Bright light box vs dawn simulation
Outcome: 03 Leaving study early due to lack of efficacy



Non-remission data (SIGH-SAD)

Review: Depression update pharmacology: treatments for SAD
Comparison: 07 Bright light box vs dawn simulation
Outcome: 04 Non remission (SIGH-SAD)

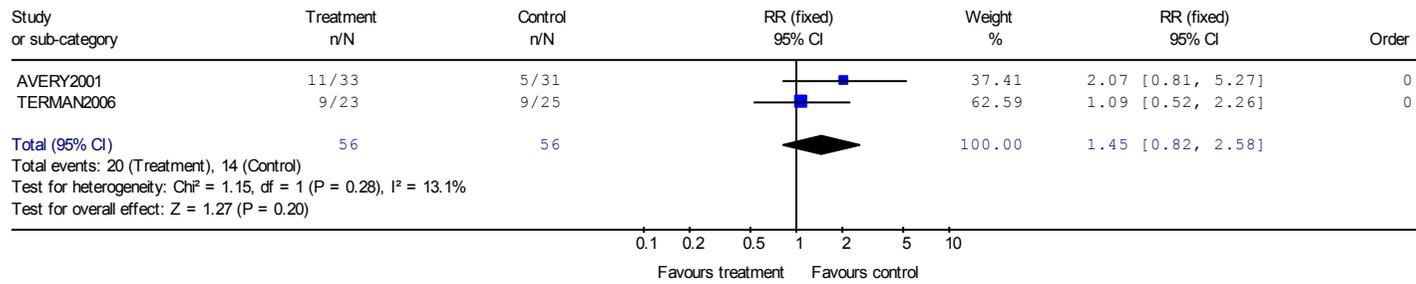


Depression in adults: treatment and management

Forest plots

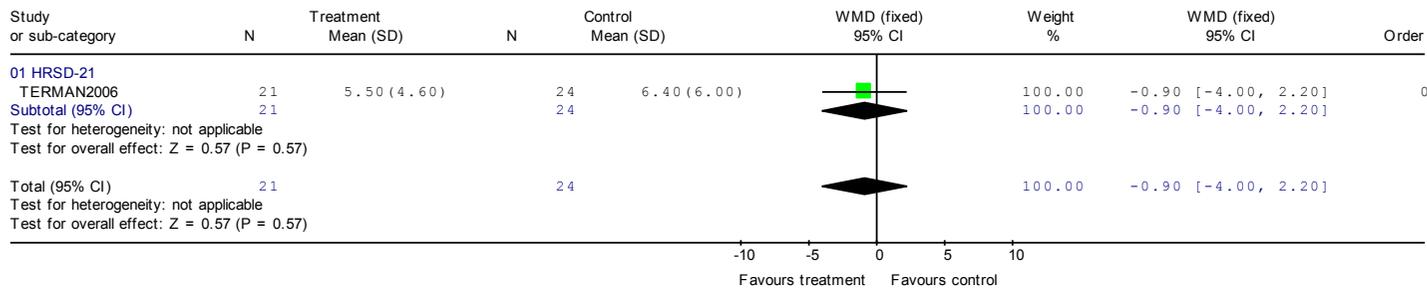
Non-response data (SIGH-SAD)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 07 Bright light box vs dawn simulation
 Outcome: 05 Non response (SIGH-SAD)



Mean depression endpoint scores

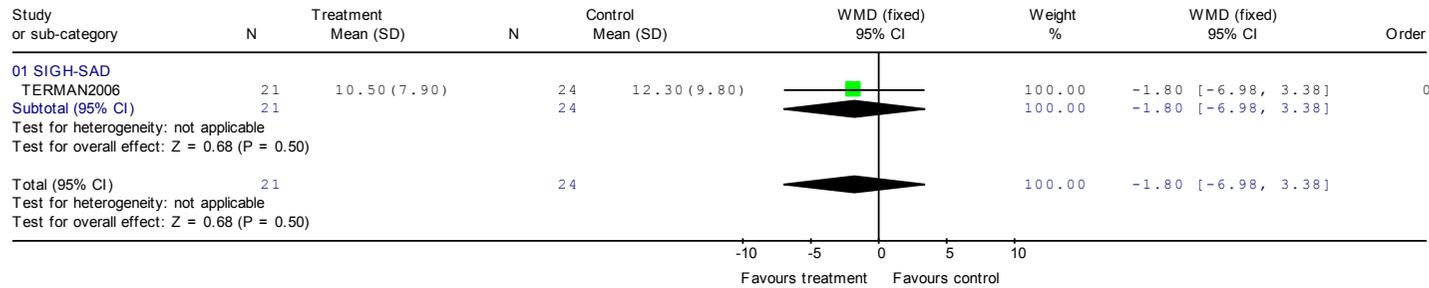
Review: Depression update pharmacology: treatments for SAD
 Comparison: 07 Bright light box vs dawn simulation
 Outcome: 06 Depression: mean endpoint scores



Depression in adults: treatment and management Forest plots

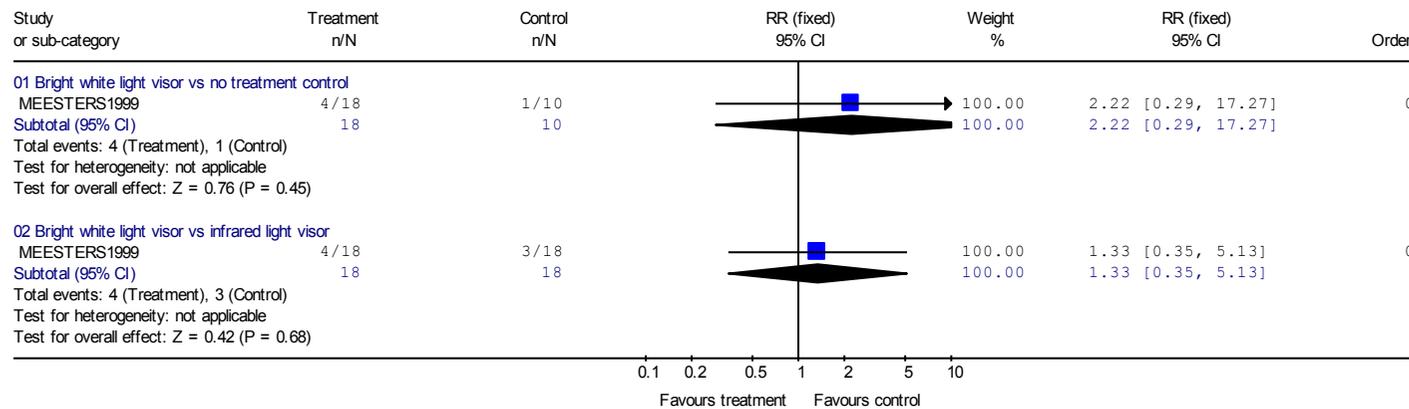
Mean SAD depression endpoint scores

Review: Depression update pharmacology: treatments for SAD
 Comparison: 07 Bright light box vs dawn simulation
 Outcome: 07 SAD: mean endpoint scores



Bright light – prevention of new episode Number leaving study early for any reason

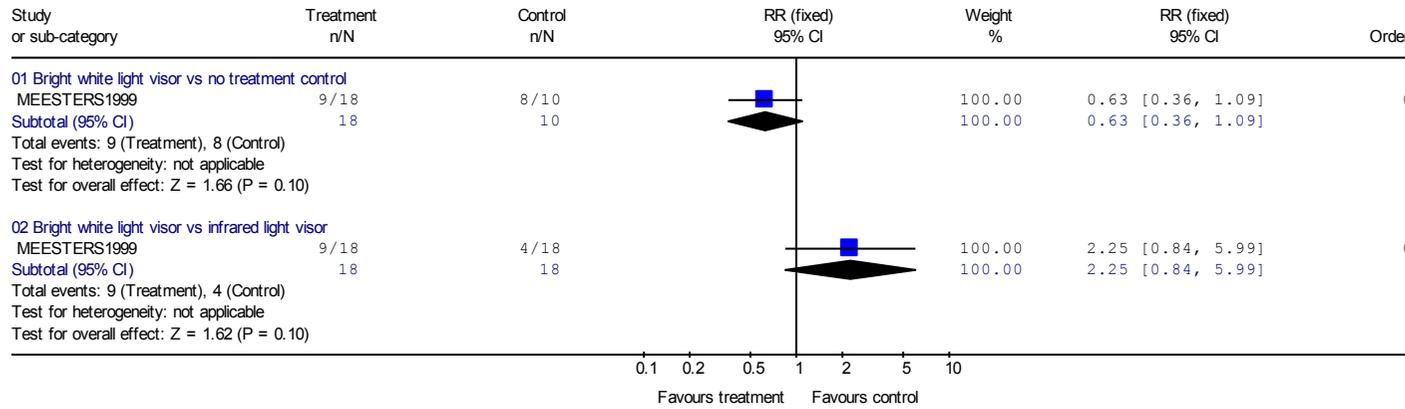
Review: Depression update pharmacology: treatments for SAD
 Comparison: 08 Bright light: prevention of new episode
 Outcome: 01 Leaving study early for any reason



Depression in adults: treatment and management
Forest plots

Number who relapsed during course of study (BDI \geq 13 for 2 consecutive weeks)

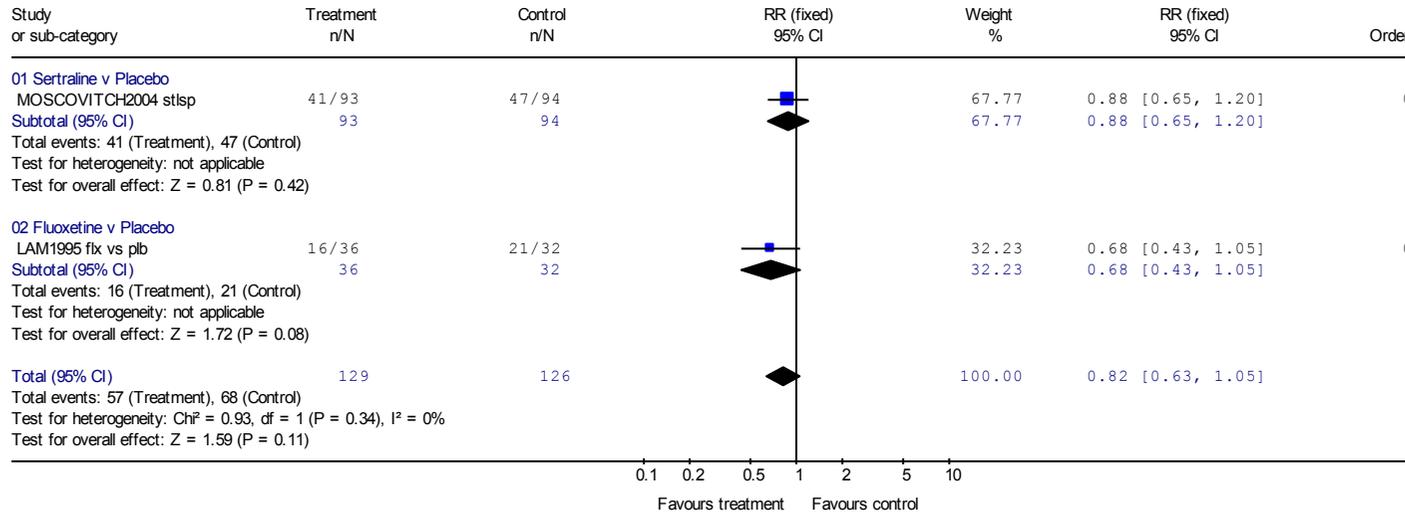
Review: Depression update pharmacology: treatments for SAD
Comparison: 08 Bright light: prevention of new episode
Outcome: 02 Relapse during course of study (BDI \geq 13 for 2 consecutive weeks)



Depression in adults: treatment and management
Forest plots

Acute-phase treatment – antidepressants versus placebo (efficacy data)
Non-response data (SIGH-SAD)

Review: Depression update pharmacology: treatments for SAD
Comparison: 09 Acute-phase treatment: antidepressants vs placebo - efficacy data
Outcome: 01 Number not achieving \geq 50% reduction in SIGH-SAD score at endpoint

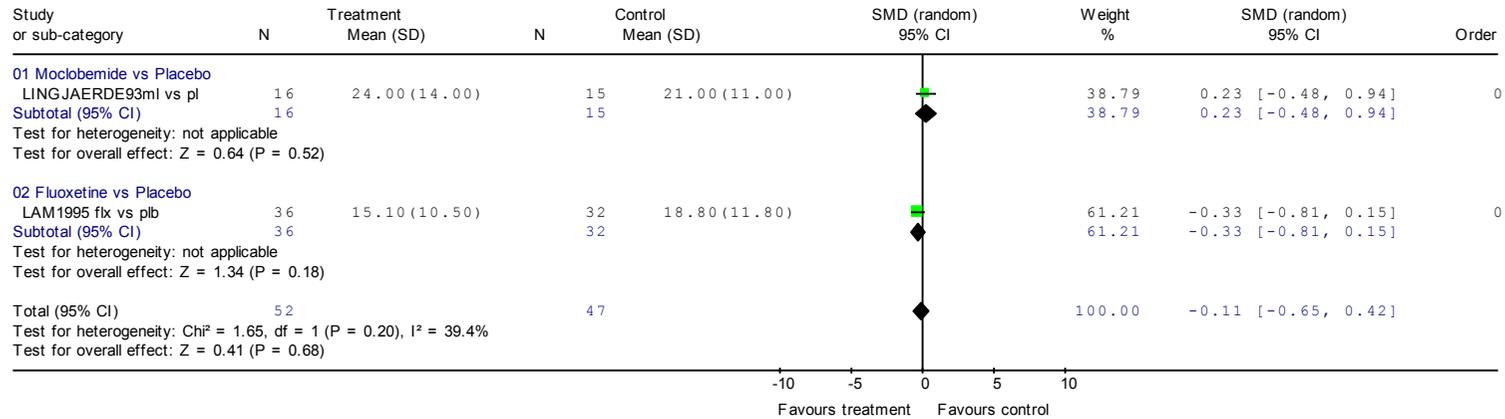


Depression in adults: treatment and management

Forest plots

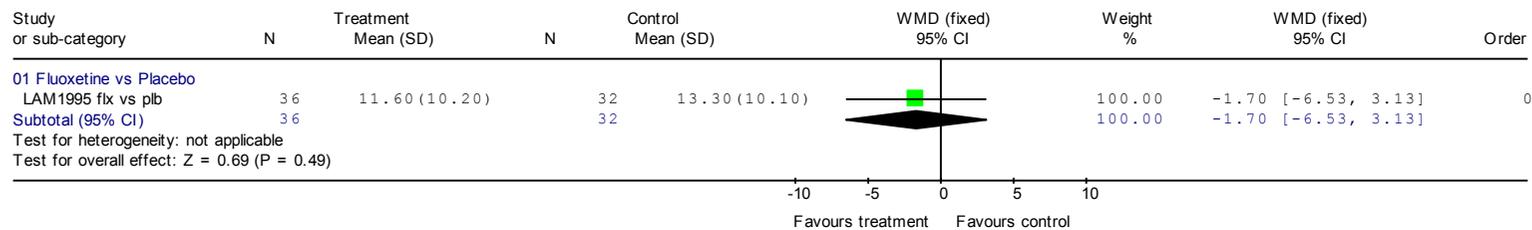
Mean endpoint depression scores (SIGH-SAD) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 09 Acute-phase treatment: antidepressants vs placebo - efficacy data
 Outcome: 02 Mean endpoint (clinician rated) (antidepressants) SIGH-SAD



Mean endpoint depression scores (BDI) (self-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 09 Acute-phase treatment: antidepressants vs placebo - efficacy data
 Outcome: 03 Mean endpoint (self rated) BDI

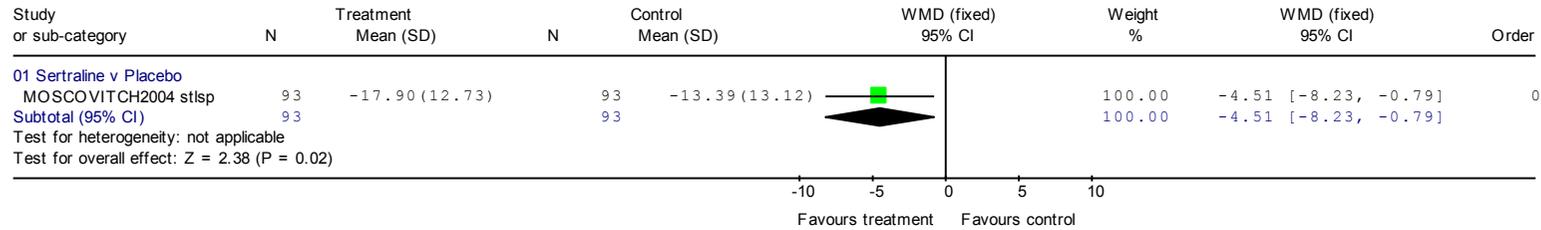


Depression in adults: treatment and management

Forest plots

Mean change depression scores (SIGH-SAD) (clinician-rated)

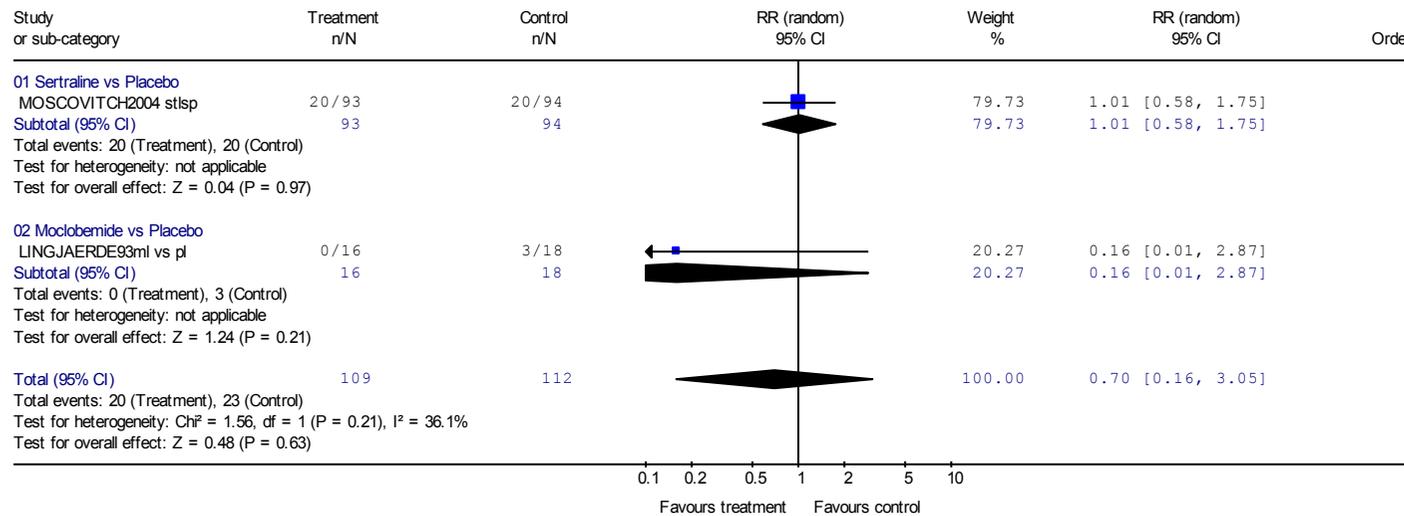
Review: Depression update pharmacology: treatments for SAD
 Comparison: 09 Acute-phase treatment: antidepressants vs placebo - efficacy data
 Outcome: 04 Mean change (clinician rated) SIGH-SAD



Acute-phase treatment – antidepressants versus placebo (acceptability and tolerability data)

Number leaving the study early for any reason

Review: Depression update pharmacology: treatments for SAD
 Comparison: 10 Acute-phase treatment: antidepressants vs placebo - acceptability and tolerability
 Outcome: 01 Number leaving the study early for any reason

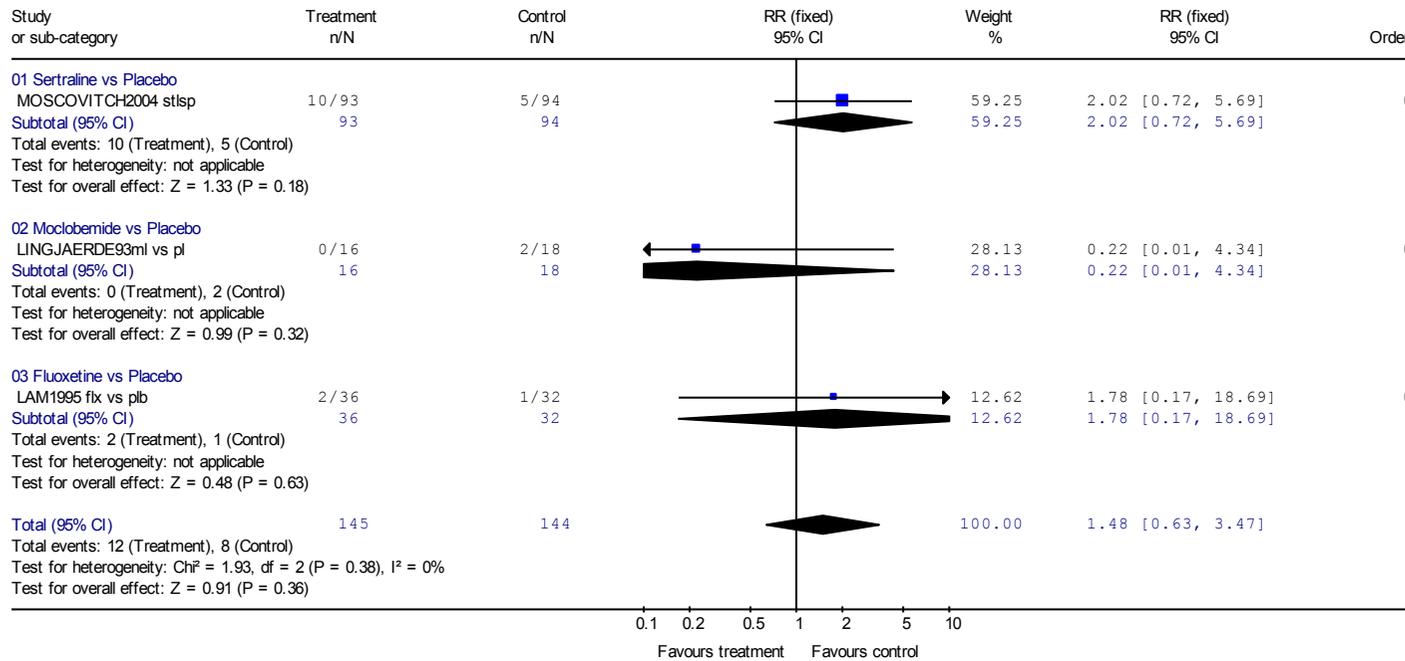


Depression in adults: treatment and management

Forest plots

Number leaving the study early due to side effects

Review: Depression update pharmacology: treatments for SAD
 Comparison: 10 Acute-phase treatment: antidepressants vs placebo - acceptability and tolerability
 Outcome: 02 Number leaving the study early due to side effects

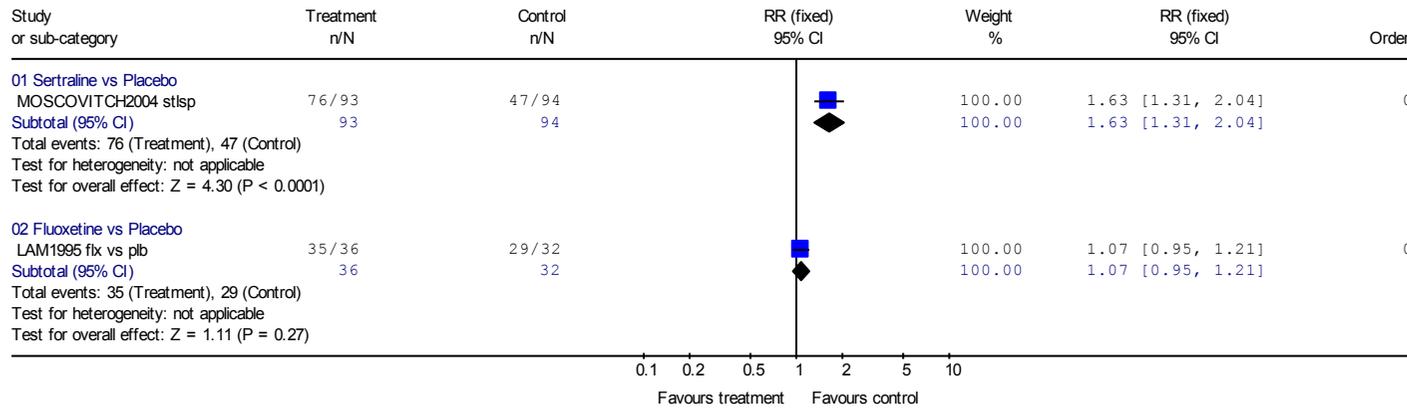


Depression in adults: treatment and management

Forest plots

Number reporting side effects

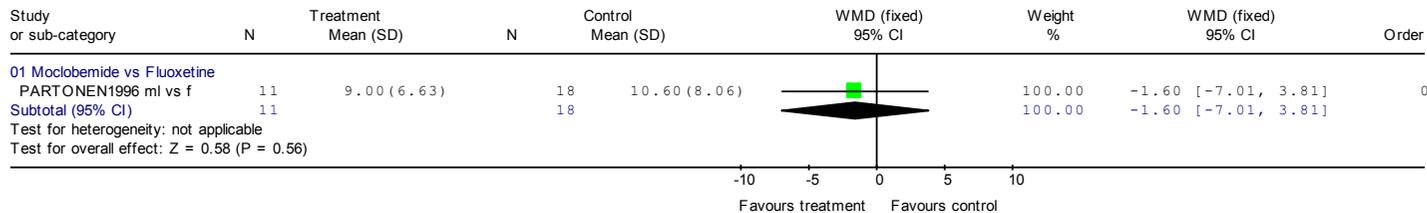
Review: Depression update pharmacology: treatments for SAD
 Comparison: 10 Acute-phase treatment: antidepressants vs placebo - acceptability and tolerability
 Outcome: 03 Number reporting side effects



Acute-phase treatment – antidepressants versus active control (efficacy data)

Mean endpoint depression data (SIGH-SAD) (clinician-rated)

Review: Depression update pharmacology: treatments for SAD
 Comparison: 11 Acute-phase treatment: antidepressants vs active control - efficacy data
 Outcome: 01 Mean endpoint (clinician rated) SIGH-SAD



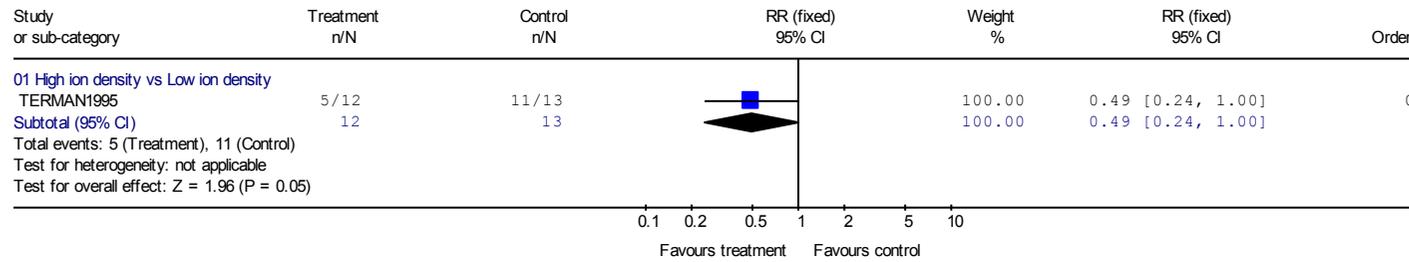
Depression in adults: treatment and management

Forest plots

Overall efficacy (other interventions)

Non-response data (SIGH-SAD)

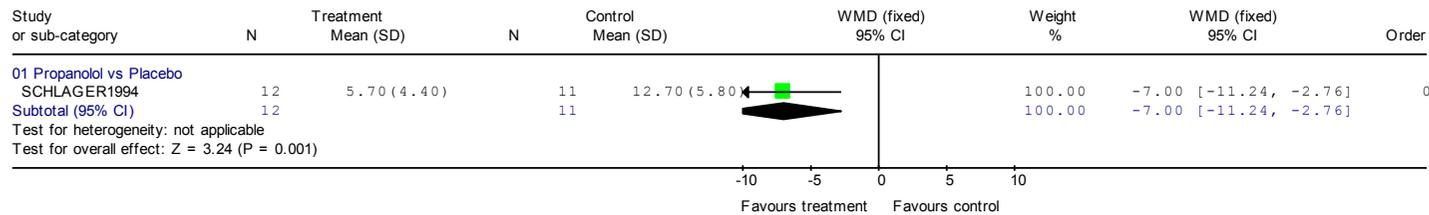
Review: Depression update pharmacology: treatments for SAD
 Comparison: 12 Overall efficacy (other interventions)
 Outcome: 01 Number not achieving \geq 50% reduction in outcome score at endpoint SIGH-SAD



Continuation treatment

Mean endpoint depression scores (HAM-D21) (clinician-rated)

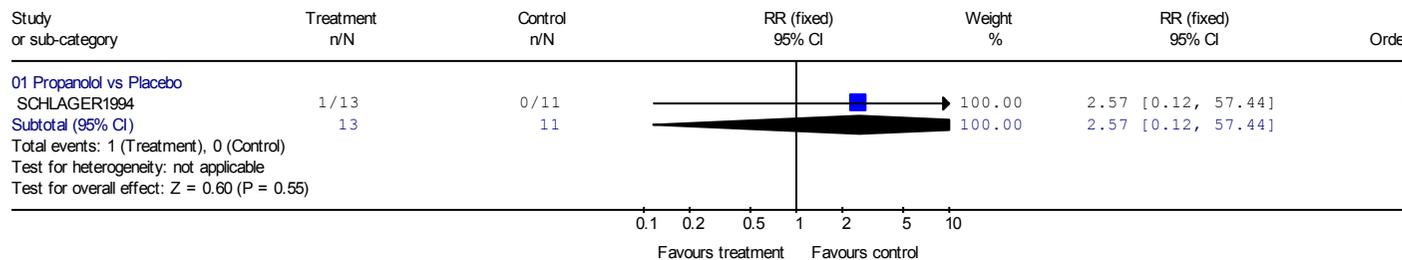
Review: Depression update pharmacology: treatments for SAD
 Comparison: 13 Continuation treatment
 Outcome: 01 Mean endpoint (clinician-rated) HAMD-21



Depression in adults: treatment and management Forest plots

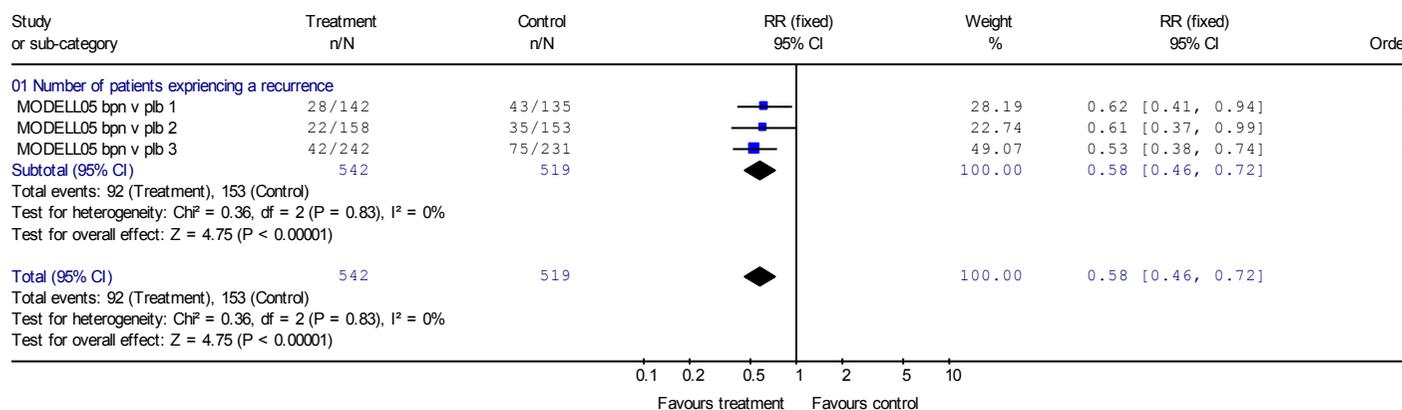
Number leaving the study early for any reason

Review: Depression update pharmacology: treatments for SAD
 Comparison: 13 Continuation treatment
 Outcome: 02 Number leaving the study early for any reason



Antidepressants – prevention of a new episode Number of patients experiencing a recurrence

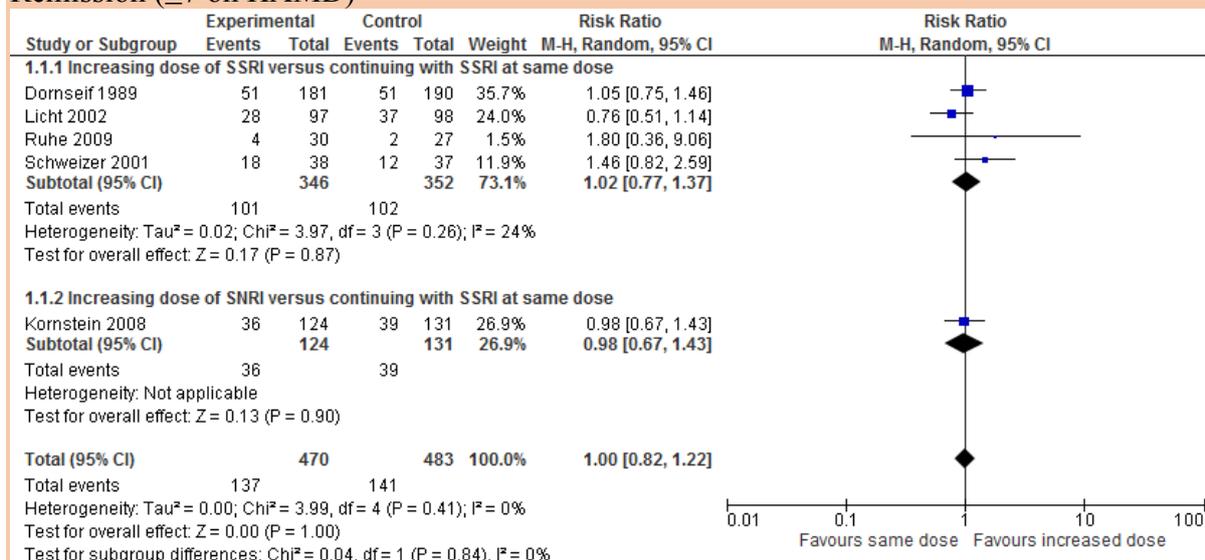
Review: Depression update pharmacology: treatments for SAD
 Comparison: 14 Antidepressants: prevention of new episode
 Outcome: 01 Buspirone vs placebo



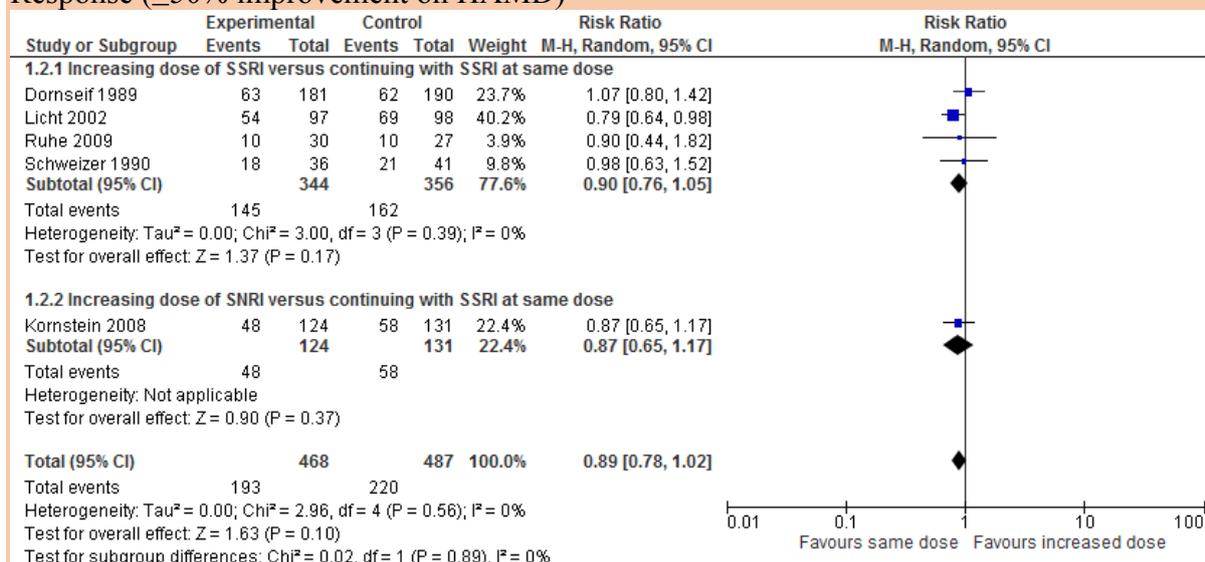
Further-line treatment (chapter 8)

Increasing the dose of antidepressant versus continuing with the antidepressant at the same dose

Remission (≤ 7 on HAMD)



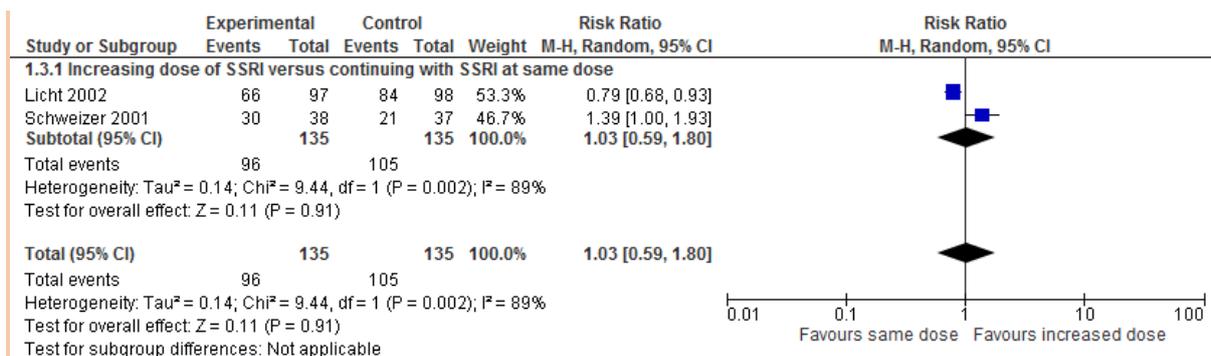
Response ($\geq 50\%$ improvement on HAMD)



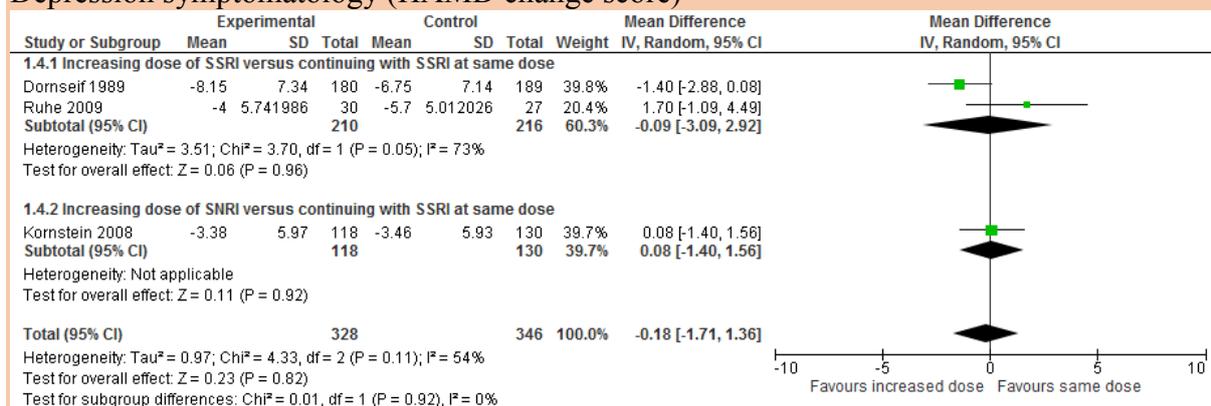
Response (much/very much improved on CGI-I)

Depression in adults: treatment and management

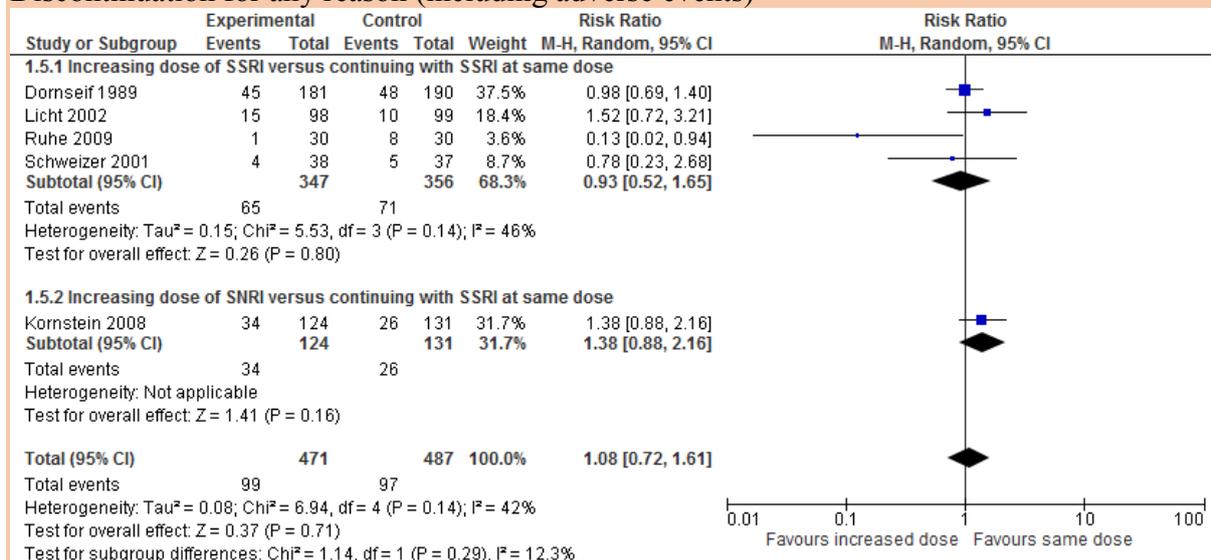
Forest plots



Depression symptomatology (HAMD change score)



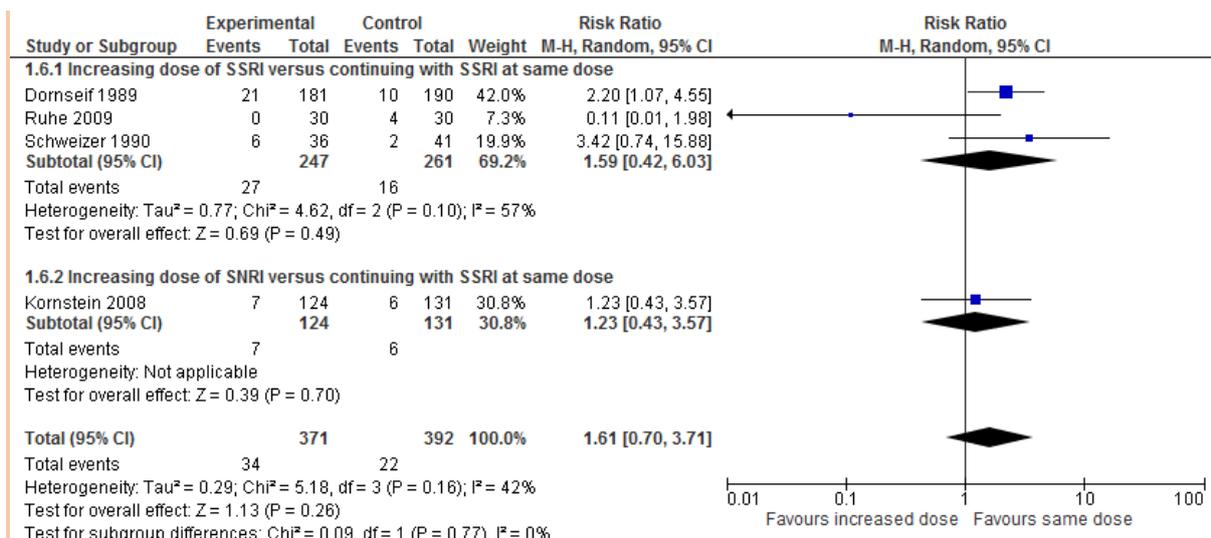
Discontinuation for any reason (including adverse events)



Discontinuation due to adverse events

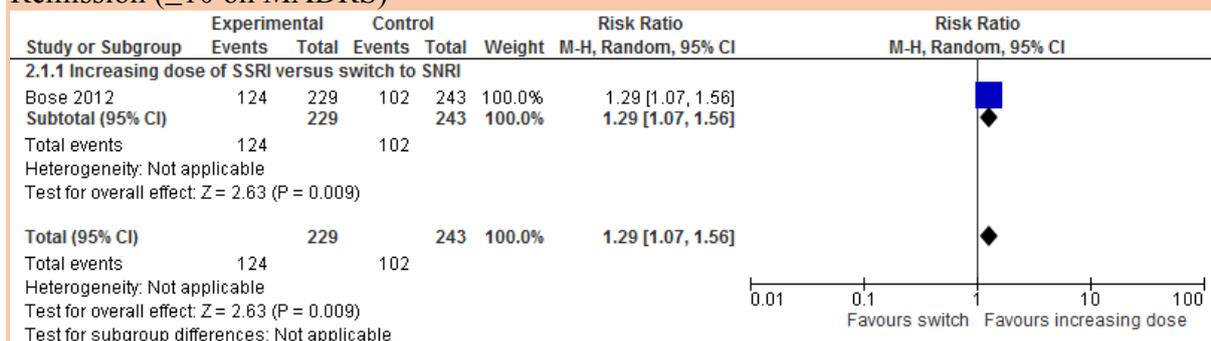
Depression in adults: treatment and management

Forest plots

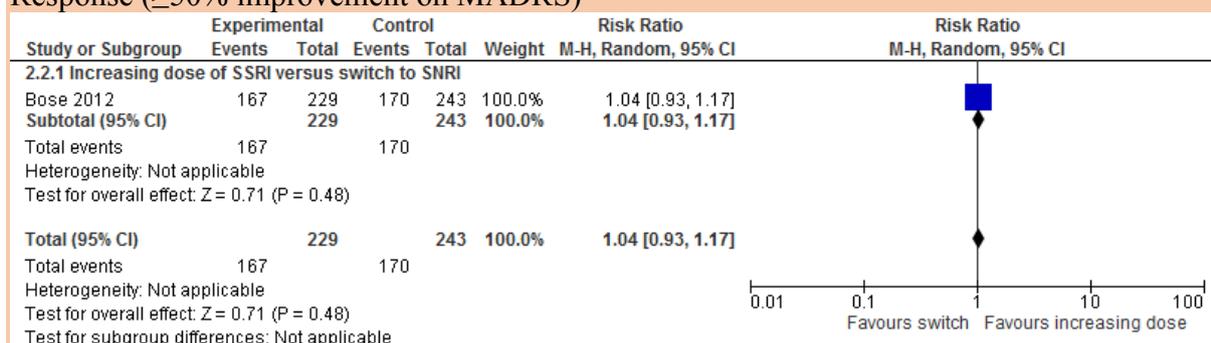


Increasing the dose of antidepressant versus switching to another antidepressant

Remission (≤ 10 on MADRS)



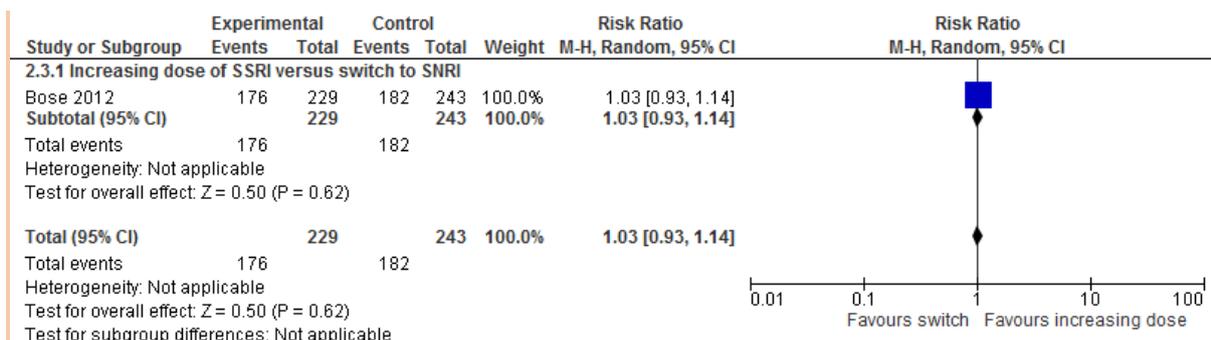
Response ($\geq 50\%$ improvement on MADRS)



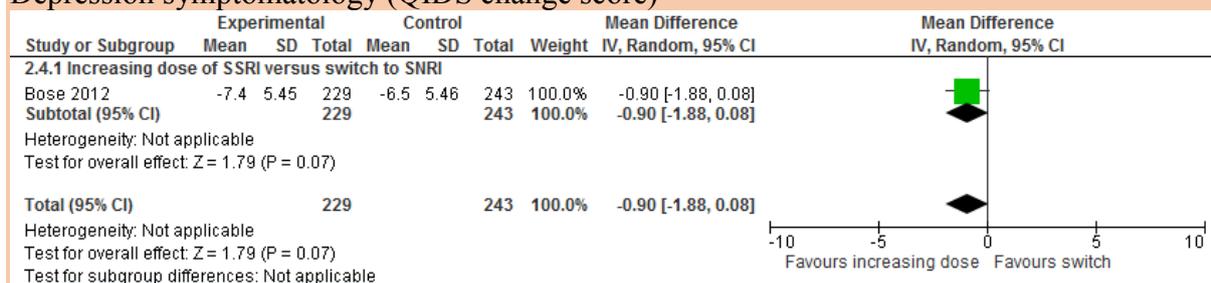
Response (much/very much improved on CGI-I)

Depression in adults: treatment and management

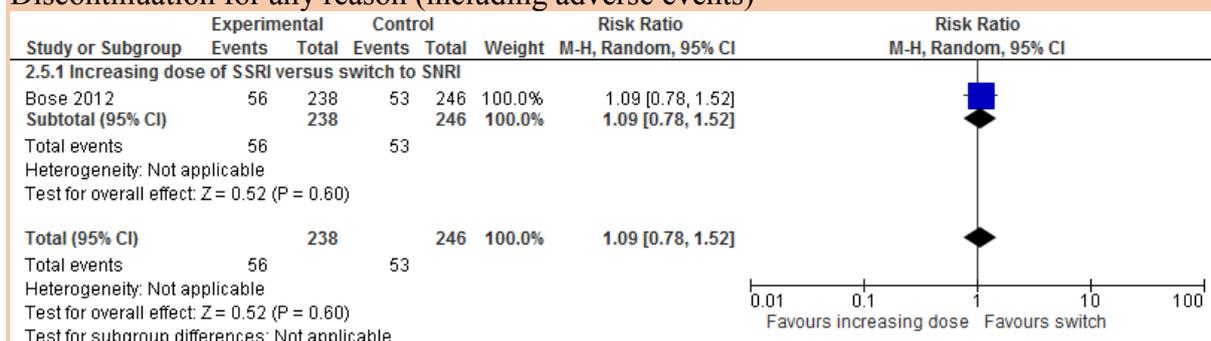
Forest plots



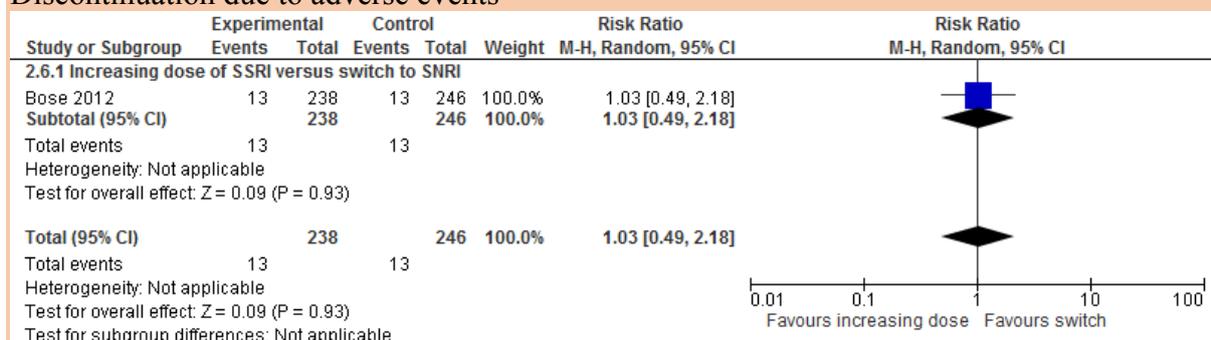
Depression symptomatology (QIDS change score)



Discontinuation for any reason (including adverse events)



Discontinuation due to adverse events

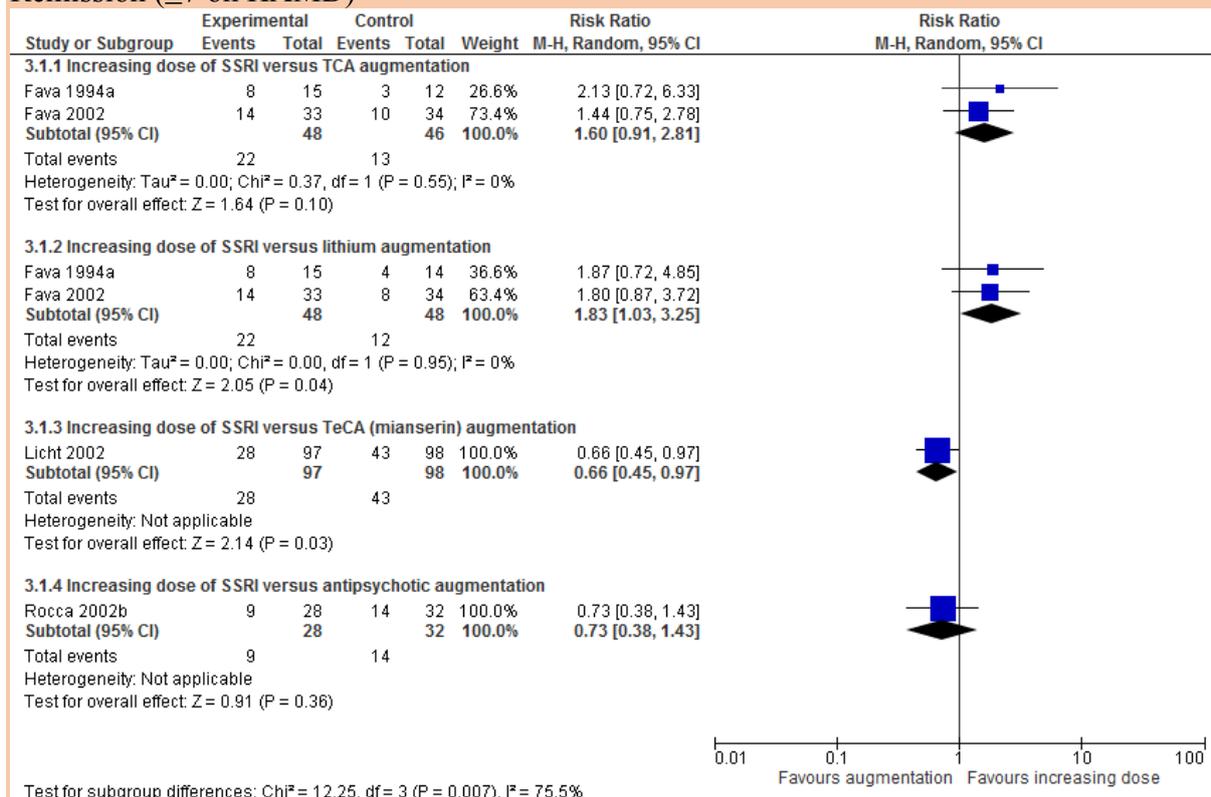


Increasing the dose of antidepressant versus augmenting with another antidepressant/non-antidepressant agent

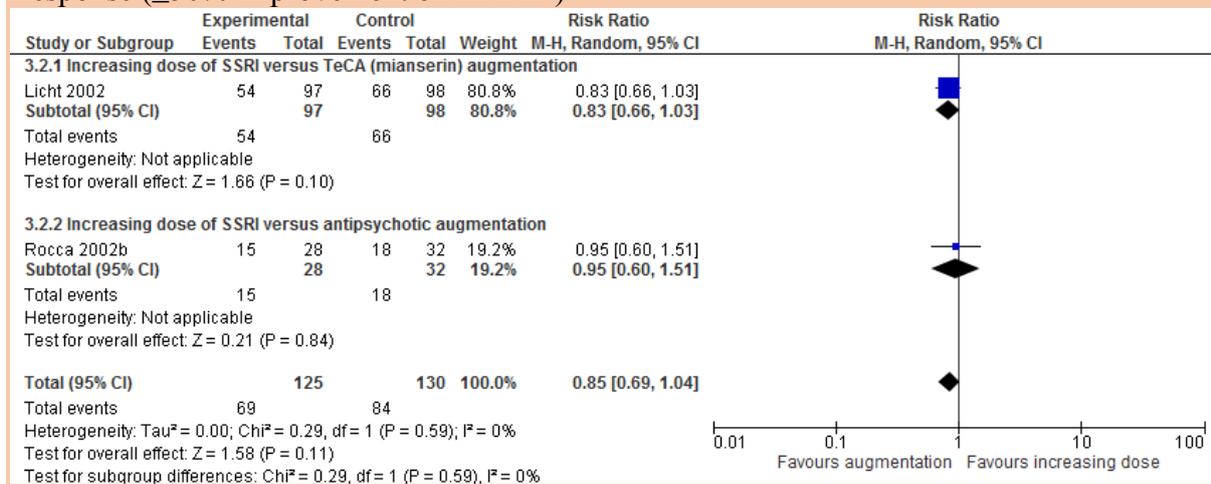
Depression in adults: treatment and management

Forest plots

Remission (≤ 7 on HAMD)

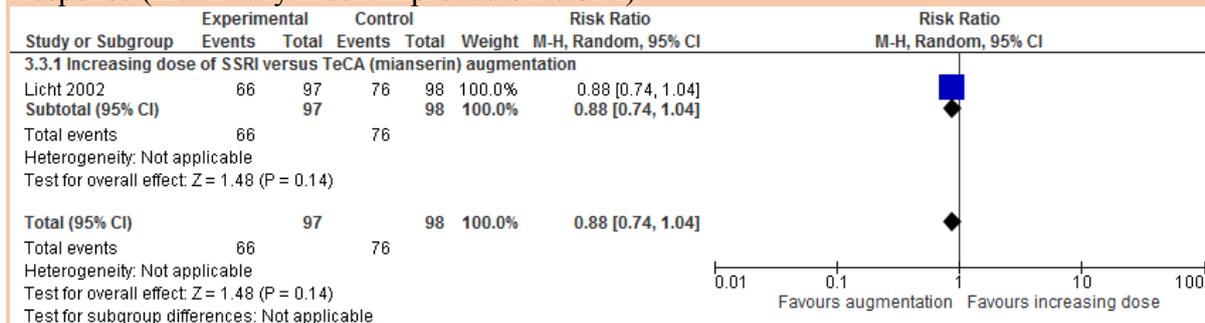


Response ($\geq 50\%$ improvement on HAMD)

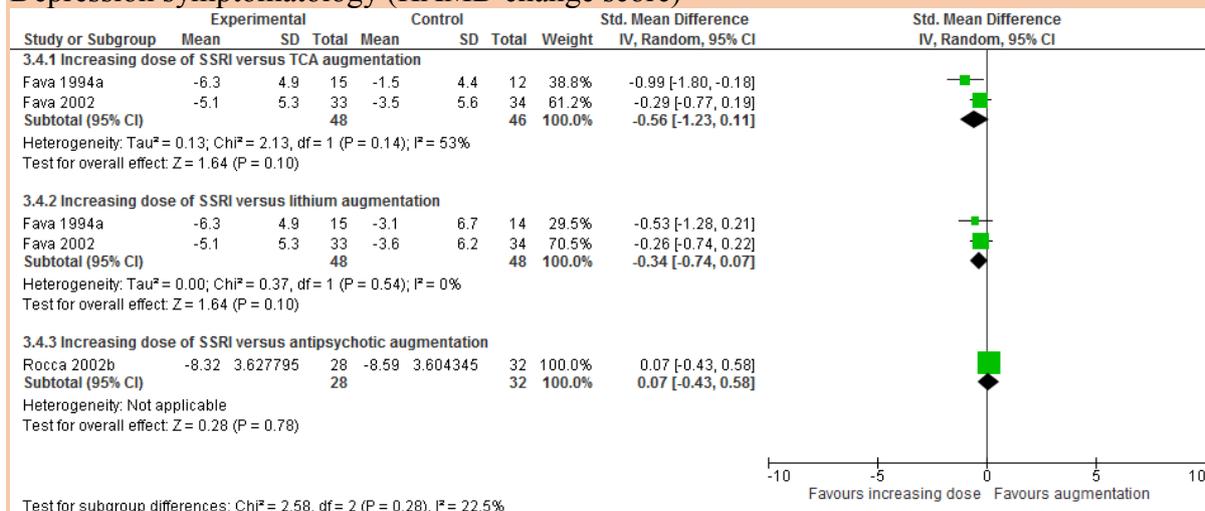


Depression in adults: treatment and management
Forest plots

Response (much/very much improved on CGI-I)



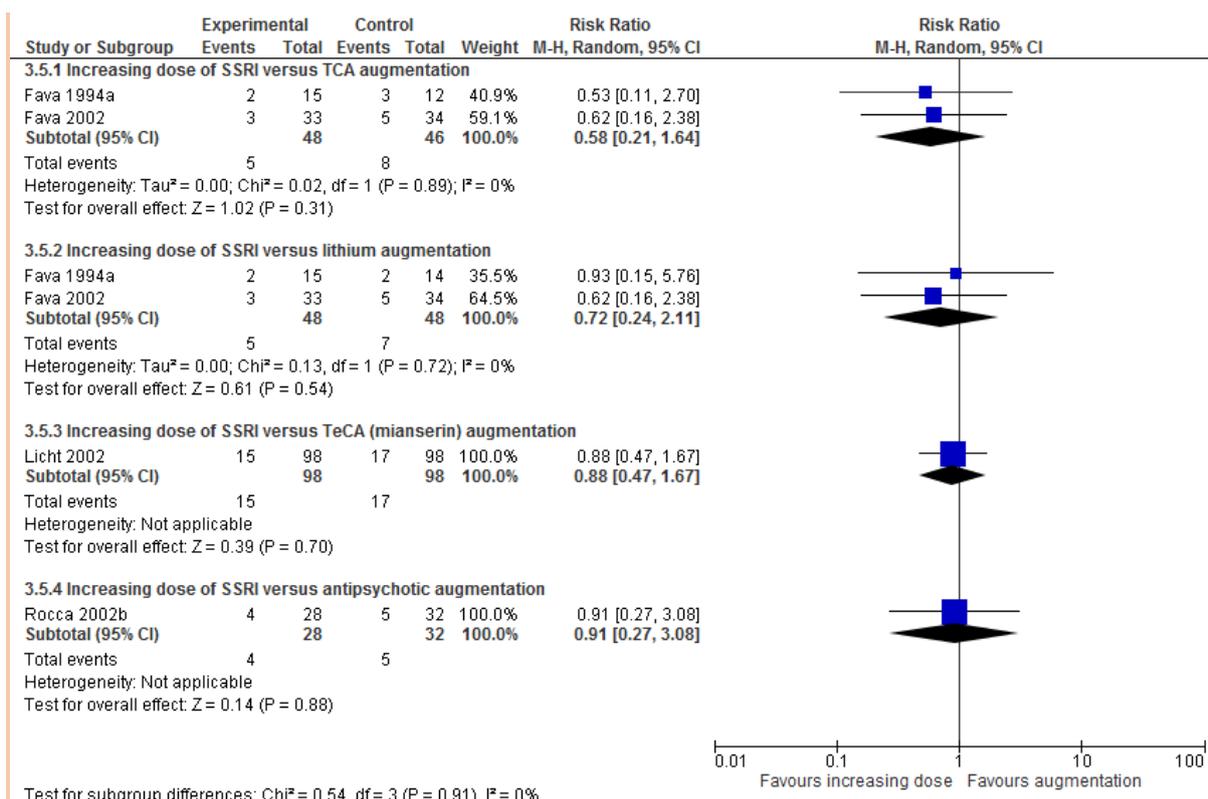
Depression symptomatology (HAMD change score)



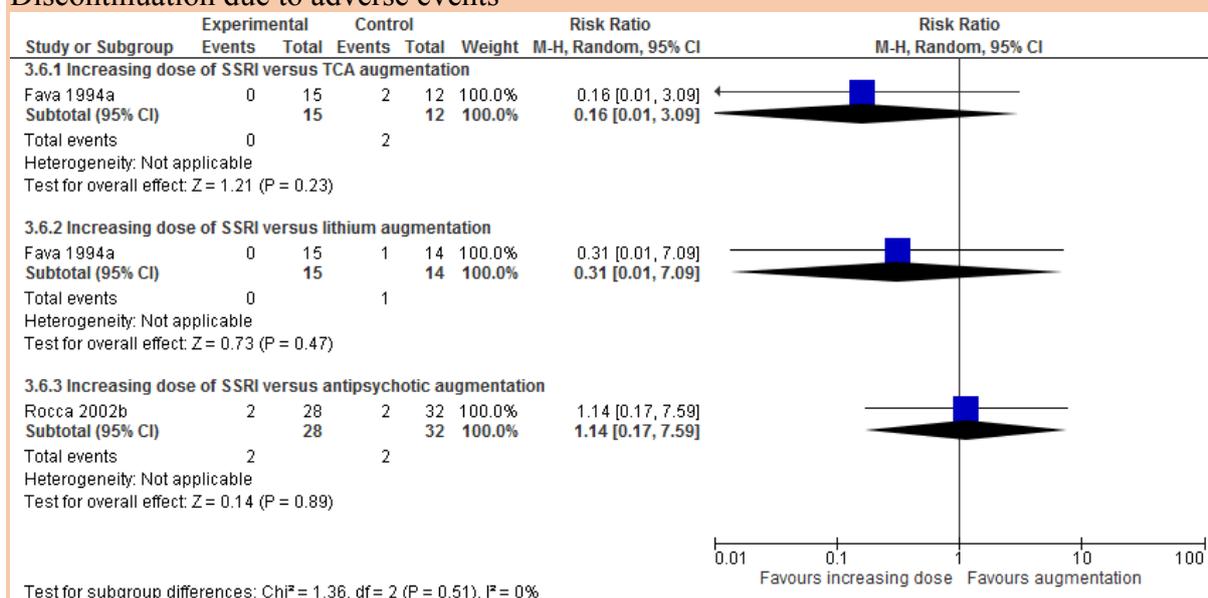
Discontinuation for any reason (including adverse events)

Depression in adults: treatment and management

Forest plots



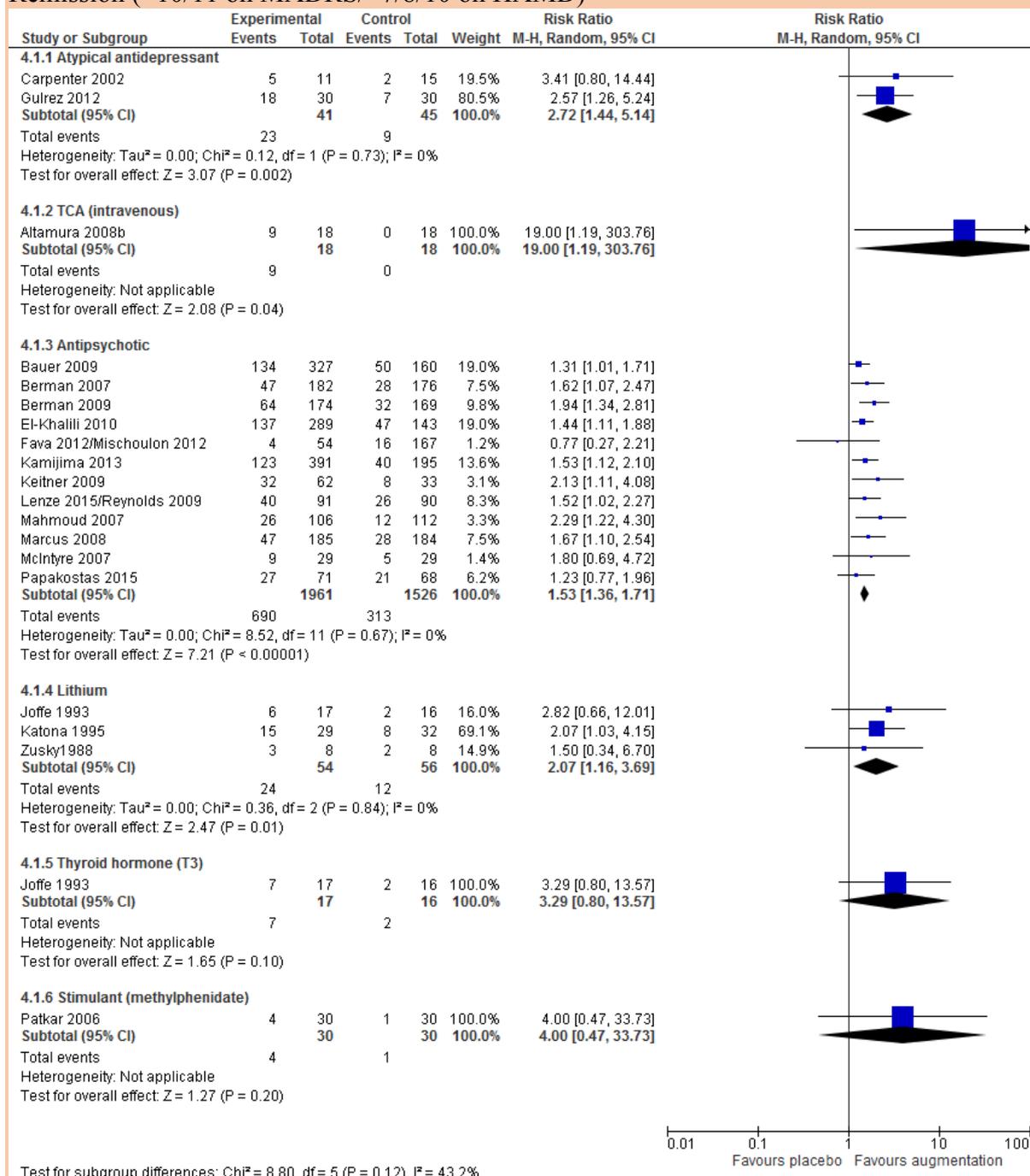
Discontinuation due to adverse events



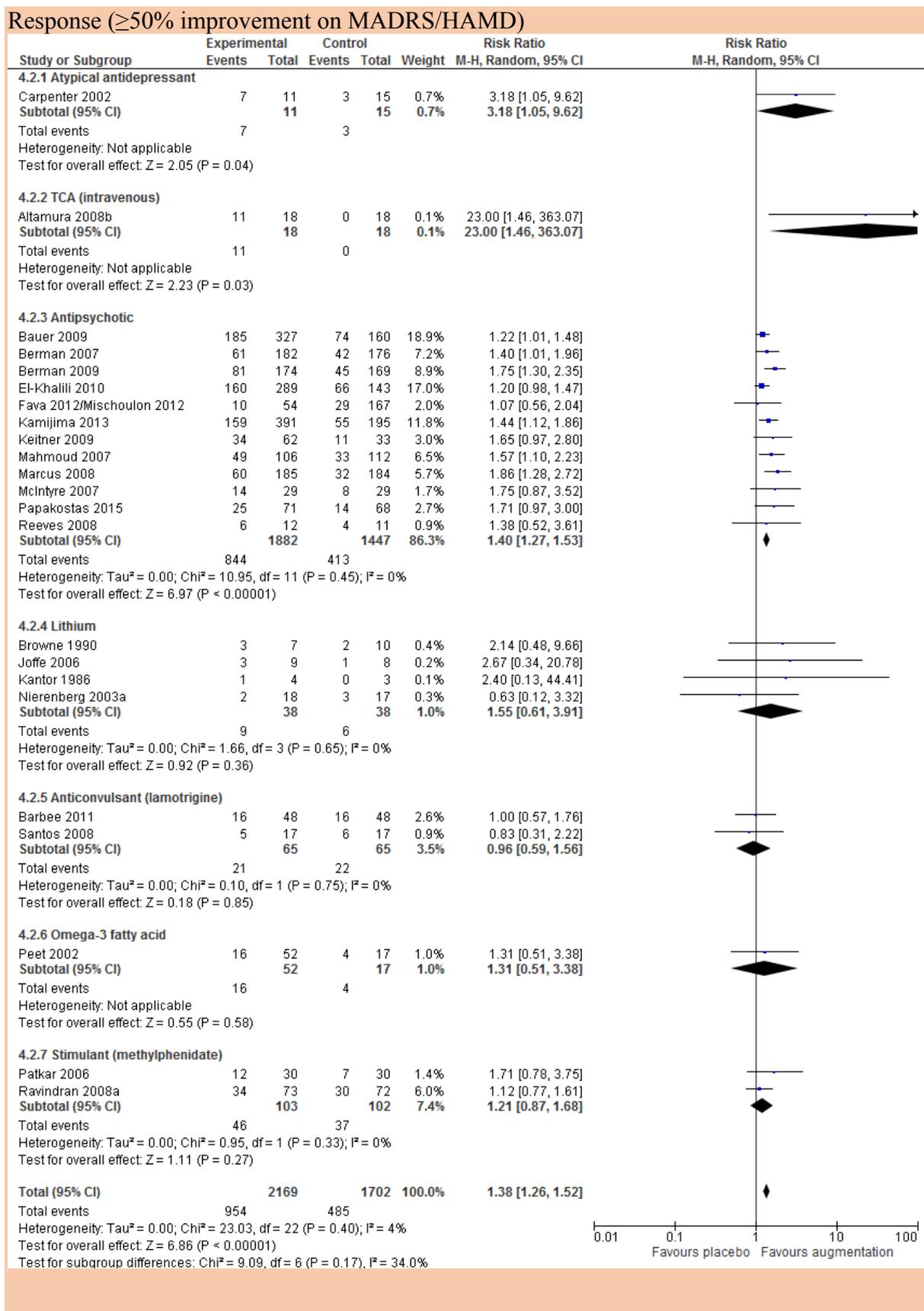
Depression in adults: treatment and management
Forest plots

Augmenting the antidepressant with another antidepressant or a non-antidepressant agent versus placebo

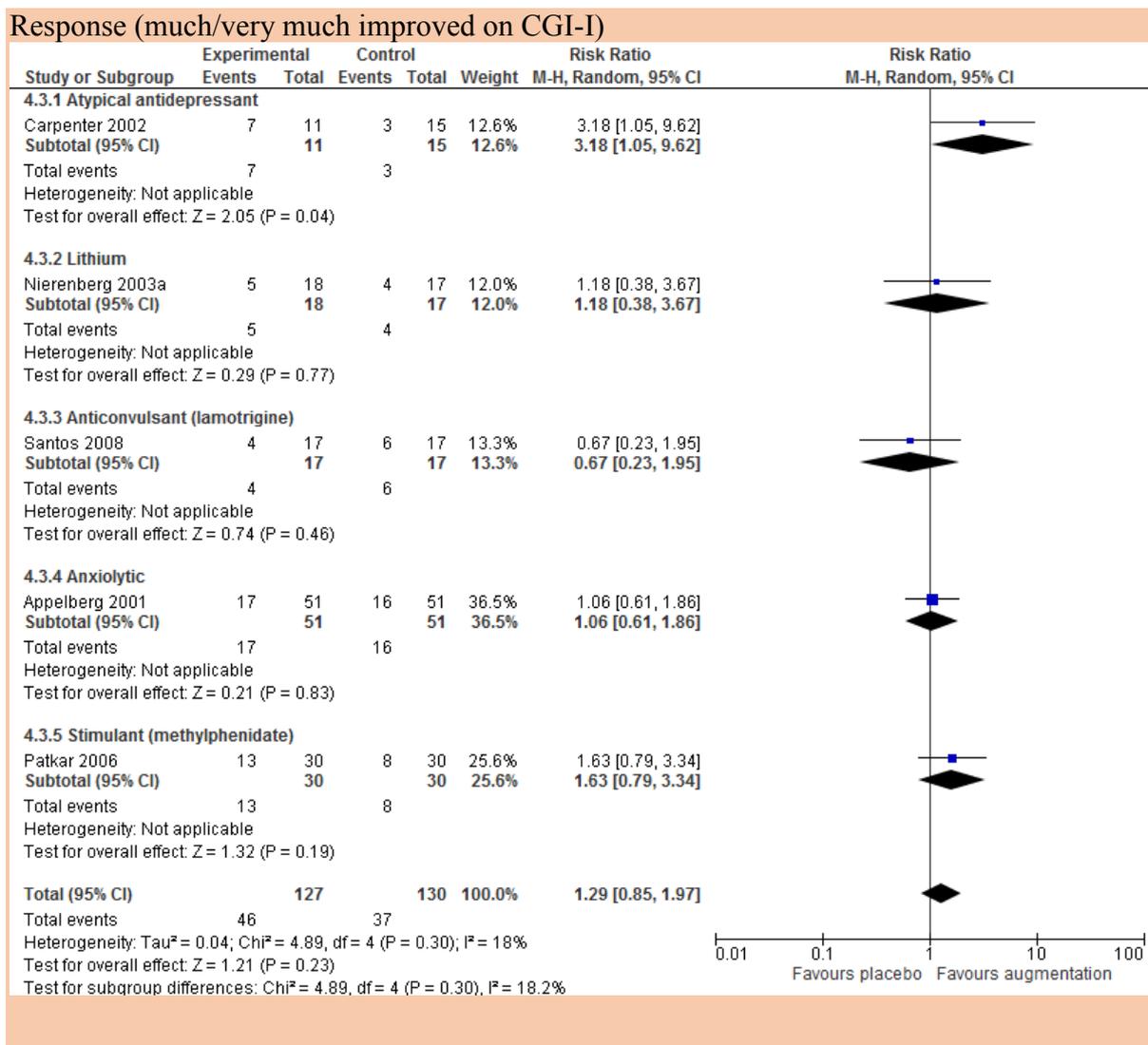
Remission (<10/11 on MADRS/<7/8/10 on HAMD)



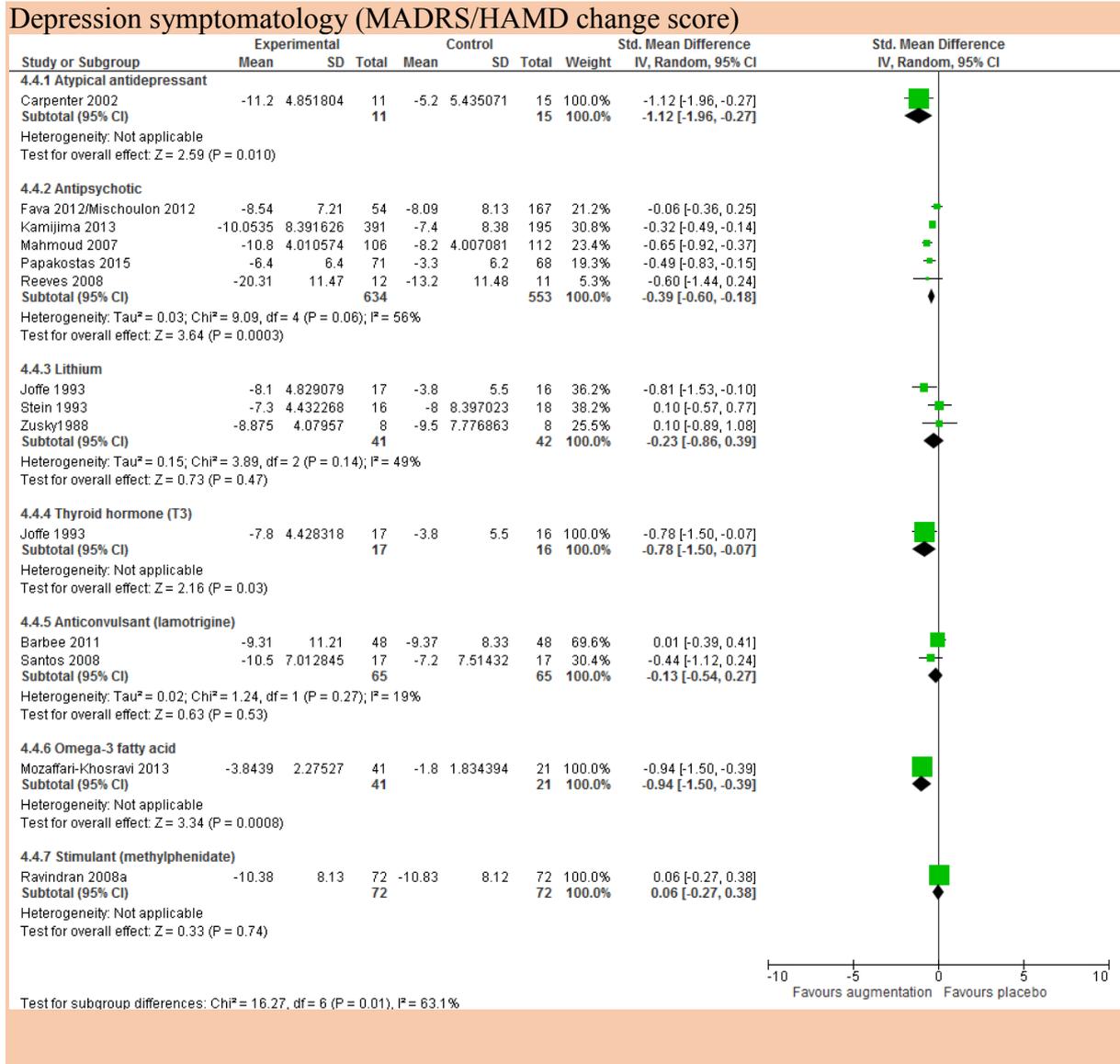
Depression in adults: treatment and management
Forest plots



Depression in adults: treatment and management
Forest plots



Depression in adults: treatment and management
Forest plots

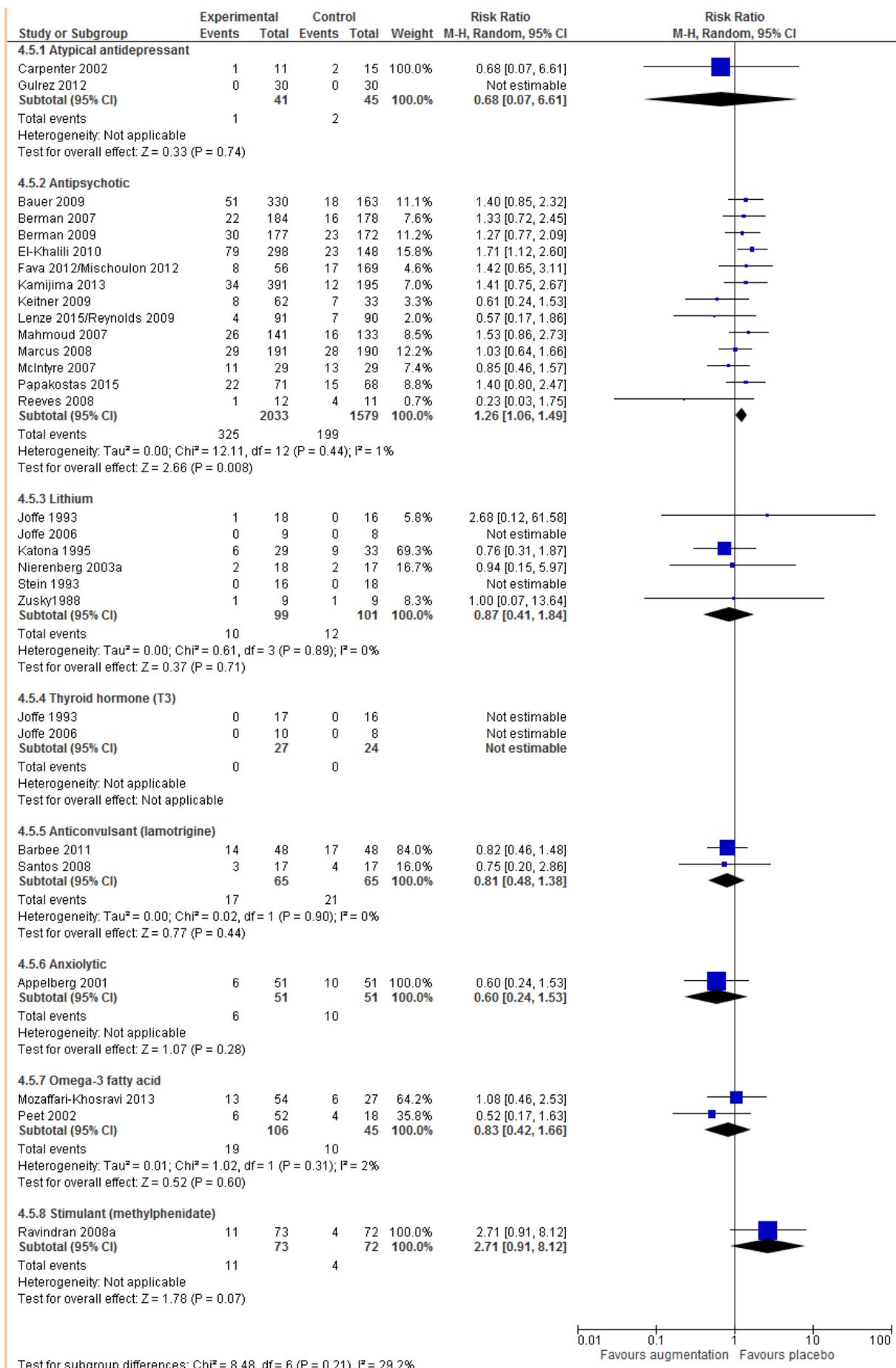


Depression in adults: treatment and management
Forest plots

Discontinuation for any reason (including adverse events)

Depression in adults: treatment and management

Forest plots

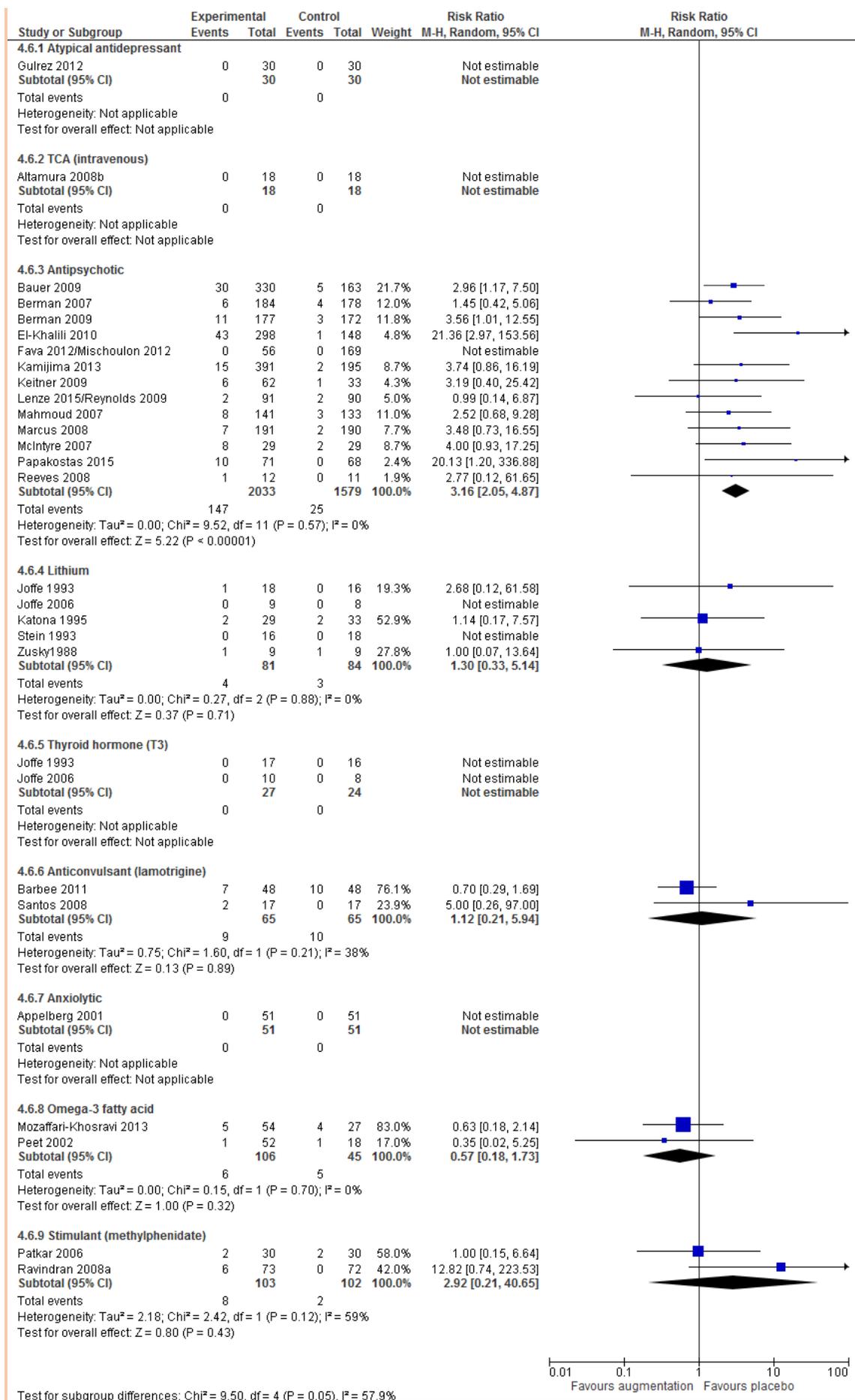


Depression in adults: treatment and management
Forest plots

Discontinuation due to adverse events

Depression in adults: treatment and management

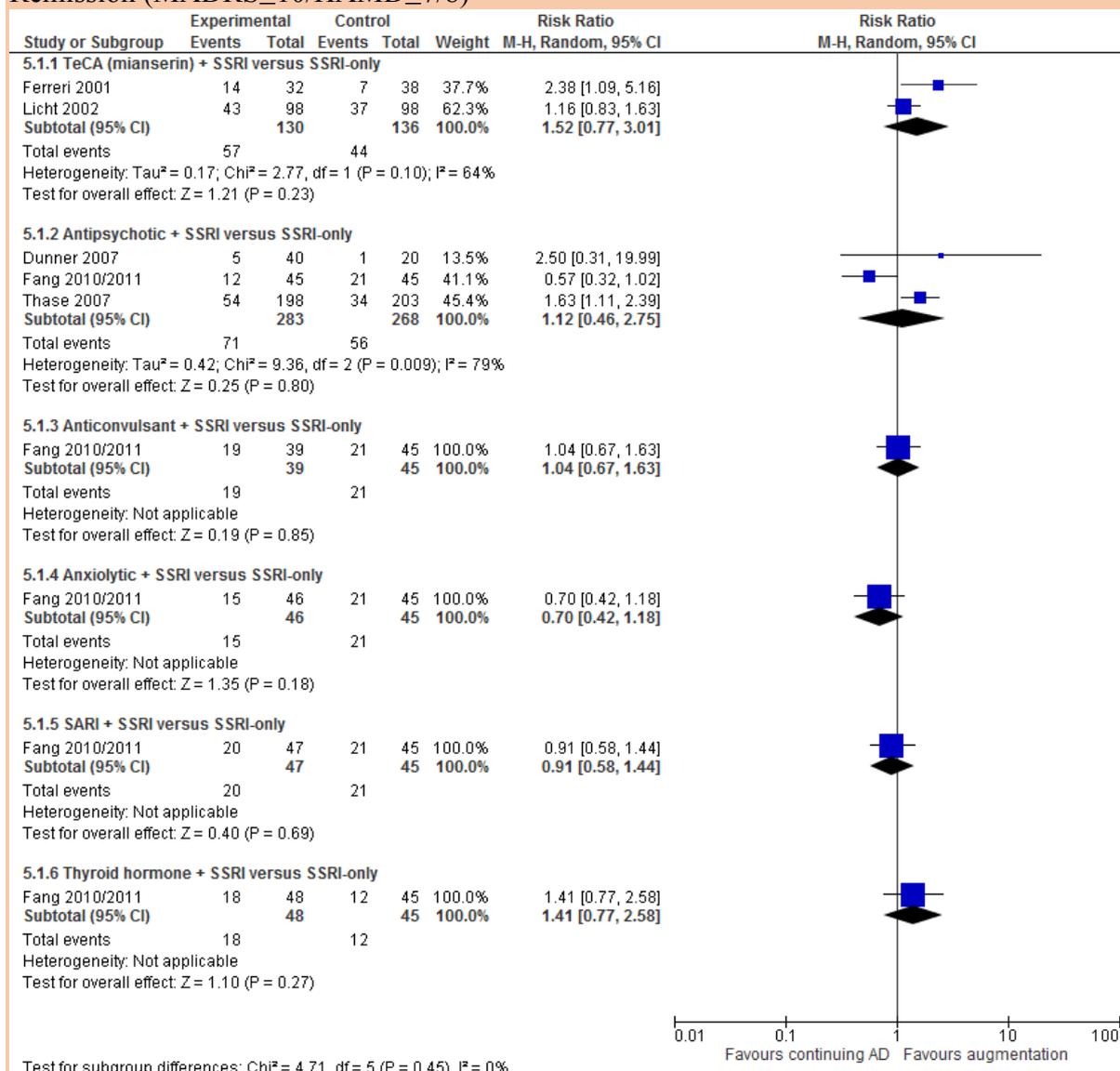
Forest plots



Depression in adults: treatment and management
Forest plots

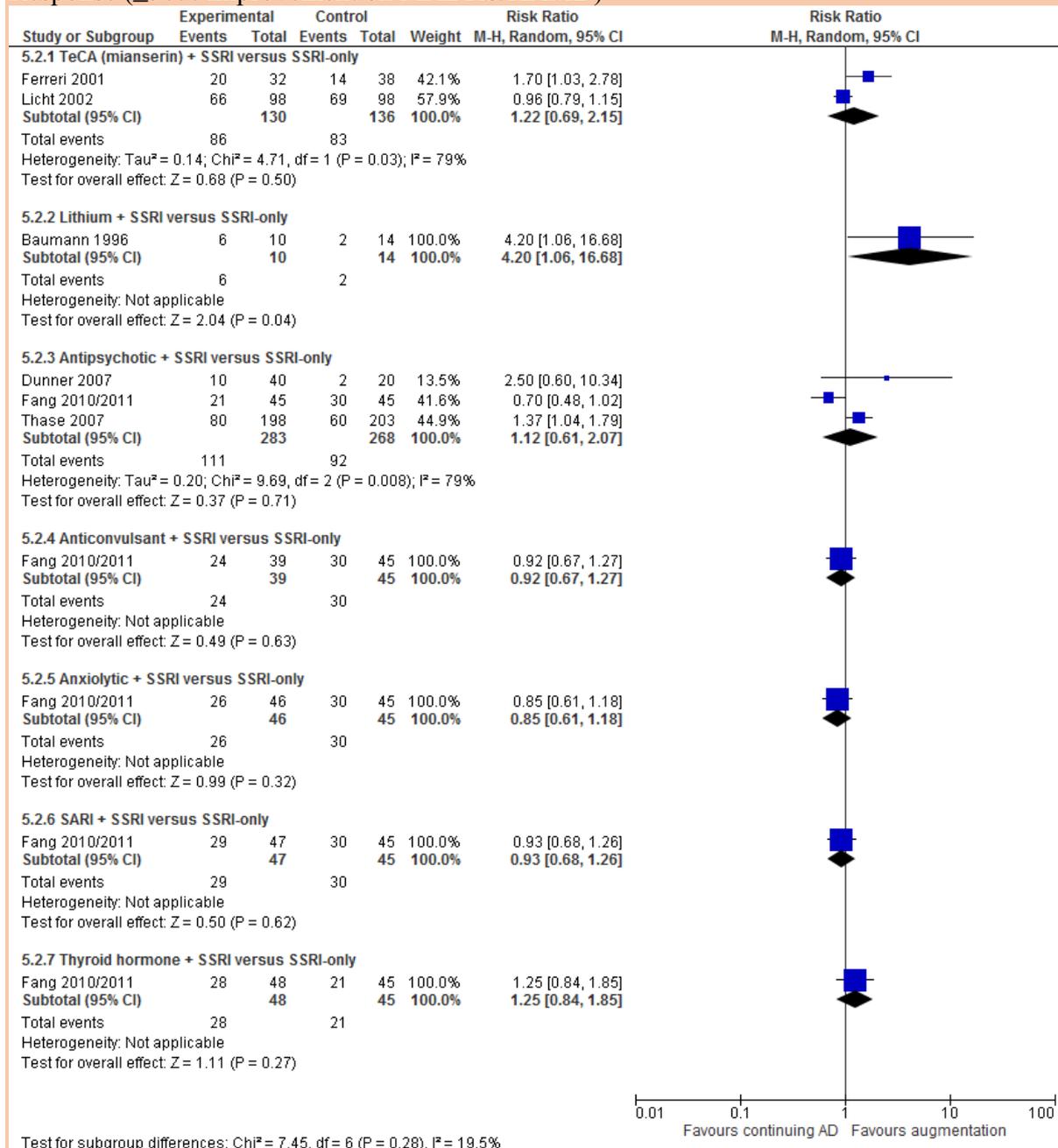
Augmenting the antidepressant with another antidepressant/non-antidepressant agent
versus continuing with the antidepressant-only

Remission (MADRS≤10/HAMD≤7/8)

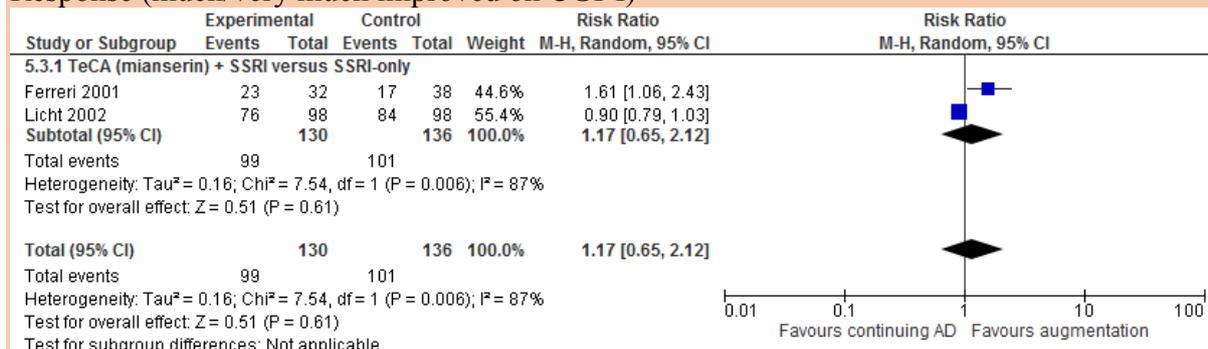


Depression in adults: treatment and management
Forest plots

Response ($\geq 50\%$ improvement on MADRS/HAMD)



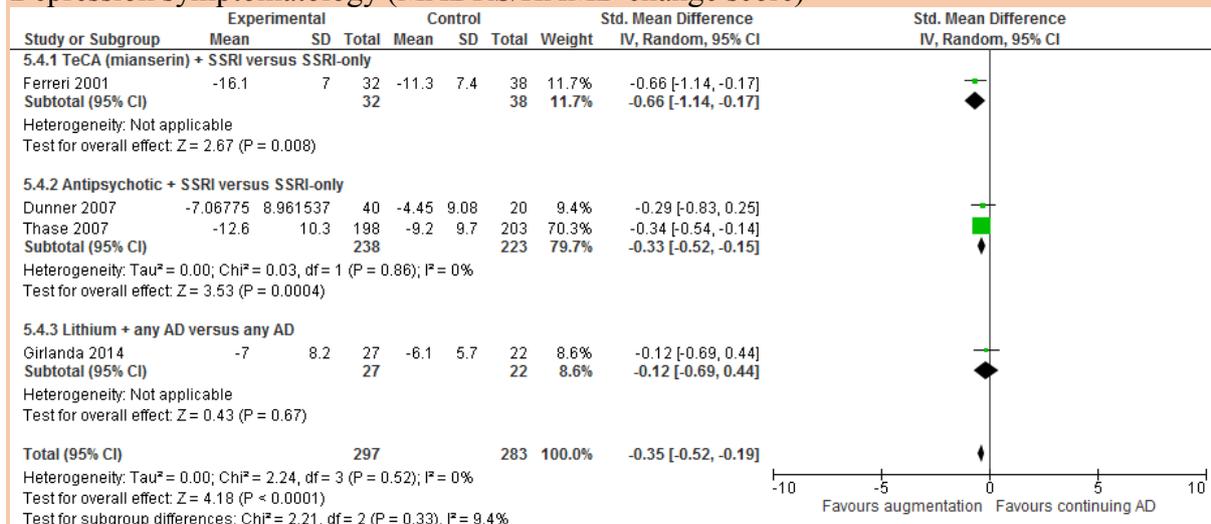
Response (much/very much improved on CGI-I)



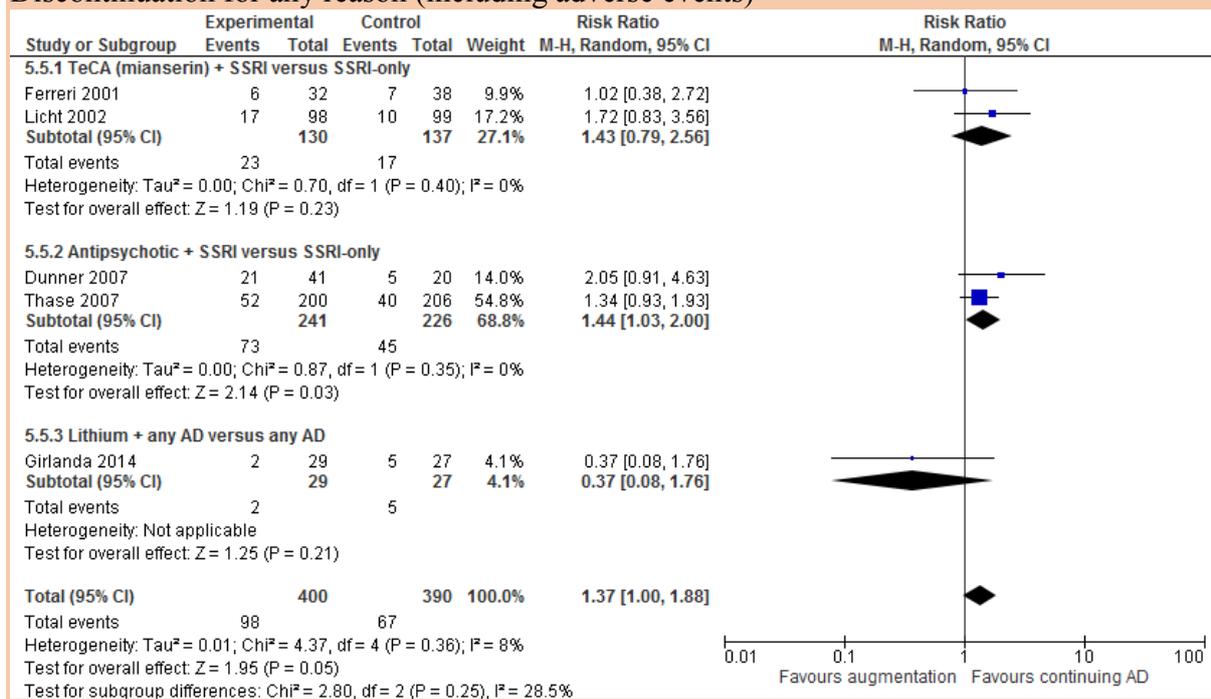
Depression in adults: treatment and management

Forest plots

Depression symptomatology (MADRS/HAMD change score)



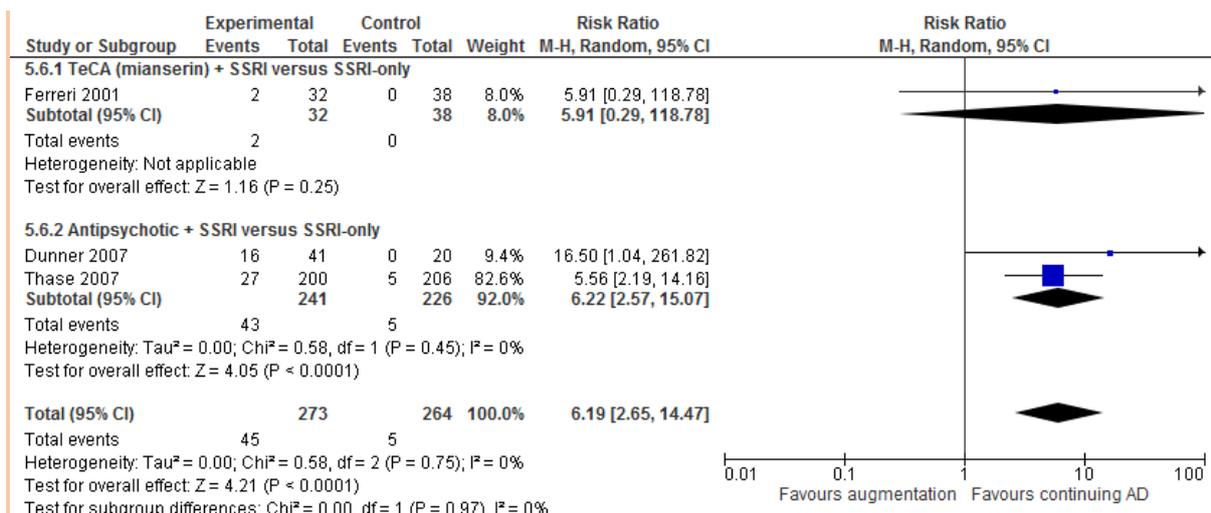
Discontinuation for any reason (including adverse events)



Discontinuation due to adverse events

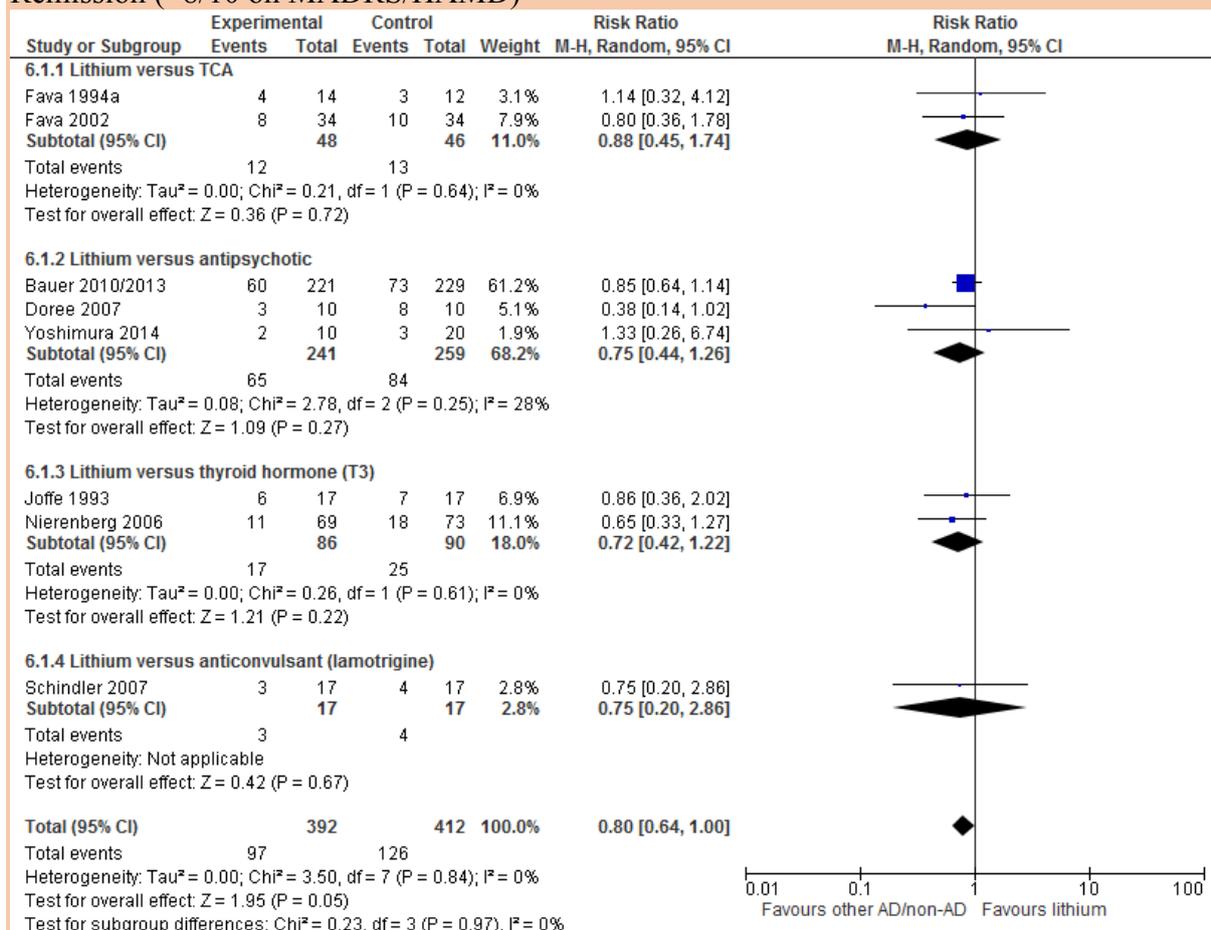
Depression in adults: treatment and management

Forest plots



Augmenting the antidepressant with lithium compared to 'other' augmentation agents (head-to-head comparisons)

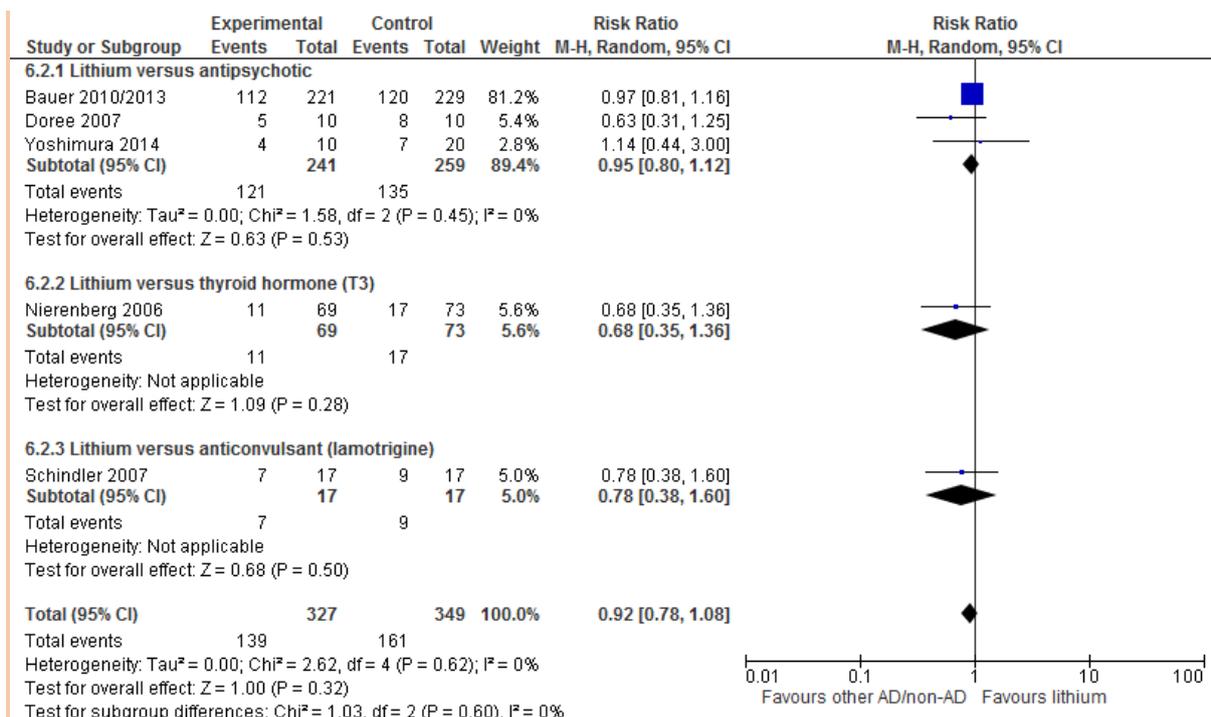
Remission (<8/10 on MADRS/HAMD)



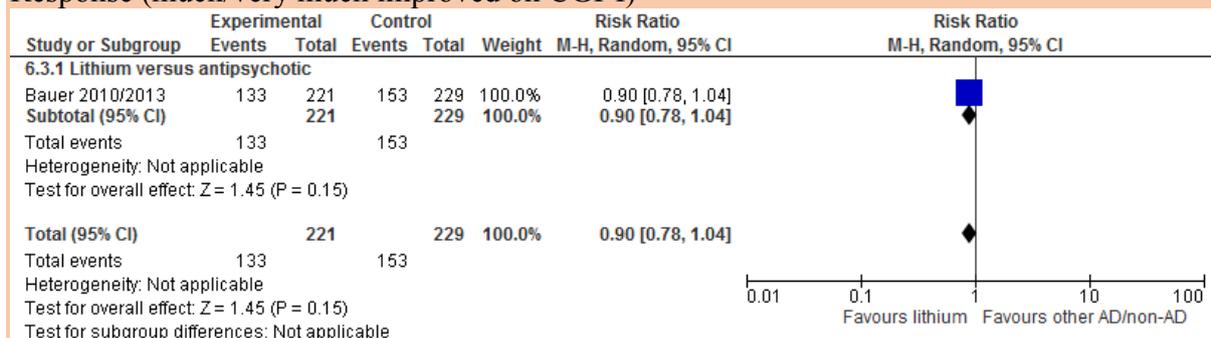
Response (≥50% improvement on HAMD/MADRS/QIDS)

Depression in adults: treatment and management

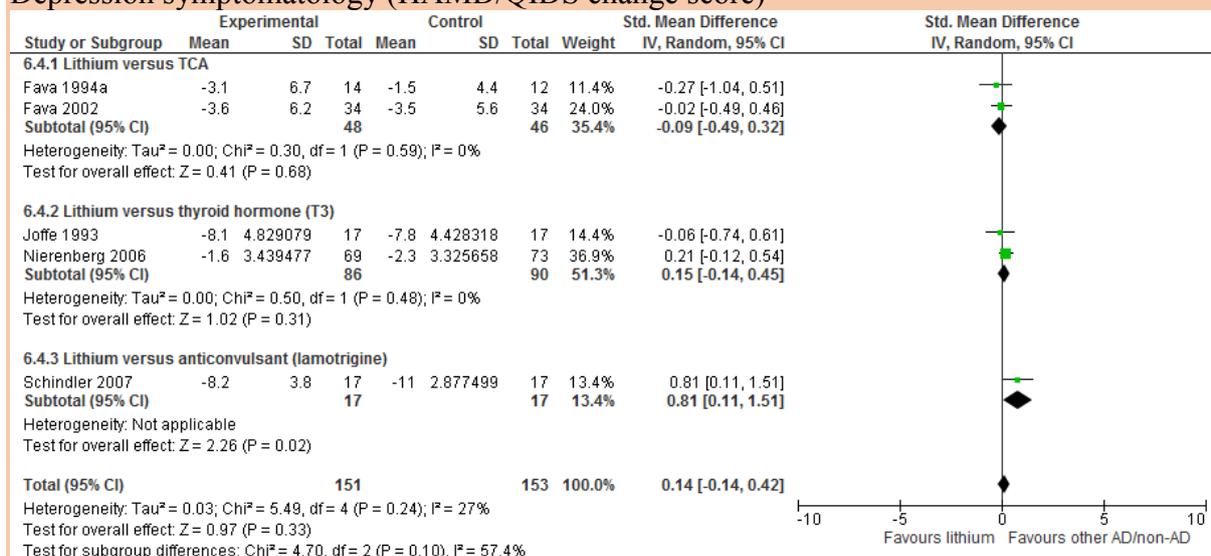
Forest plots



Response (much/very much improved on CGI-I)

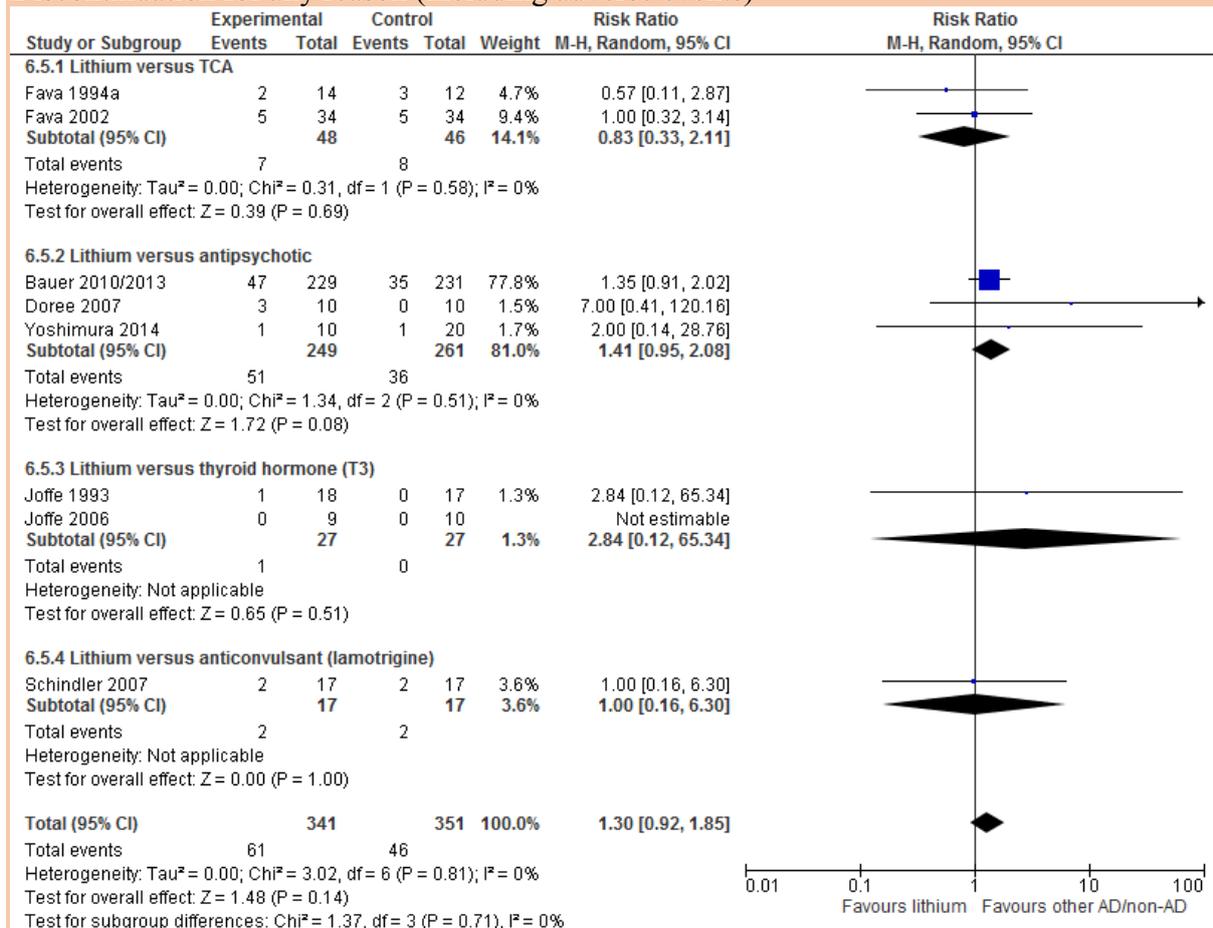


Depression symptomatology (HAMD/QIDS change score)

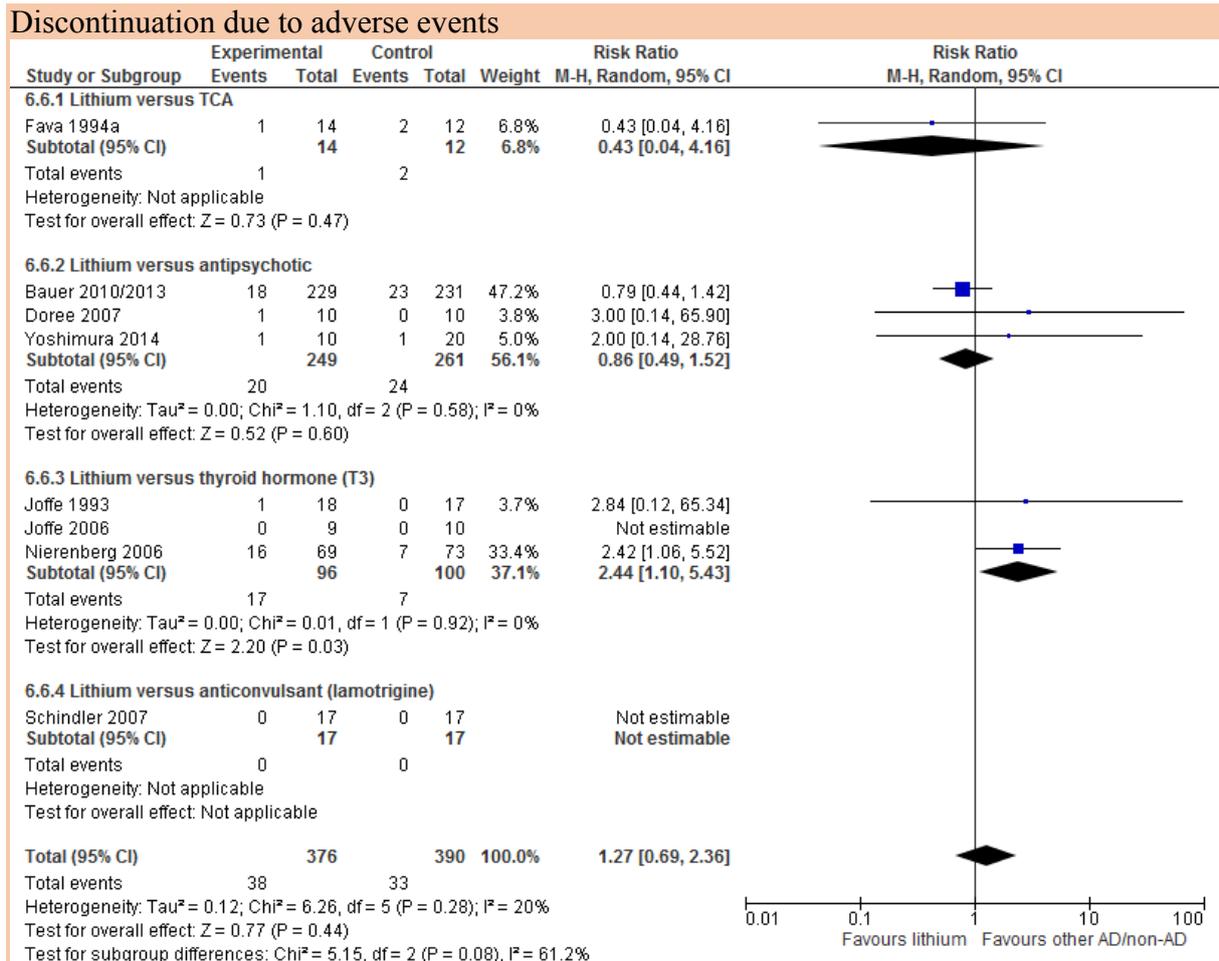


Depression in adults: treatment and management
Forest plots

Discontinuation for any reason (including adverse events)



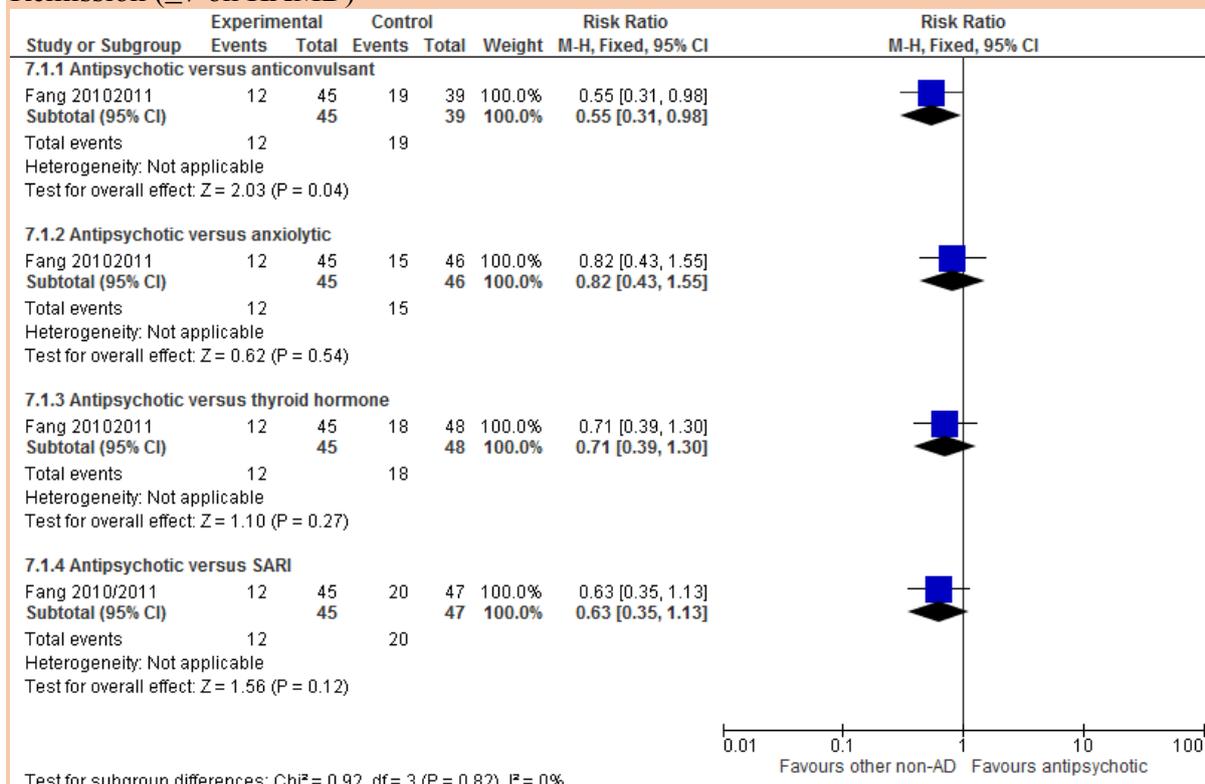
Depression in adults: treatment and management
Forest plots



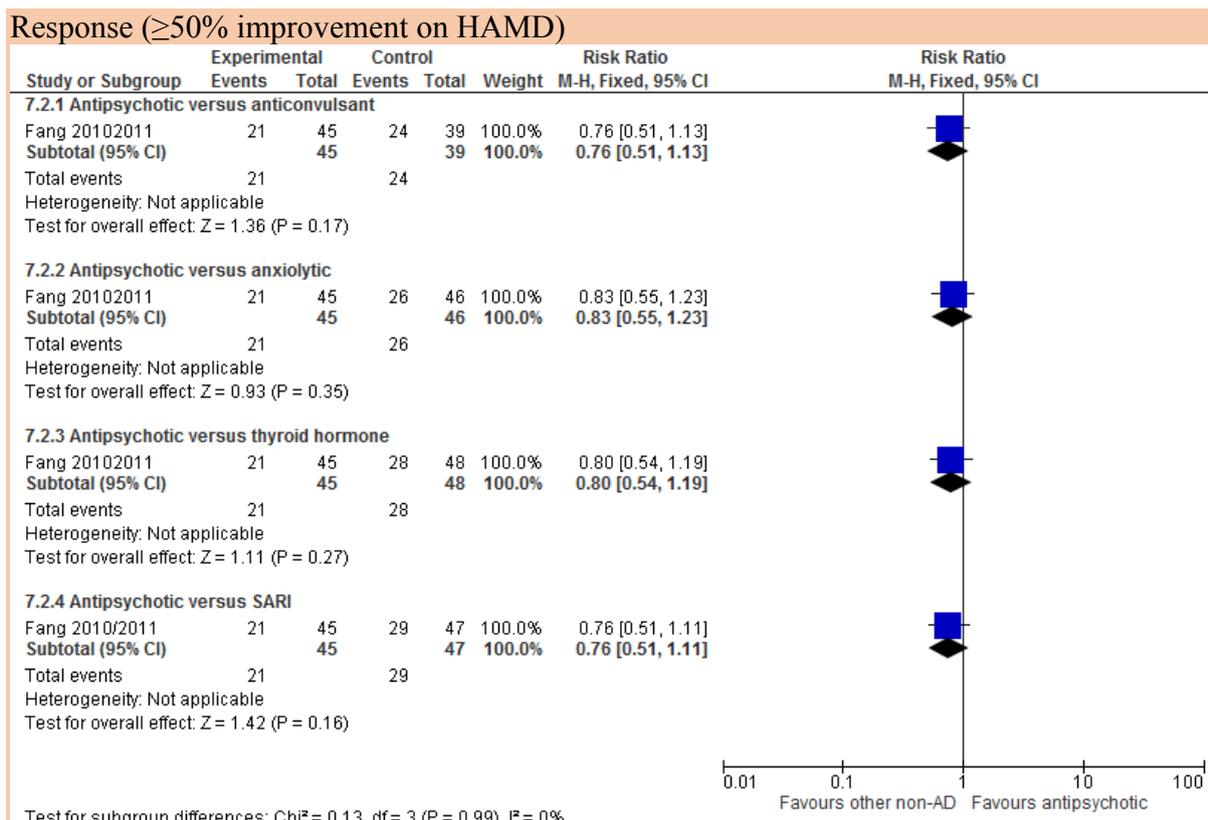
Depression in adults: treatment and management
Forest plots

Augmenting the antidepressant with an antipsychotic compared to 'other' augmentation agents (head-to-head comparisons)

Remission (≤ 7 on HAMD)

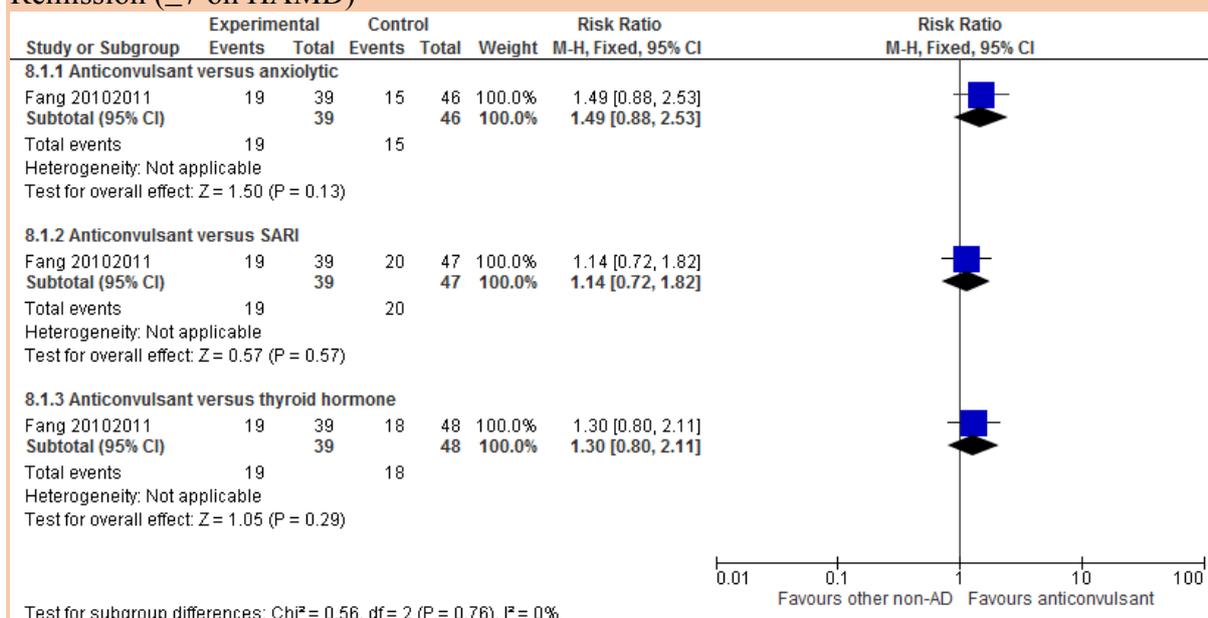


Depression in adults: treatment and management
Forest plots



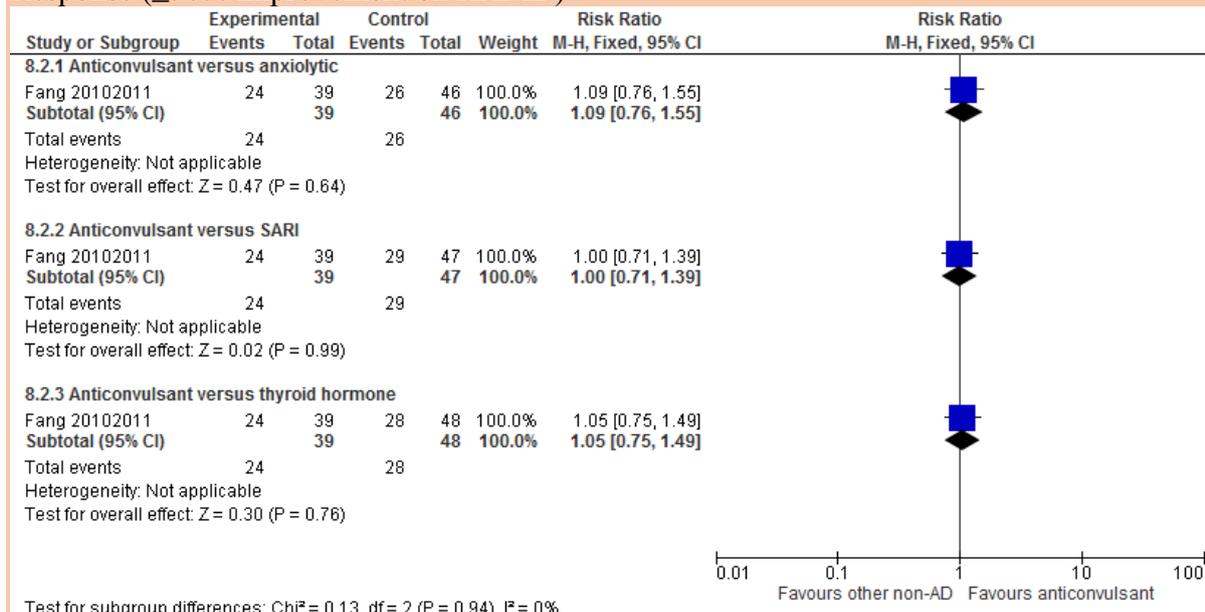
Augmenting the antidepressant with an anticonvulsant compared to 'other' augmentation agents (head-to-head comparisons)

Remission (≤ 7 on HAMD)



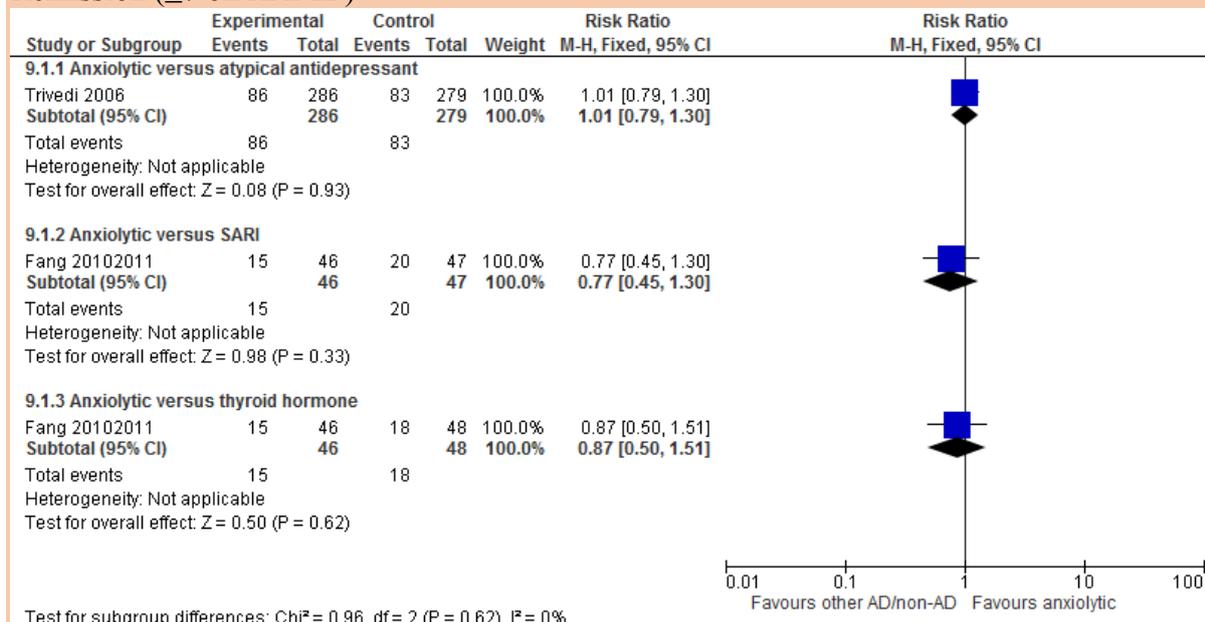
Depression in adults: treatment and management
Forest plots

Response ($\geq 50\%$ improvement on HAMD)



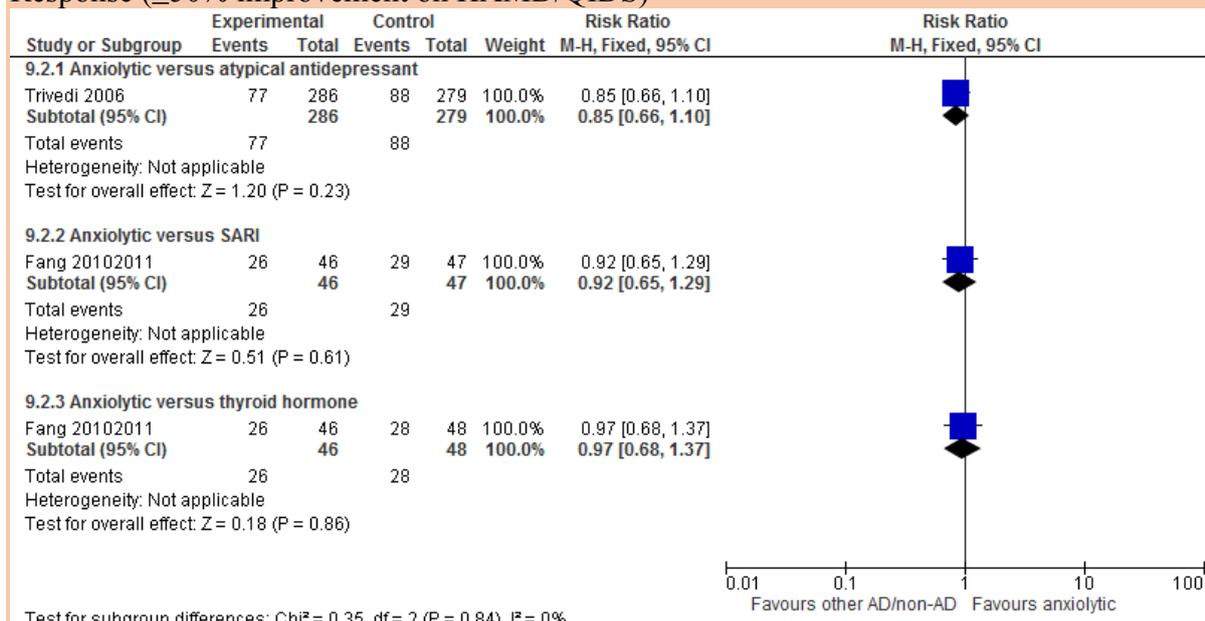
Augmenting the antidepressant with an anxiolytic compared to 'other' augmentation agents (head-to-head comparisons)

Remission (≤ 7 on HAMD)

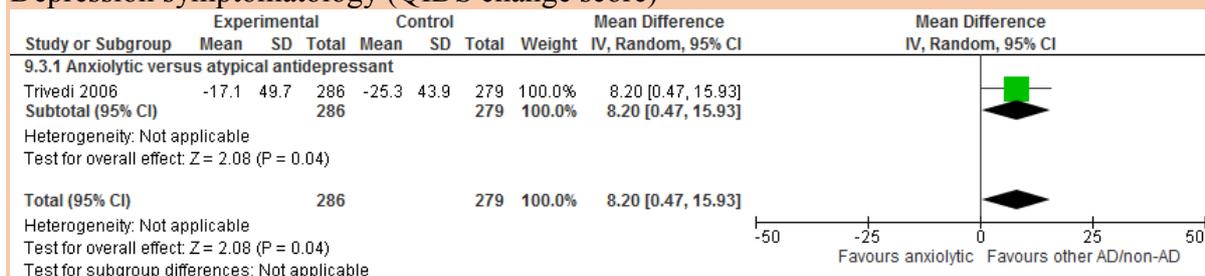


Depression in adults: treatment and management
Forest plots

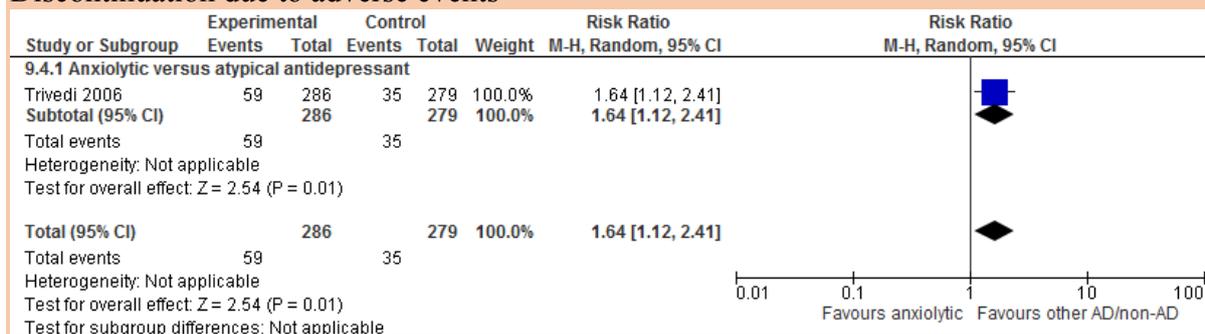
Response ($\geq 50\%$ improvement on HAMD/QIDS)



Depression symptomatology (QIDS change score)



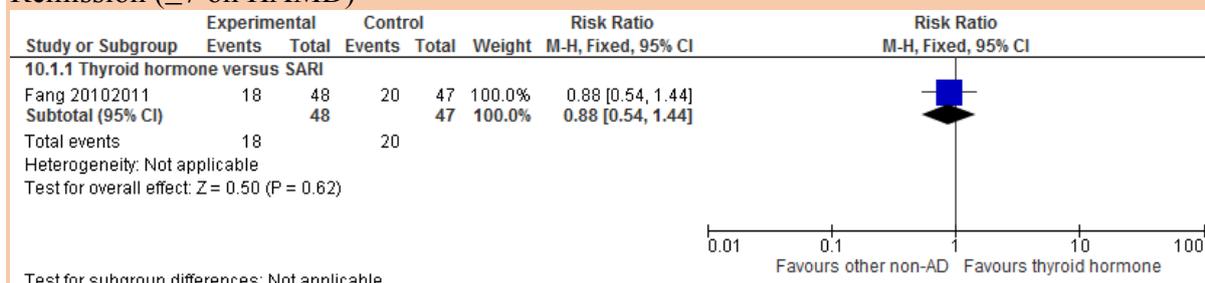
Discontinuation due to adverse events



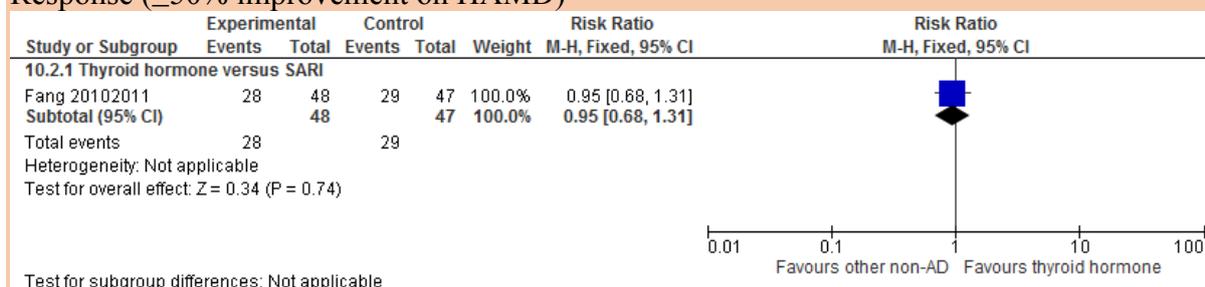
Depression in adults: treatment and management
Forest plots

Augmenting the antidepressant with a thyroid hormone compared to 'other' augmentation agents (head-to-head comparisons)

Remission (≤ 7 on HAMD)

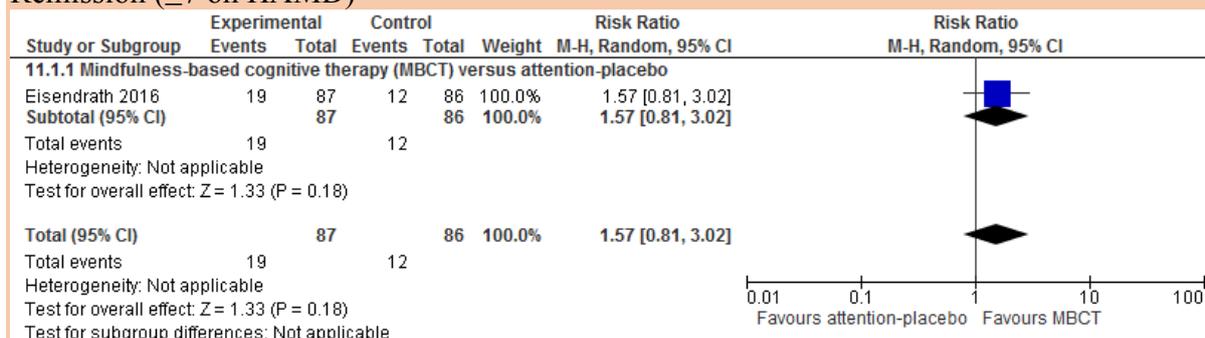


Response ($\geq 50\%$ improvement on HAMD)

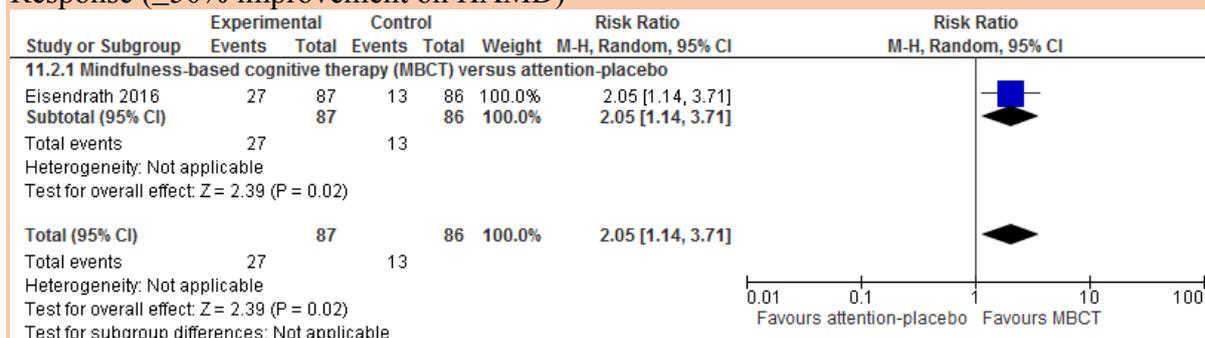


Augmenting the antidepressant with a psychological intervention compared to attention-placebo

Remission (≤ 7 on HAMD)

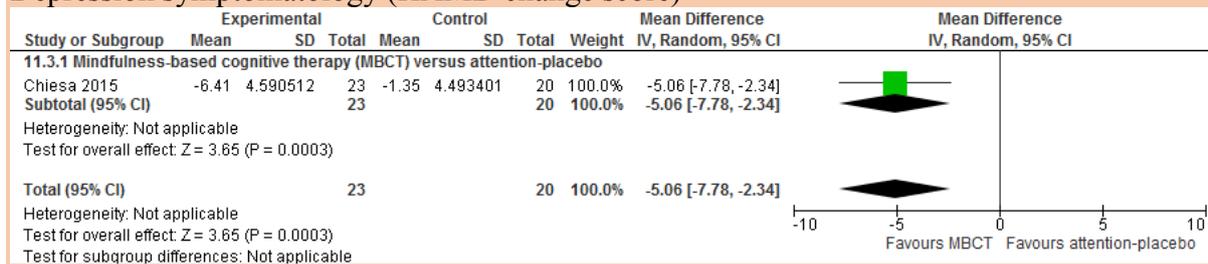


Response ($\geq 50\%$ improvement on HAMD)

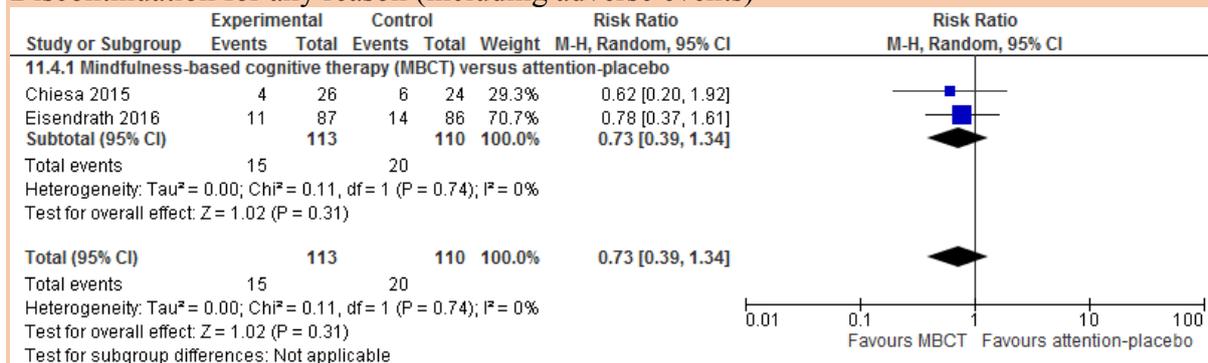


Depression in adults: treatment and management
Forest plots

Depression symptomatology (HAMD change score)



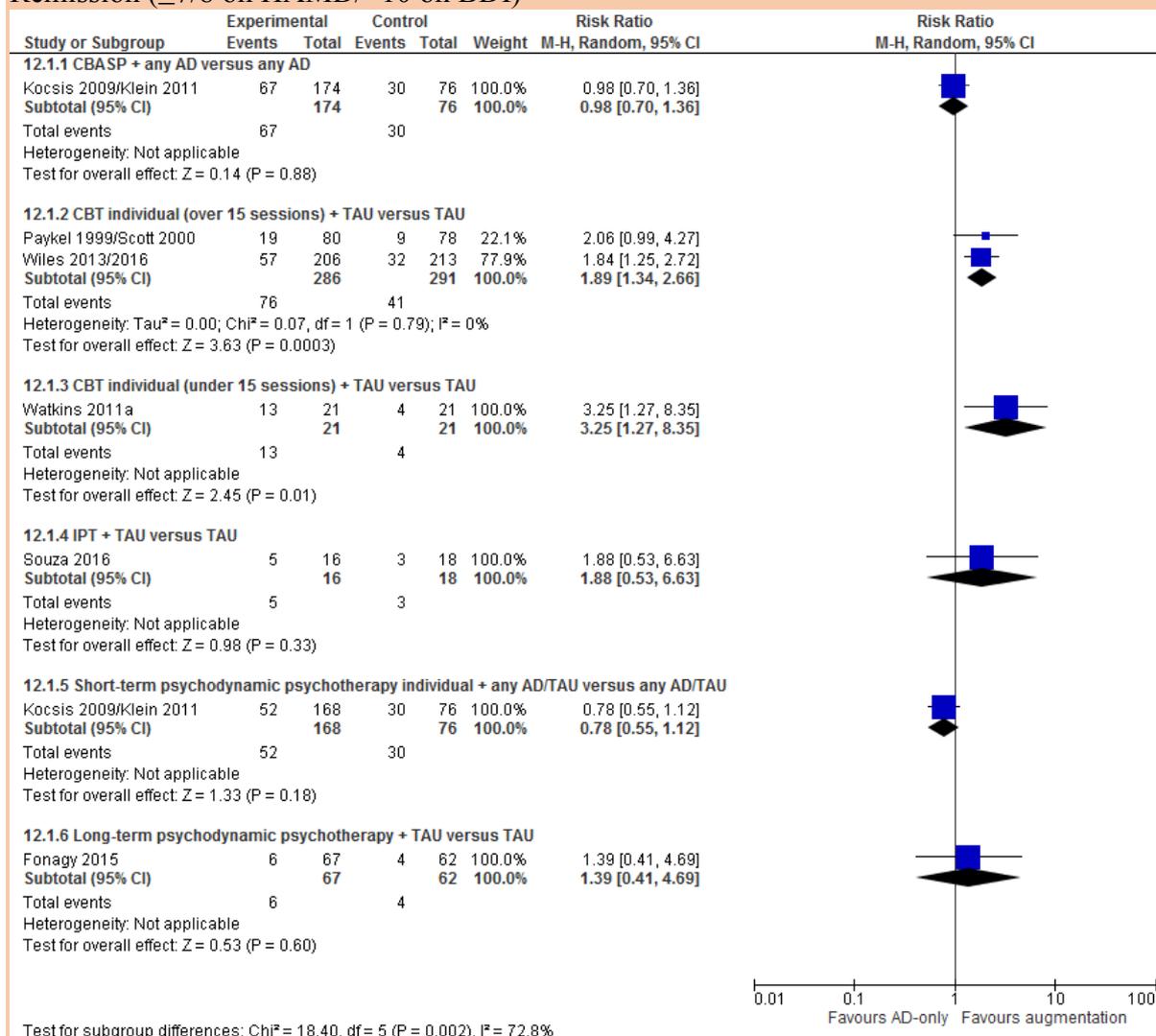
Discontinuation for any reason (including adverse events)



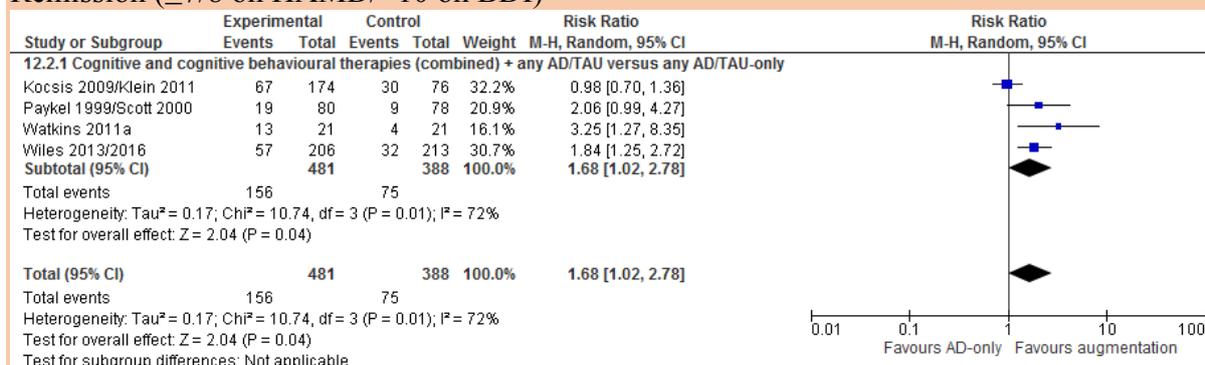
Depression in adults: treatment and management
Forest plots

Augmenting the antidepressant with a psychological intervention compared to continuing with the antidepressant-only

Remission ($\leq 7/8$ on HAMD/ <10 on BDI)



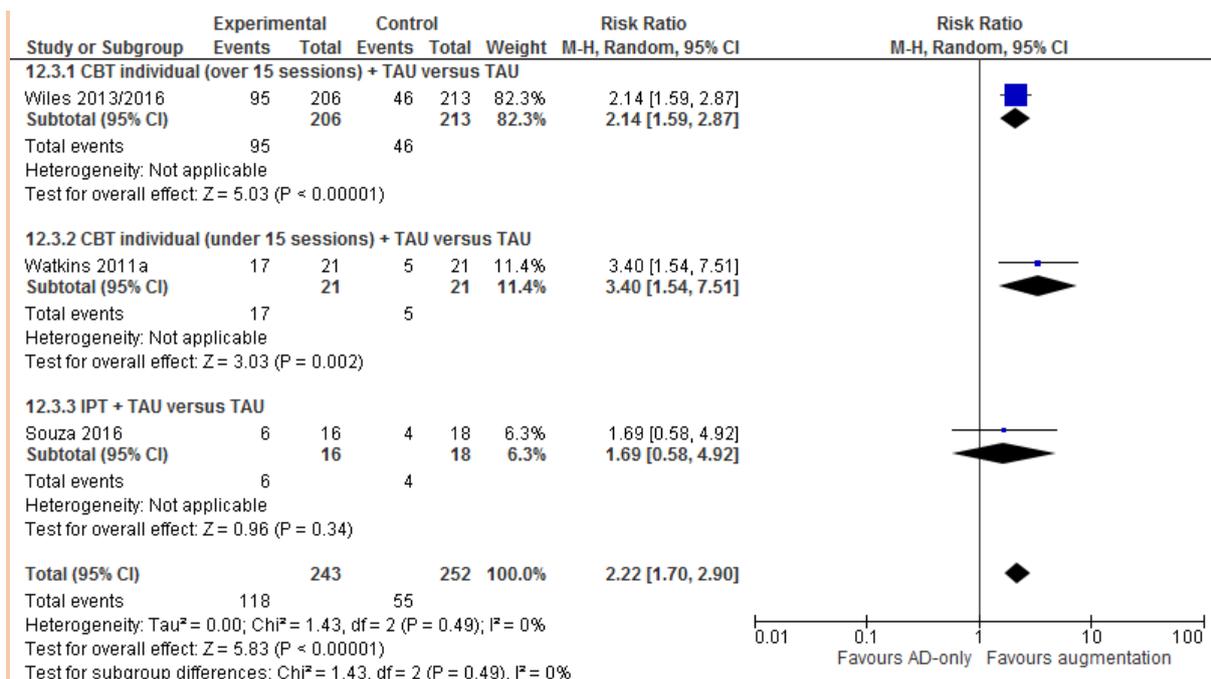
Remission ($\leq 7/8$ on HAMD/ <10 on BDI)



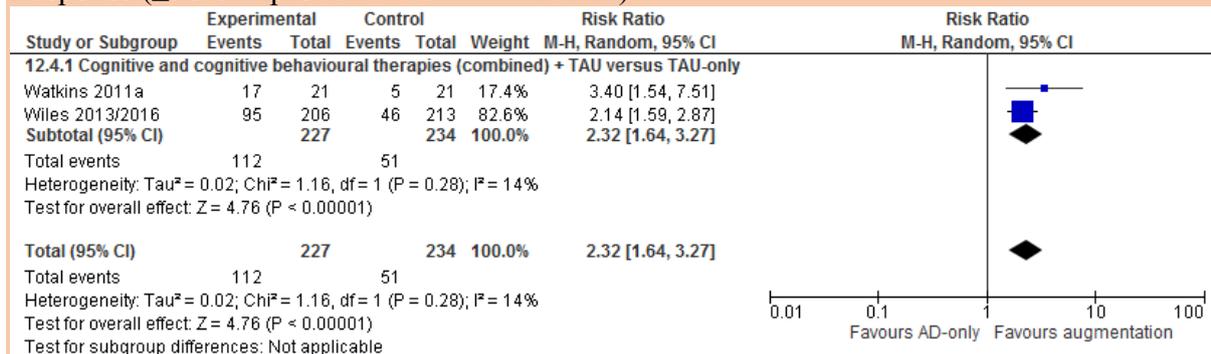
Response ($\geq 50\%$ improvement on HAMD/BDI)

Depression in adults: treatment and management

Forest plots



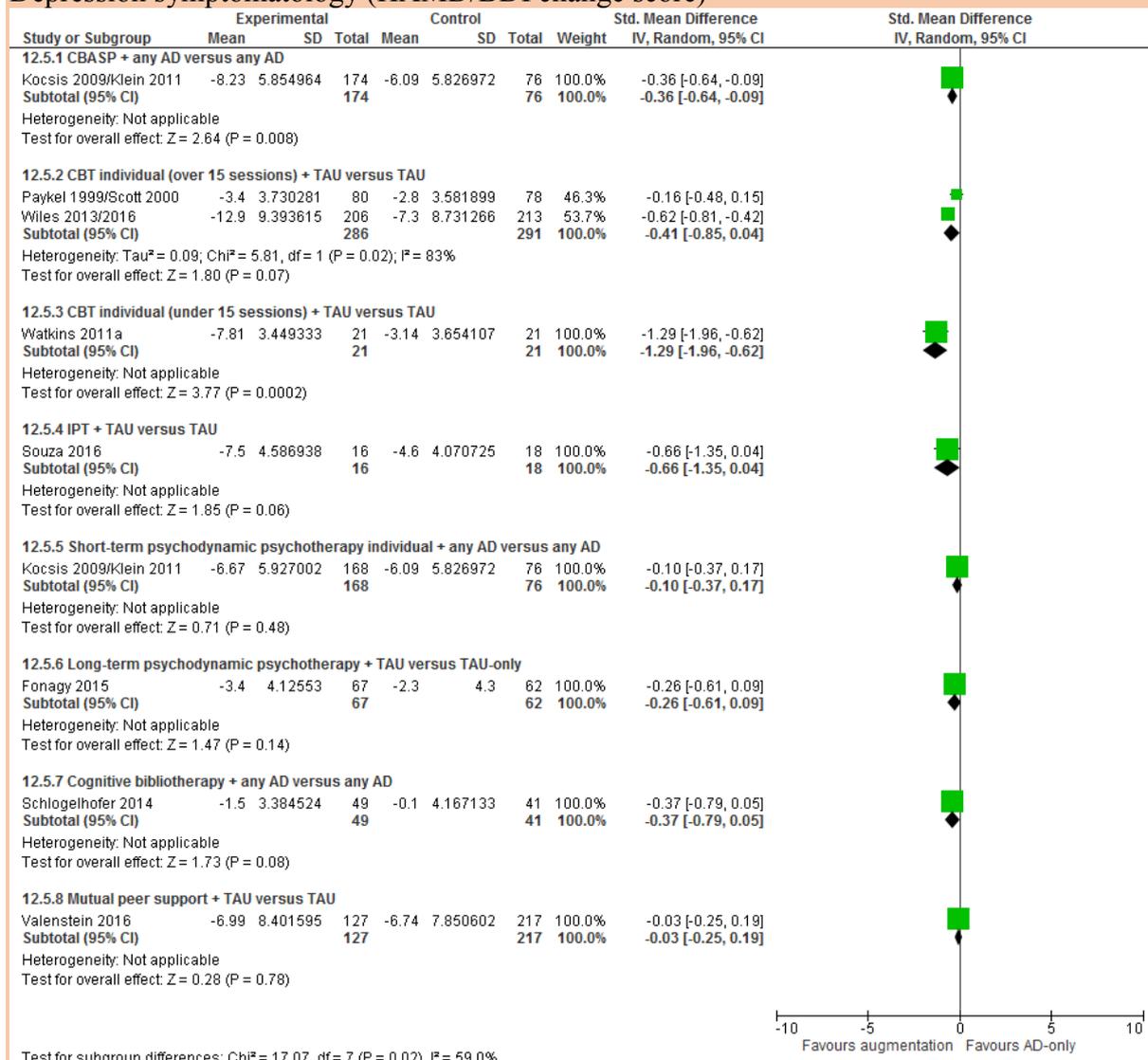
Response (≥50% improvement on HAMD/BDI)



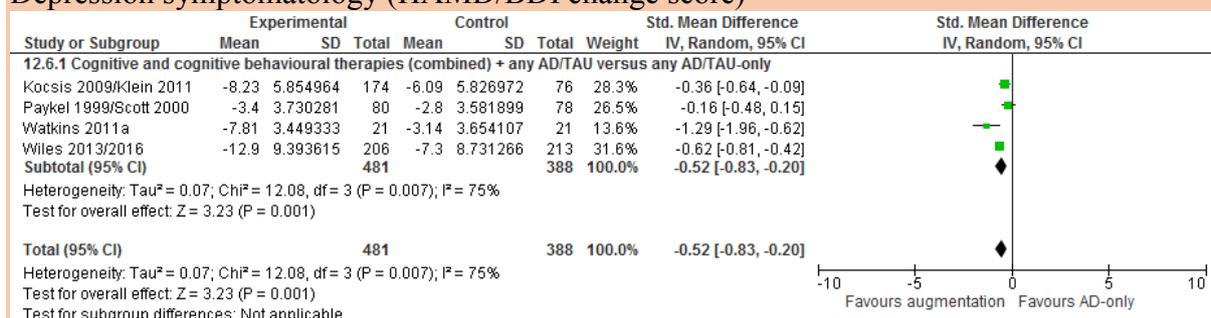
Depression in adults: treatment and management

Forest plots

Depression symptomatology (HAMD/BDI change score)

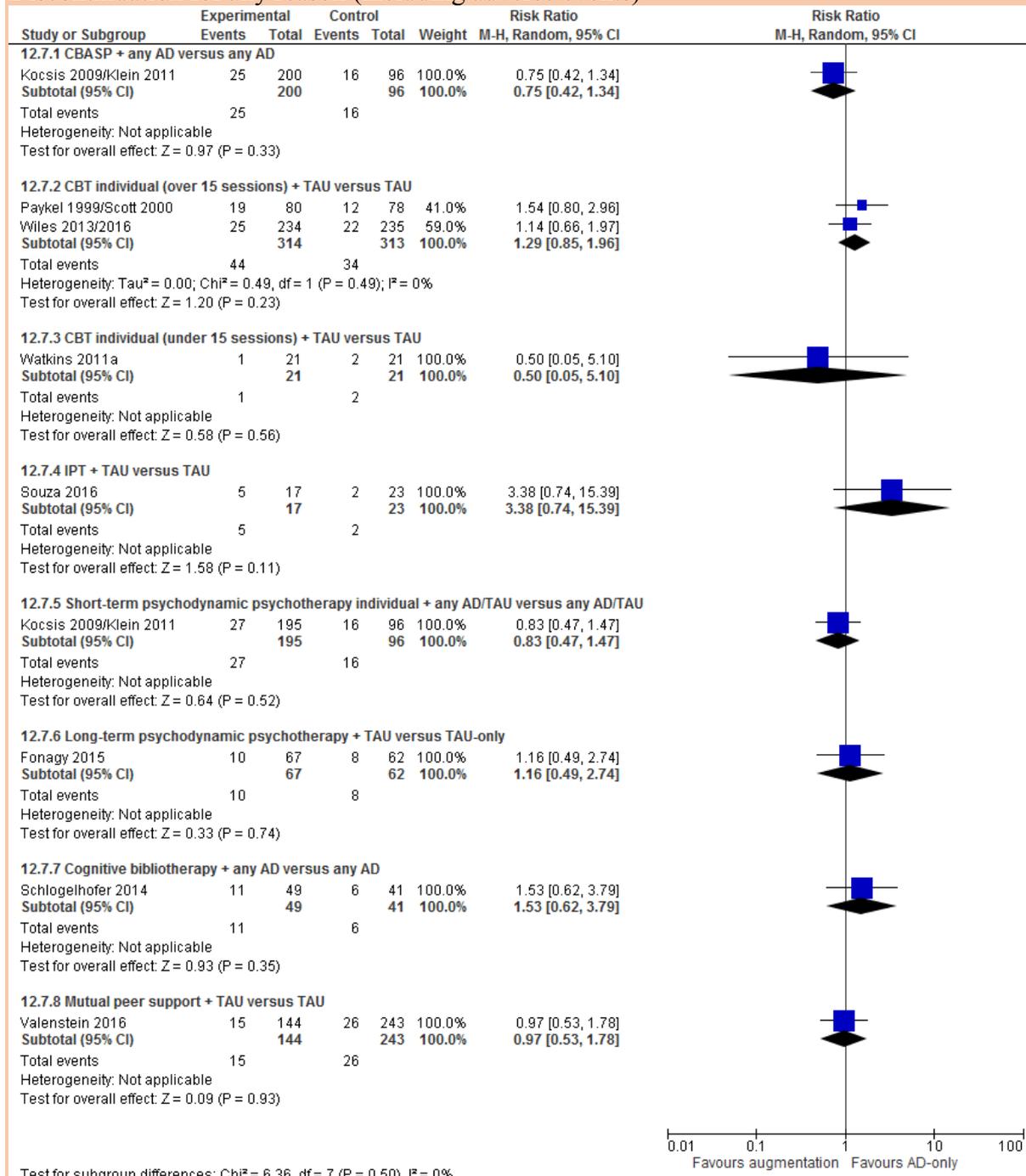


Depression symptomatology (HAMD/BDI change score)



Depression in adults: treatment and management
Forest plots

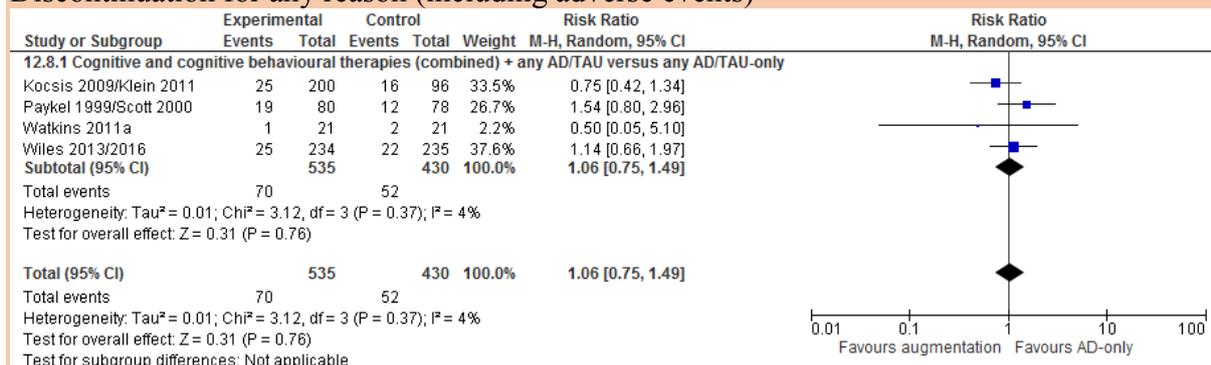
Discontinuation for any reason (including adverse events)



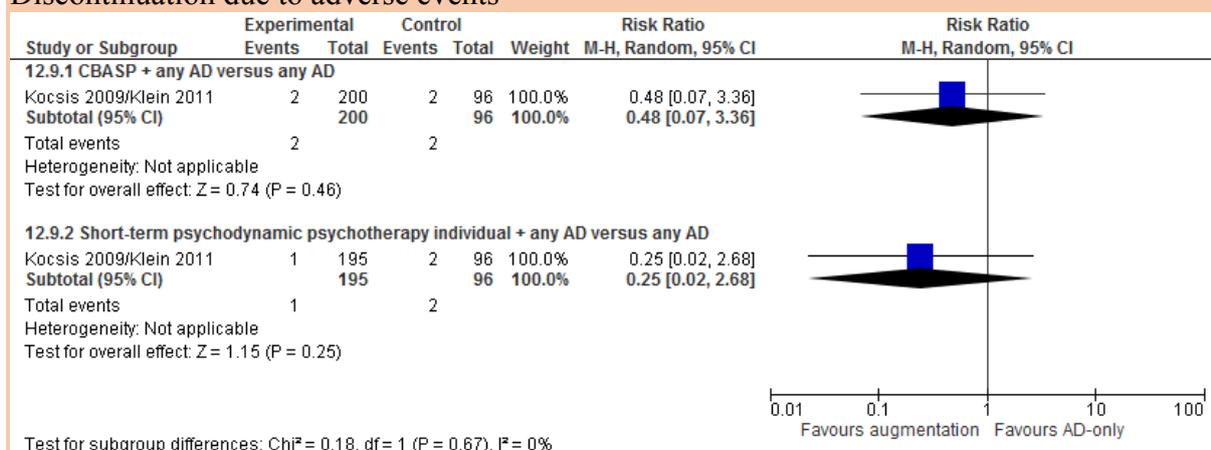
Depression in adults: treatment and management

Forest plots

Discontinuation for any reason (including adverse events)

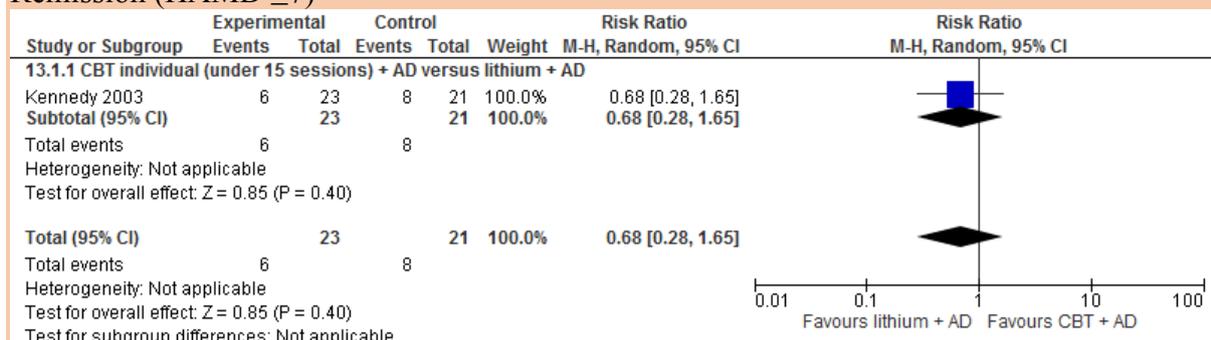


Discontinuation due to adverse events



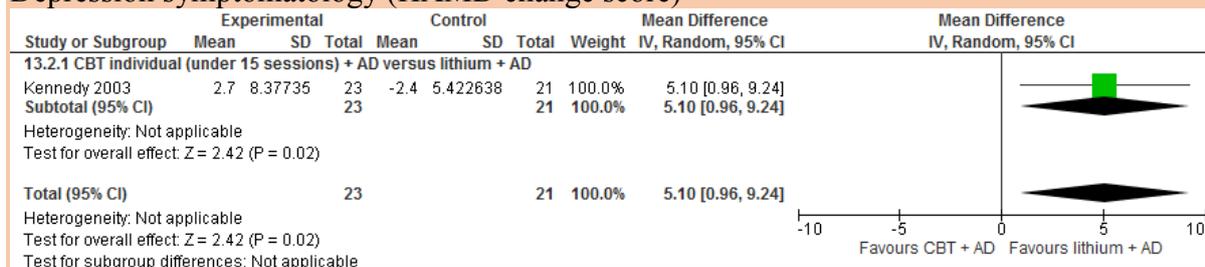
Augmenting the antidepressant with a psychological intervention compared to augmenting with a non-antidepressant agent

Remission (HAMD ≤ 7)

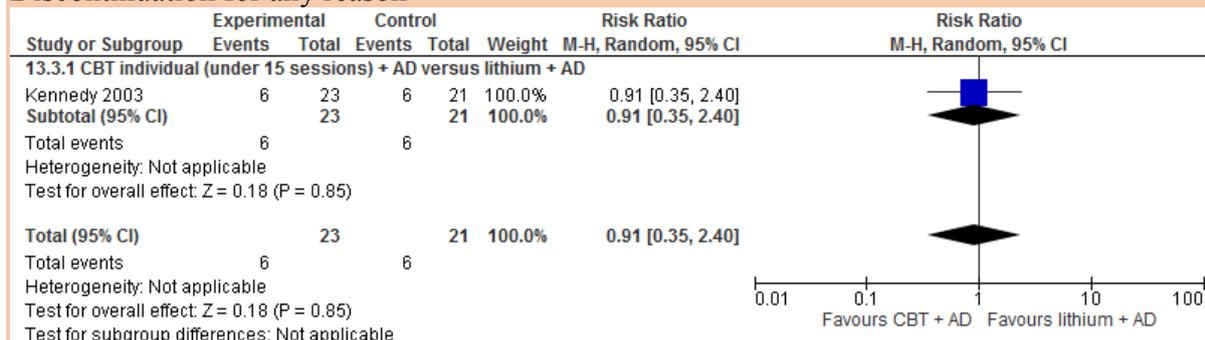


Depression in adults: treatment and management
Forest plots

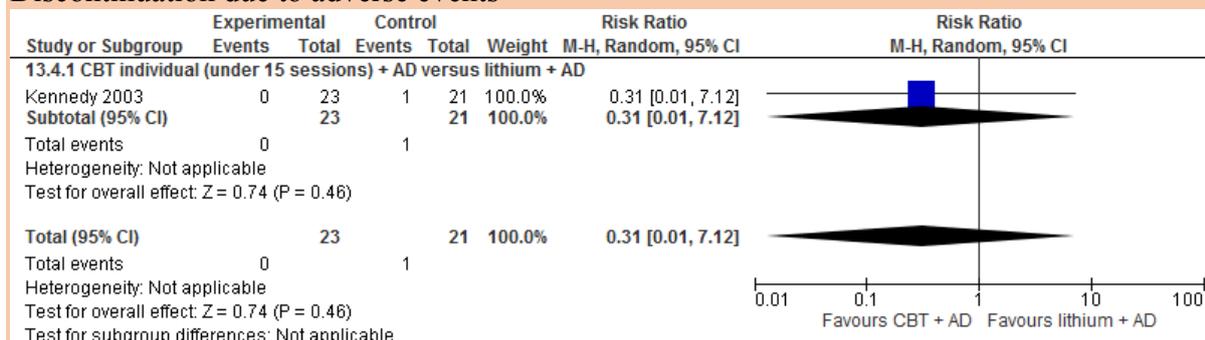
Depression symptomatology (HAMD change score)



Discontinuation for any reason

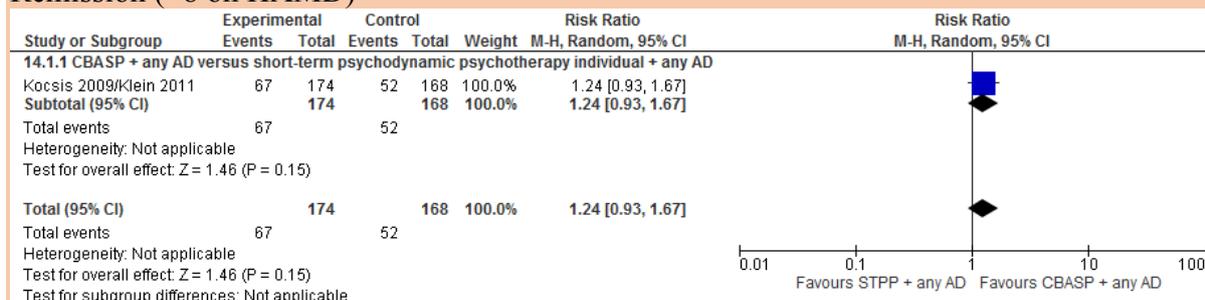


Discontinuation due to adverse events



Augmenting the antidepressant with a psychological intervention compared to 'other' psychological intervention (head-to-head comparisons)

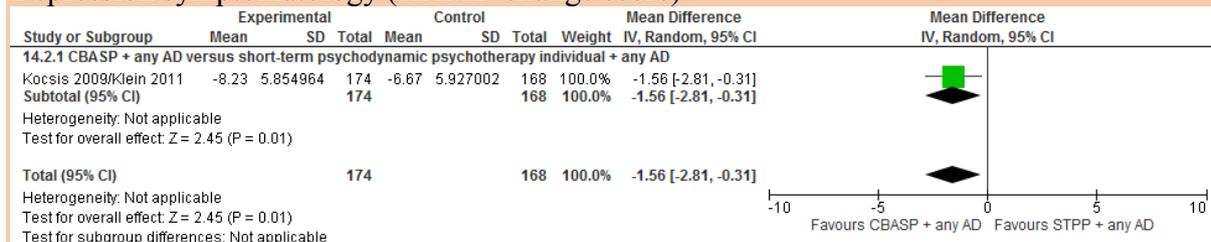
Remission (<8 on HAMD)



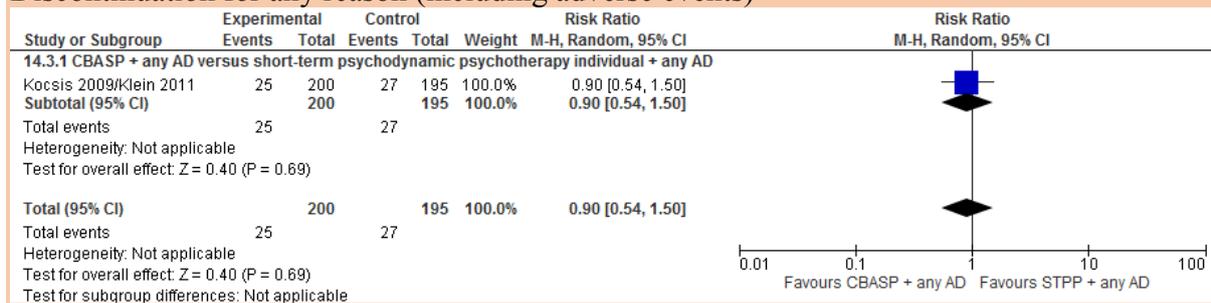
Depression in adults: treatment and management

Forest plots

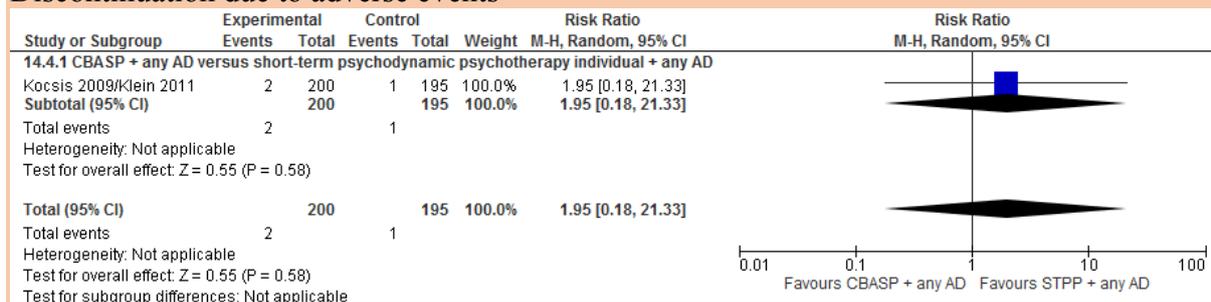
Depression symptomatology (HAMD change score)



Discontinuation for any reason (including adverse events)



Discontinuation due to adverse events

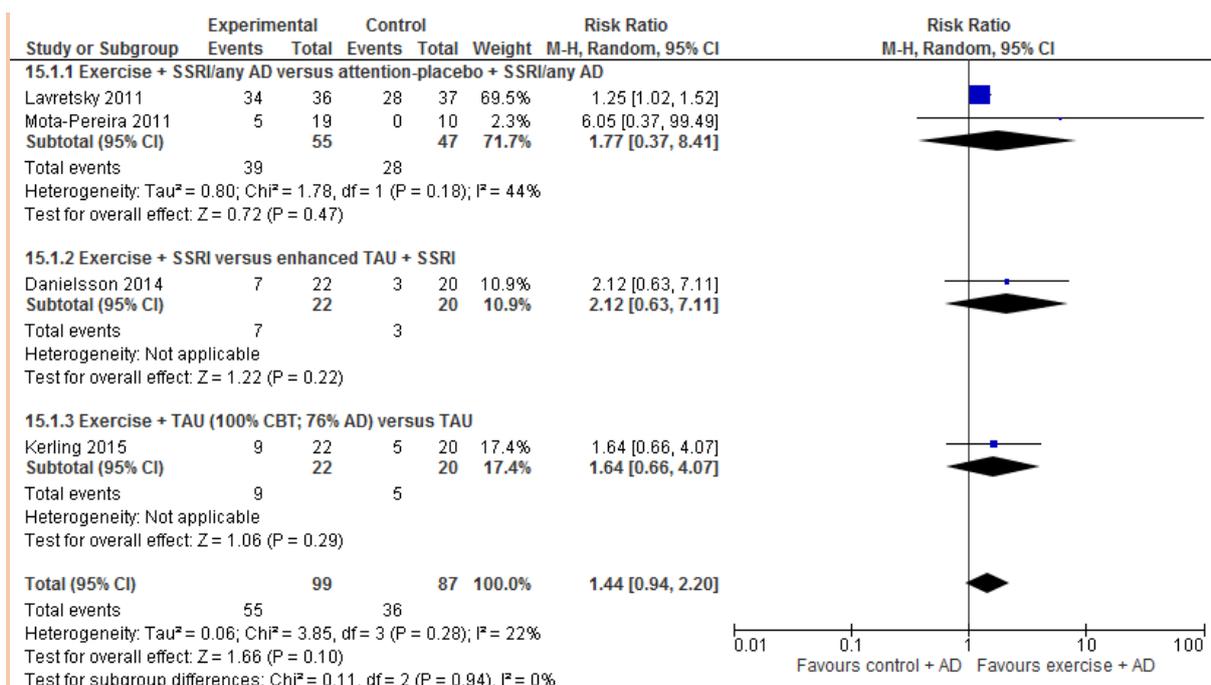


Augmenting the antidepressant/standard treatment with exercise compared to control

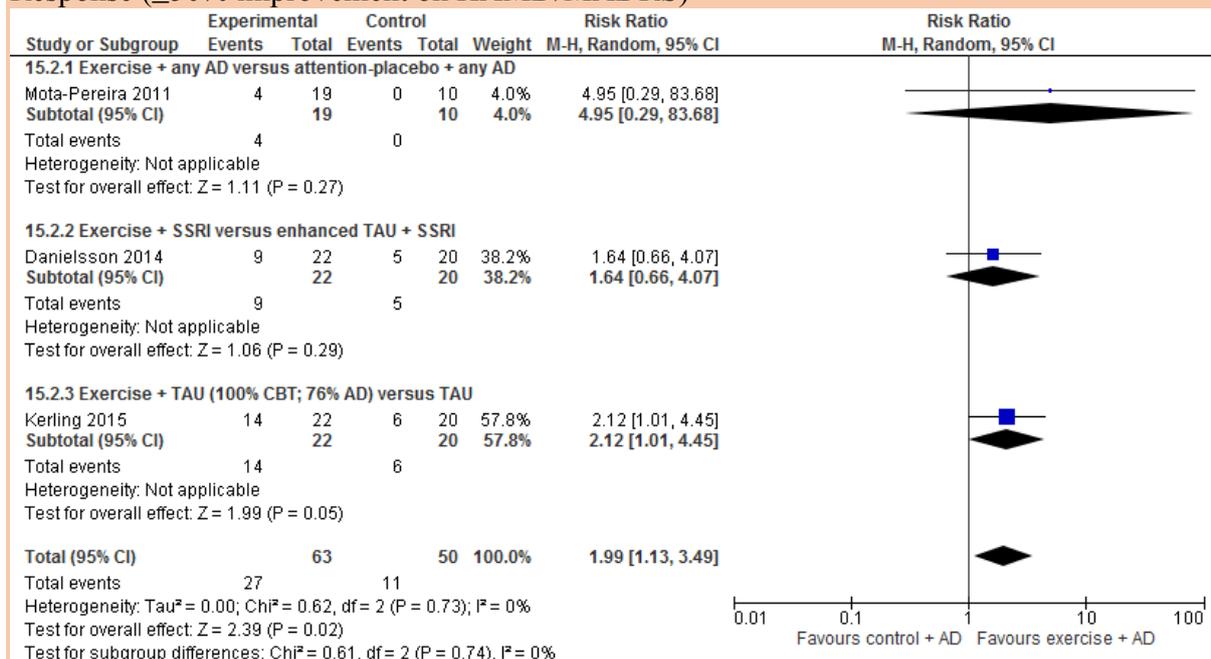
Remission ($\leq 7/10$ on HAMD/ ≤ 10 on MADRS & $\geq 50\%$ improvement)

Depression in adults: treatment and management

Forest plots



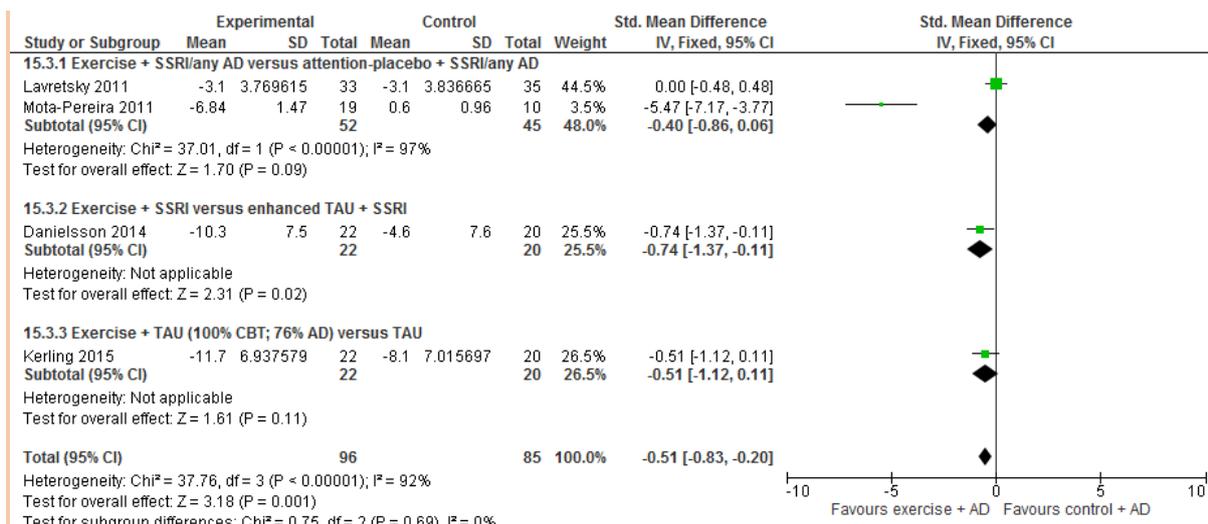
Response ($\geq 50\%$ improvement on HAMD/MADRS)



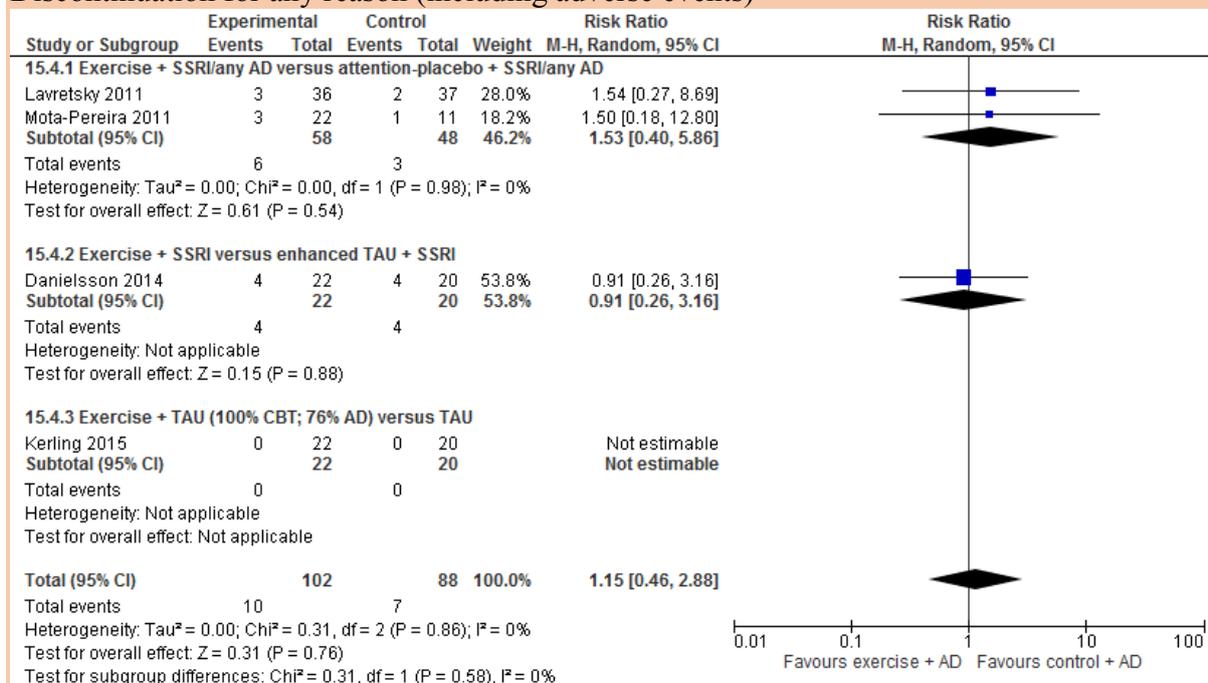
Depression symptomatology (HAMD/MADRS change score)

Depression in adults: treatment and management

Forest plots

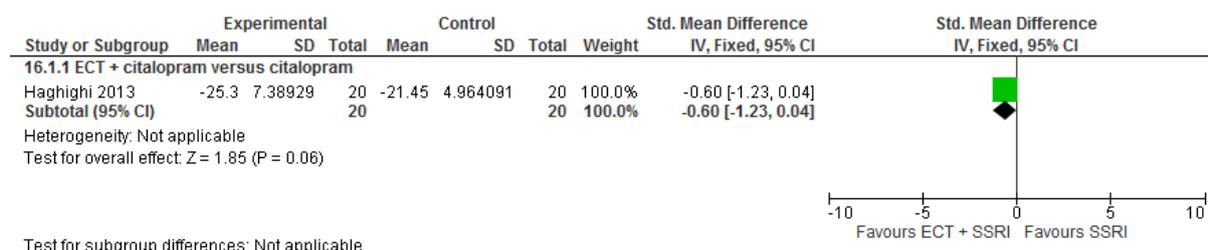


Discontinuation for any reason (including adverse events)



Augmenting the antidepressant with ECT compared to continuing with the antidepressant only

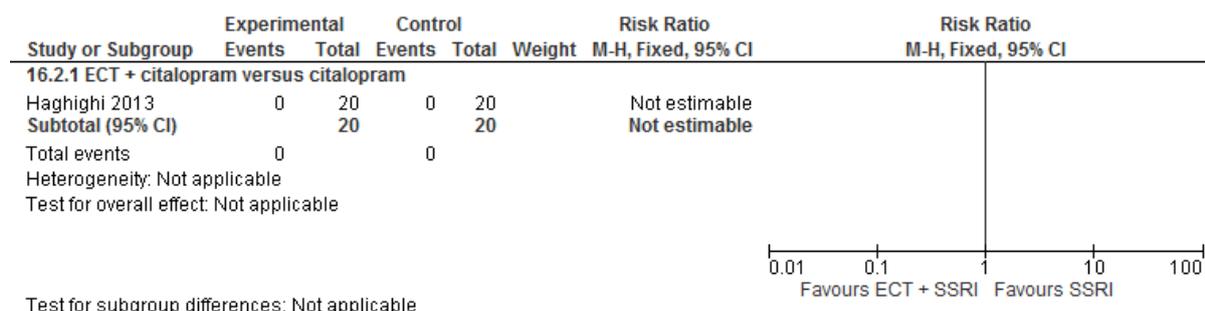
Depression symptomatology (HAMD change score)



Discontinuation for any reason (including adverse events)

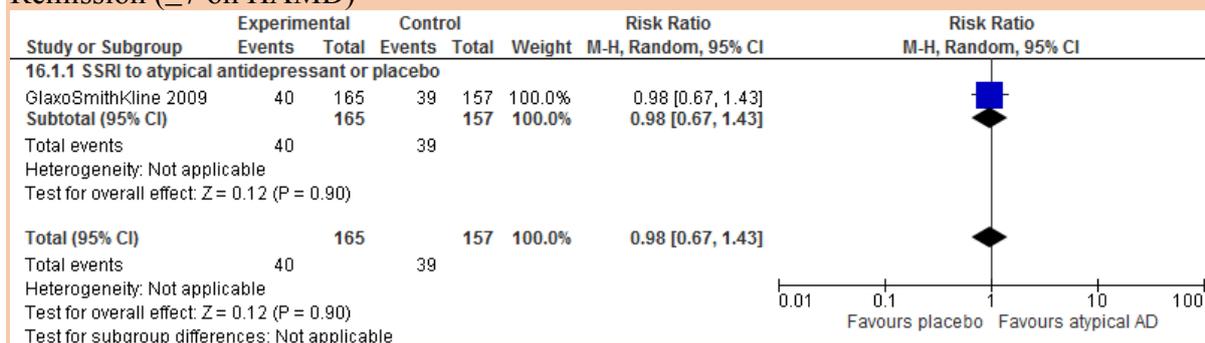
Depression in adults: treatment and management

Forest plots

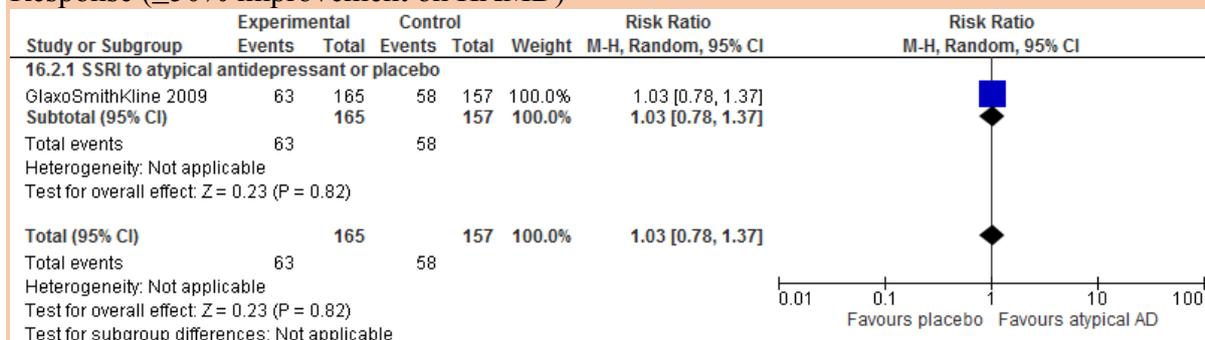


Switching to another antidepressant of a different class compared to placebo

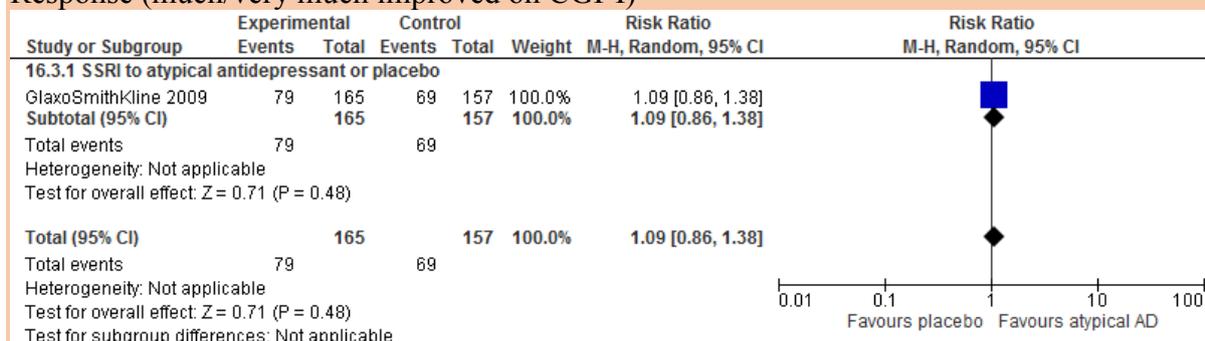
Remission (≤ 7 on HAMD)



Response ($\geq 50\%$ improvement on HAMD)



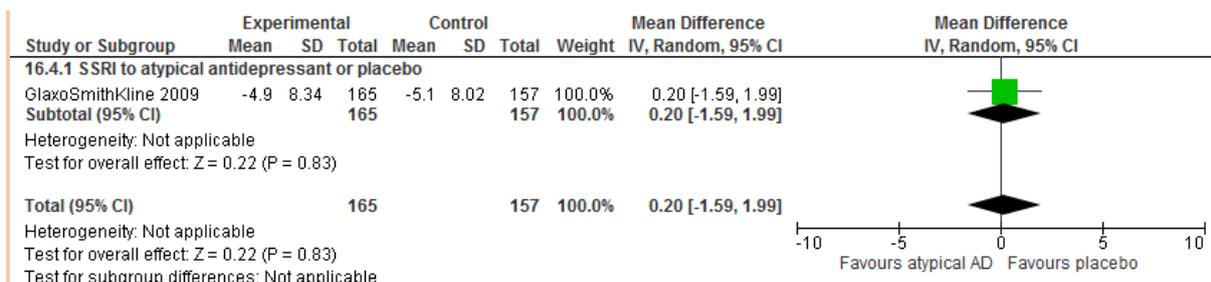
Response (much/very much improved on CGI-I)



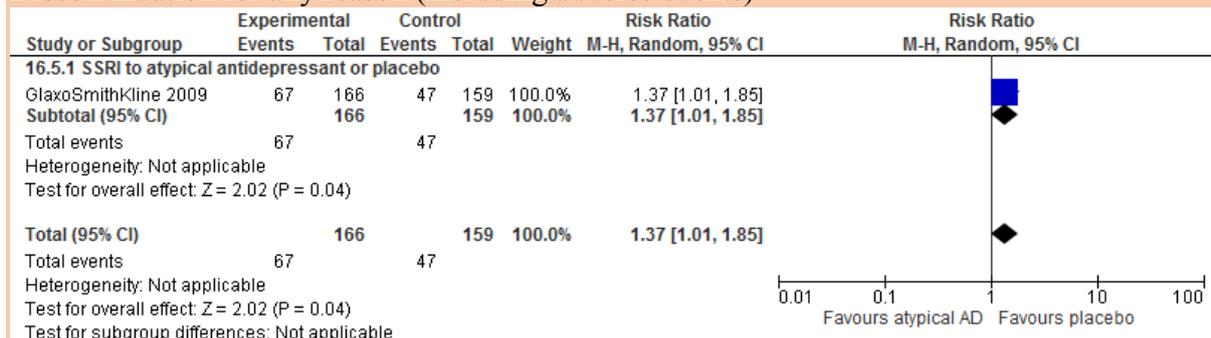
Depression symptomatology (HAMD change score)

Depression in adults: treatment and management

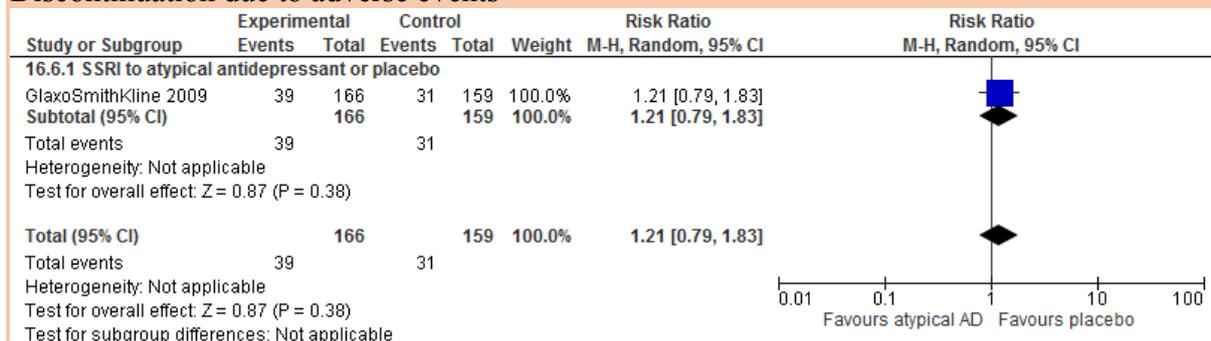
Forest plots



Discontinuation for any reason (including adverse events)



Discontinuation due to adverse events

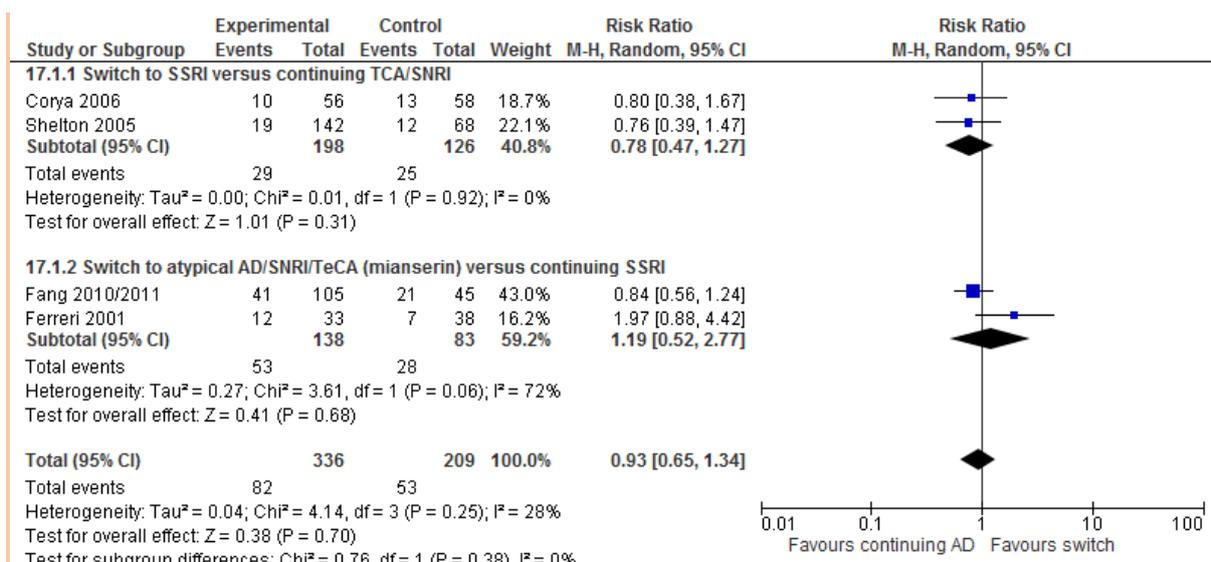


Switching to another antidepressant of a different class compared to continuing with the same antidepressant

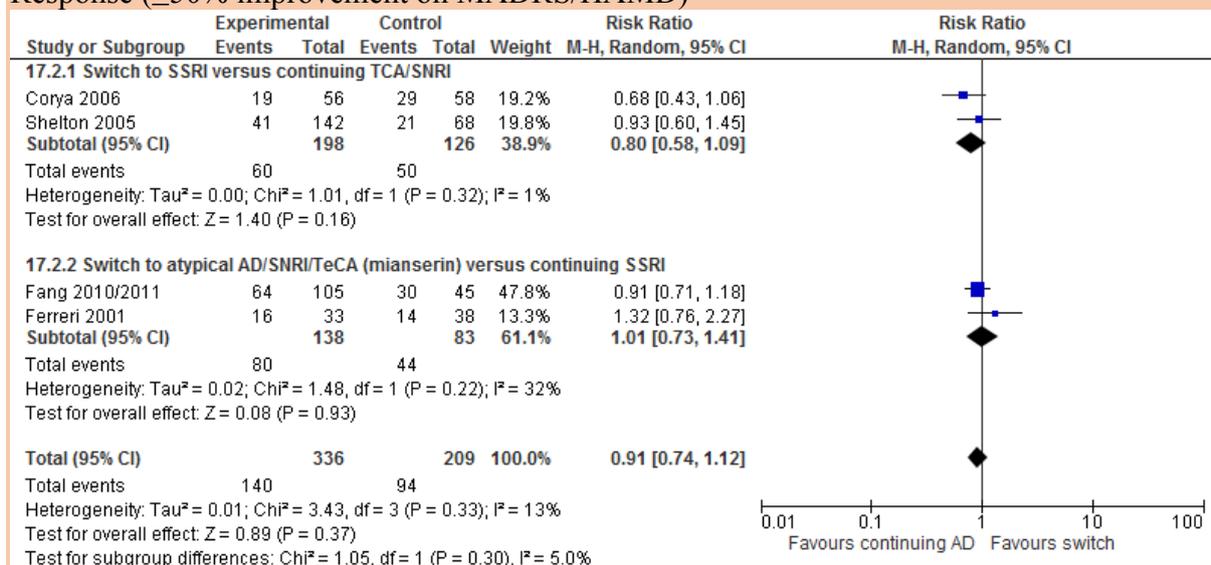
Remission ($\leq 8/10$ on MADRS/ $\leq 7/8$ on HAMD)

Depression in adults: treatment and management

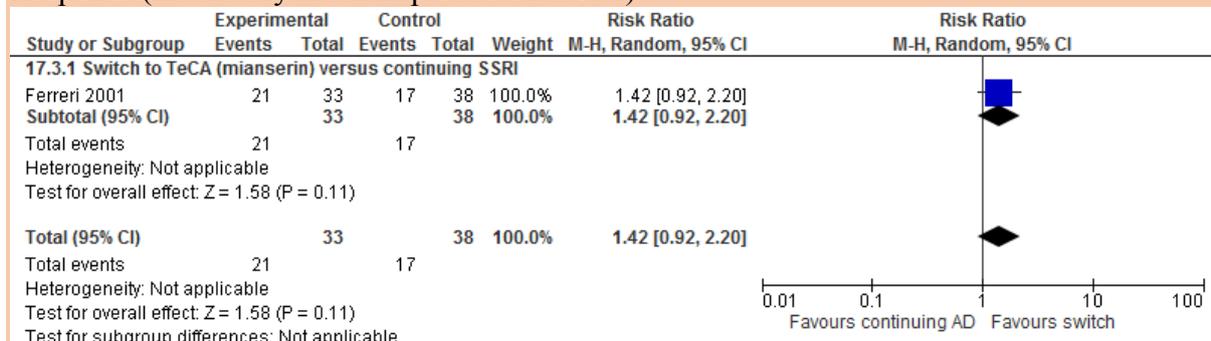
Forest plots



Response ($\geq 50\%$ improvement on MADRS/HAMD)



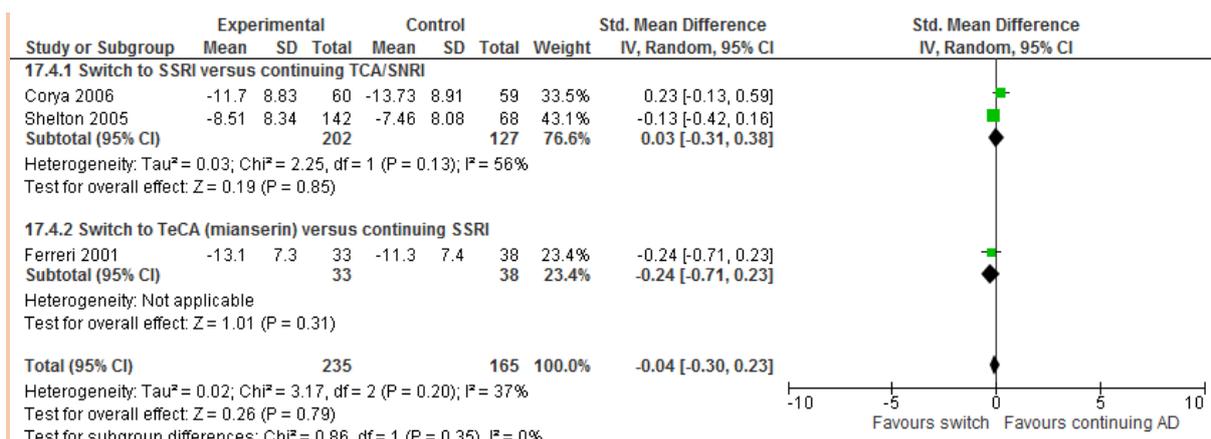
Response (much/very much improved on CGI-I)



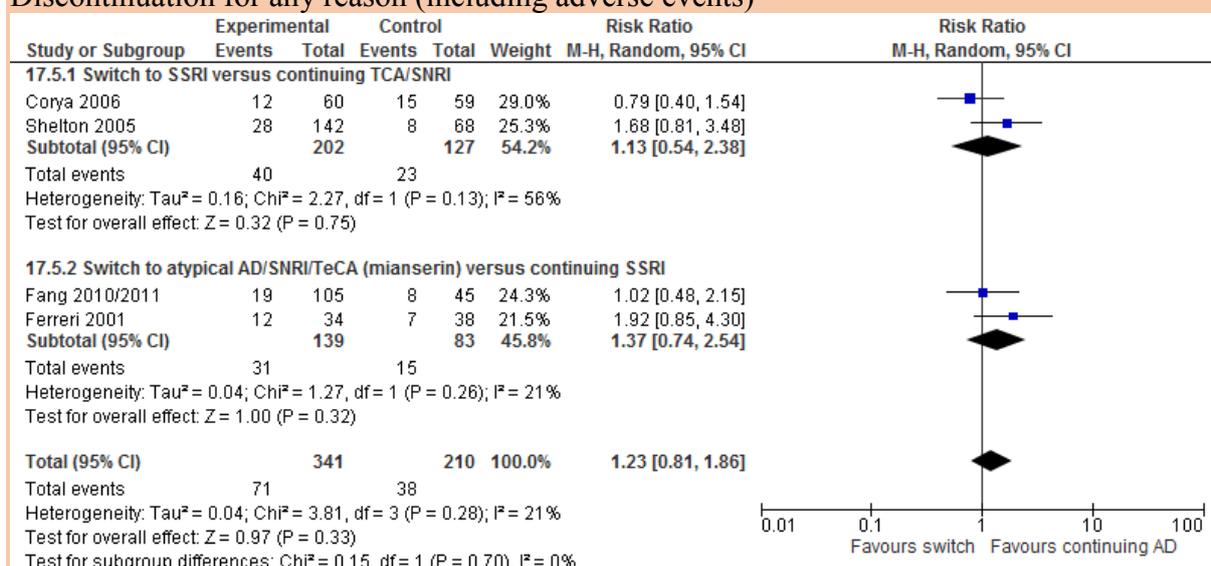
Depression symptomatology (MADRS/HAMD change score)

Depression in adults: treatment and management

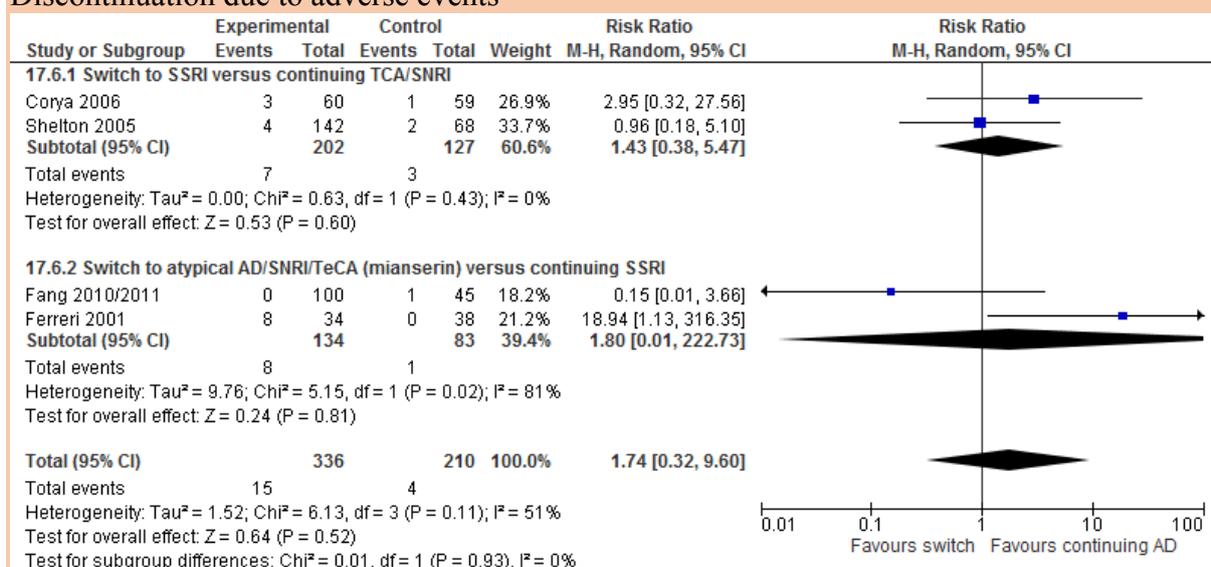
Forest plots



Discontinuation for any reason (including adverse events)



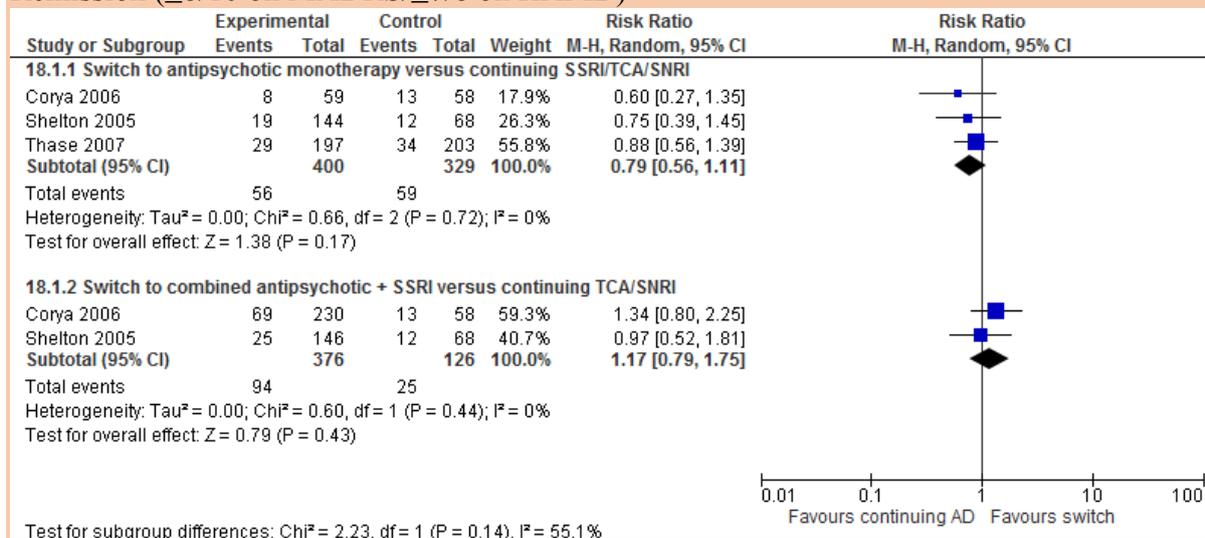
Discontinuation due to adverse events



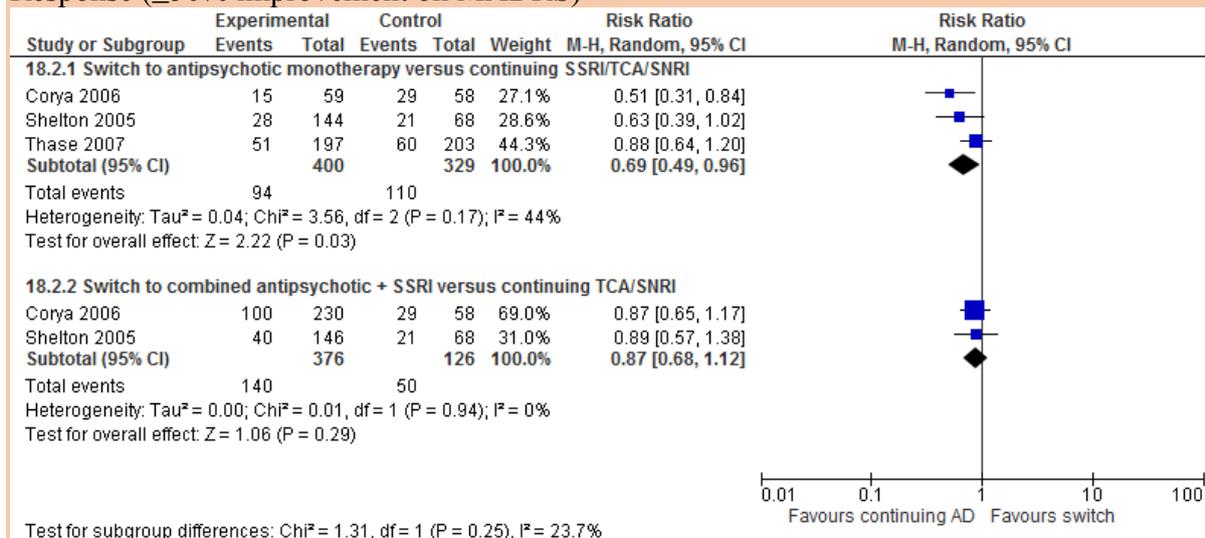
Depression in adults: treatment and management
Forest plots

Switching to a non-antidepressant agent compared to continuing with the antidepressant

Remission ($\leq 8/10$ on MADRS/ $\leq 7/8$ on HAMD)



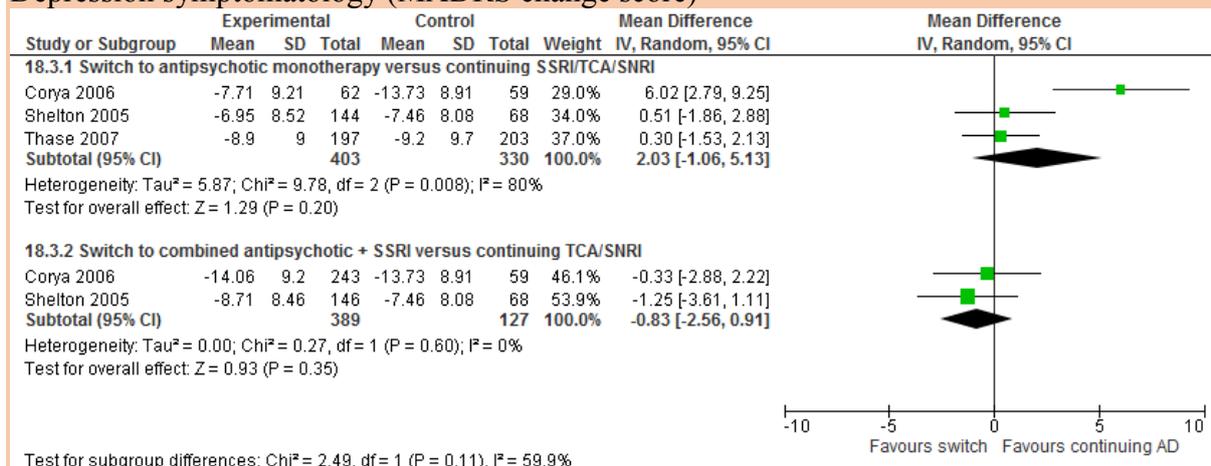
Response ($\geq 50\%$ improvement on MADRS)



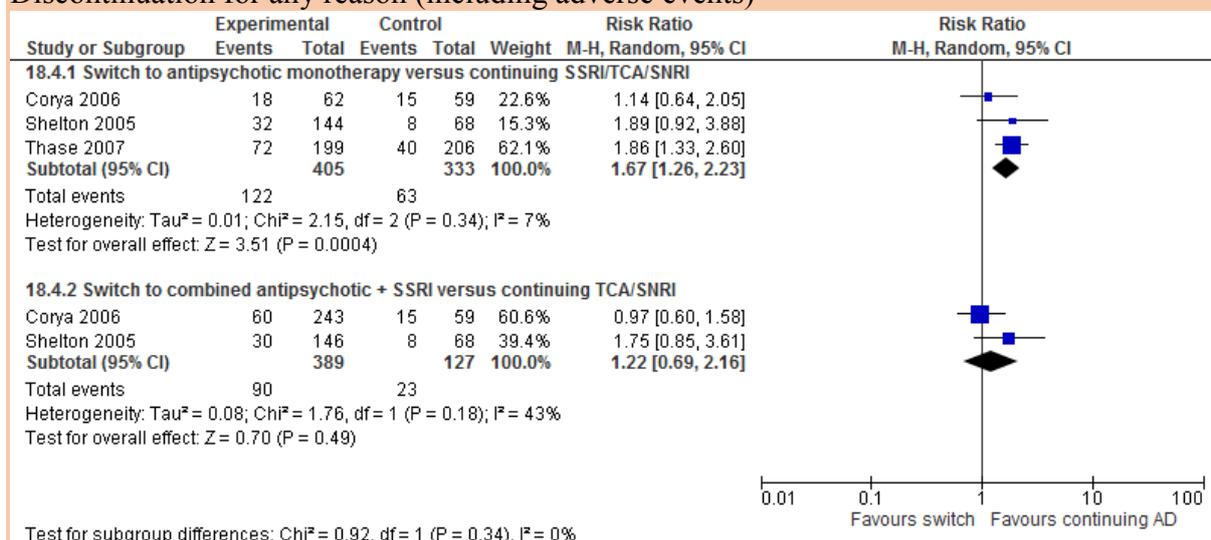
Depression in adults: treatment and management

Forest plots

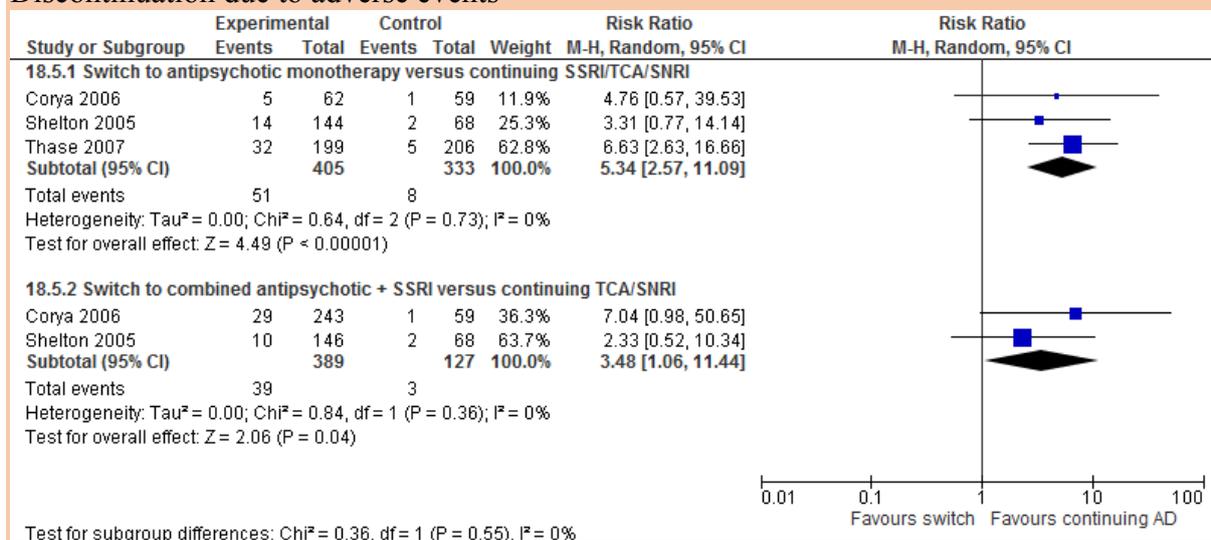
Depression symptomatology (MADRS change score)



Discontinuation for any reason (including adverse events)



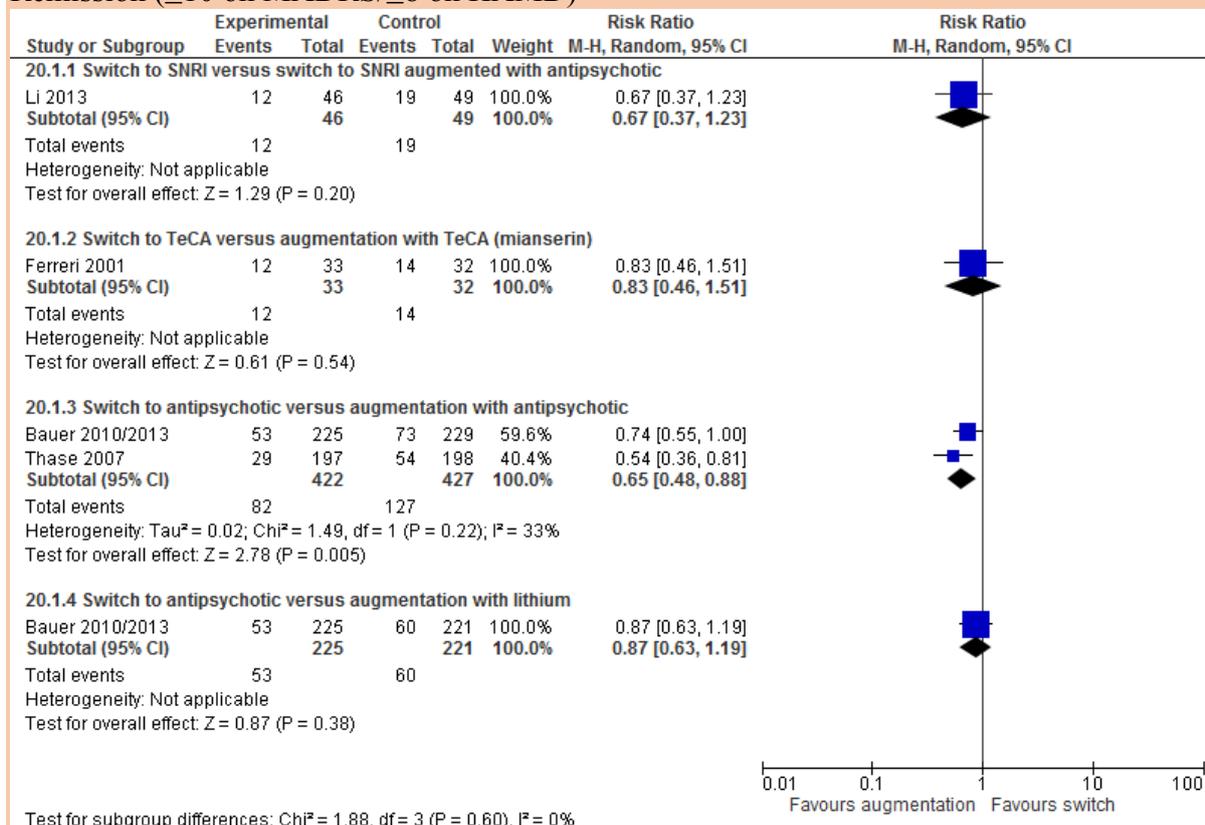
Discontinuation due to adverse events



Depression in adults: treatment and management
Forest plots

Switching to another antidepressant or non-antidepressant agent compared to augmenting with another antidepressant or non-antidepressant agent

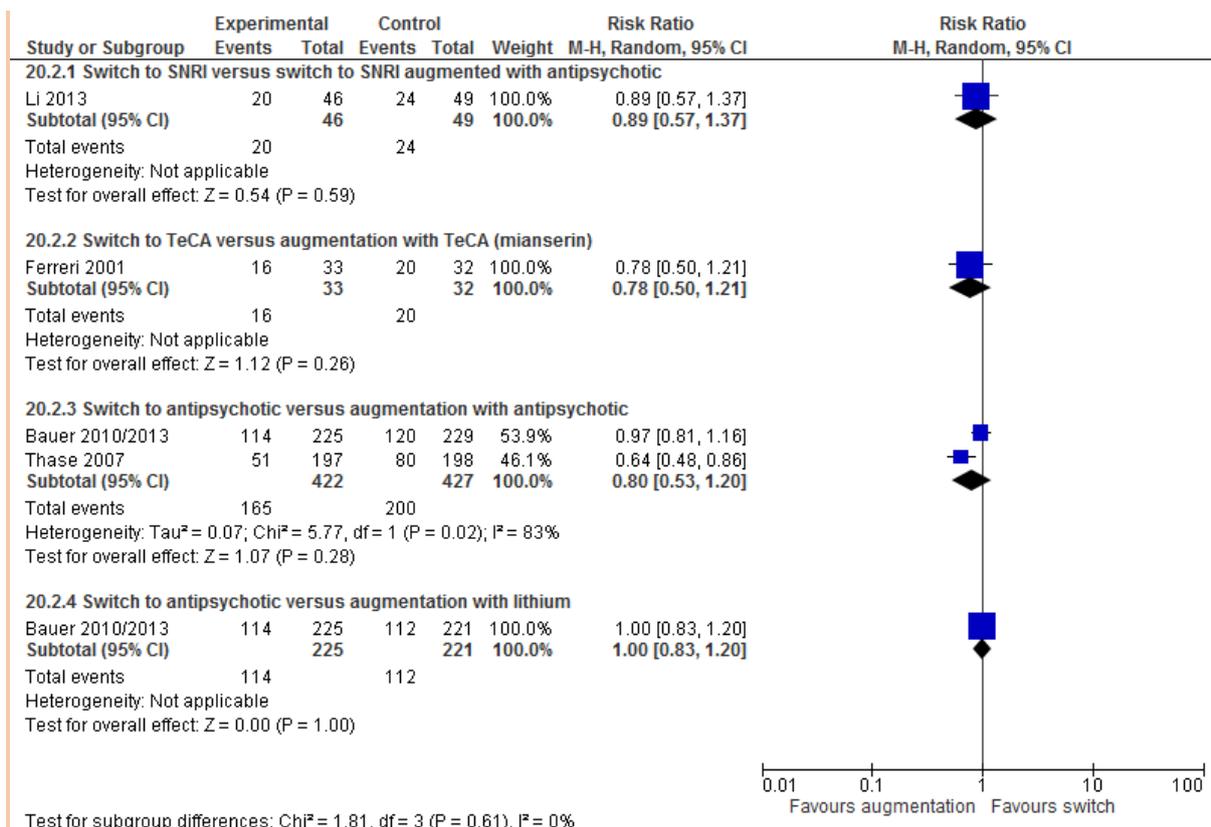
Remission (≤ 10 on MADRS/ ≤ 8 on HAMD)



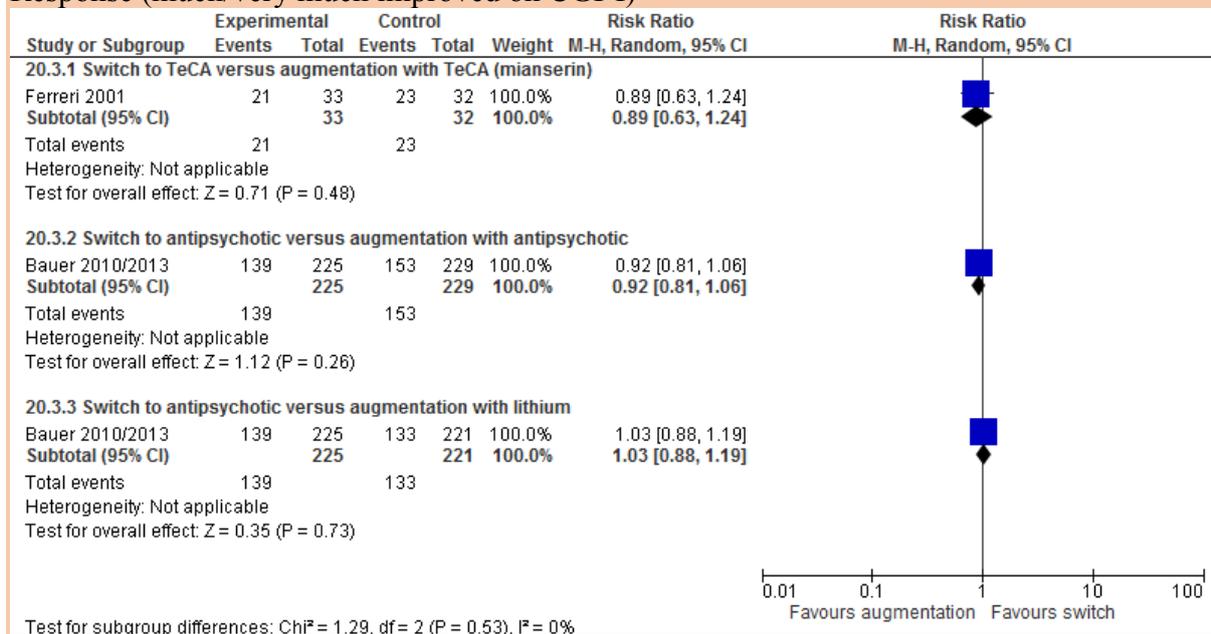
Response ($\geq 50\%$ improvement on MADRS/HAMD)

Depression in adults: treatment and management

Forest plots



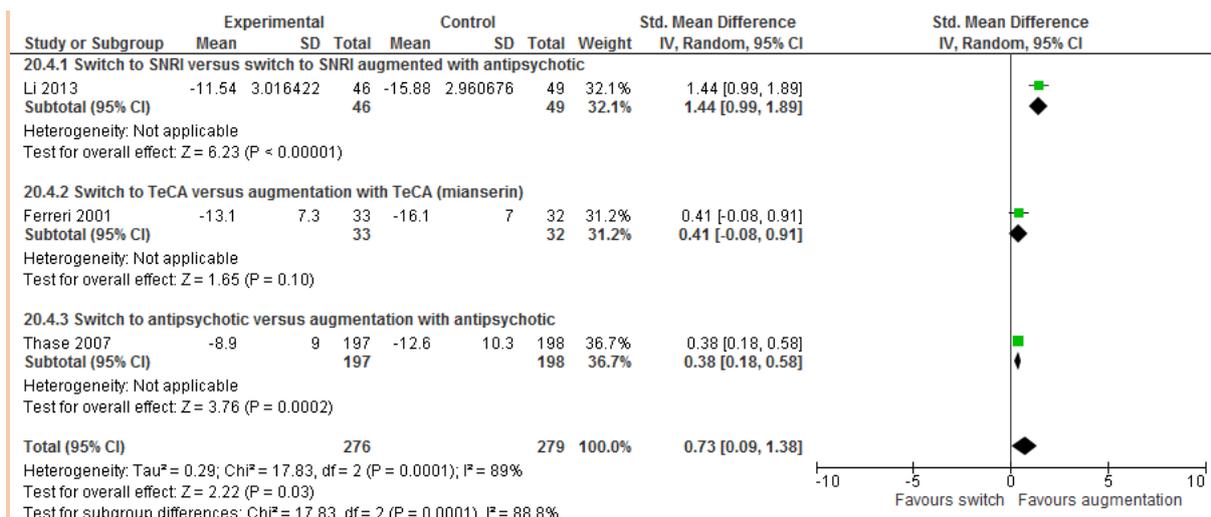
Response (much/very much improved on CGI-I)



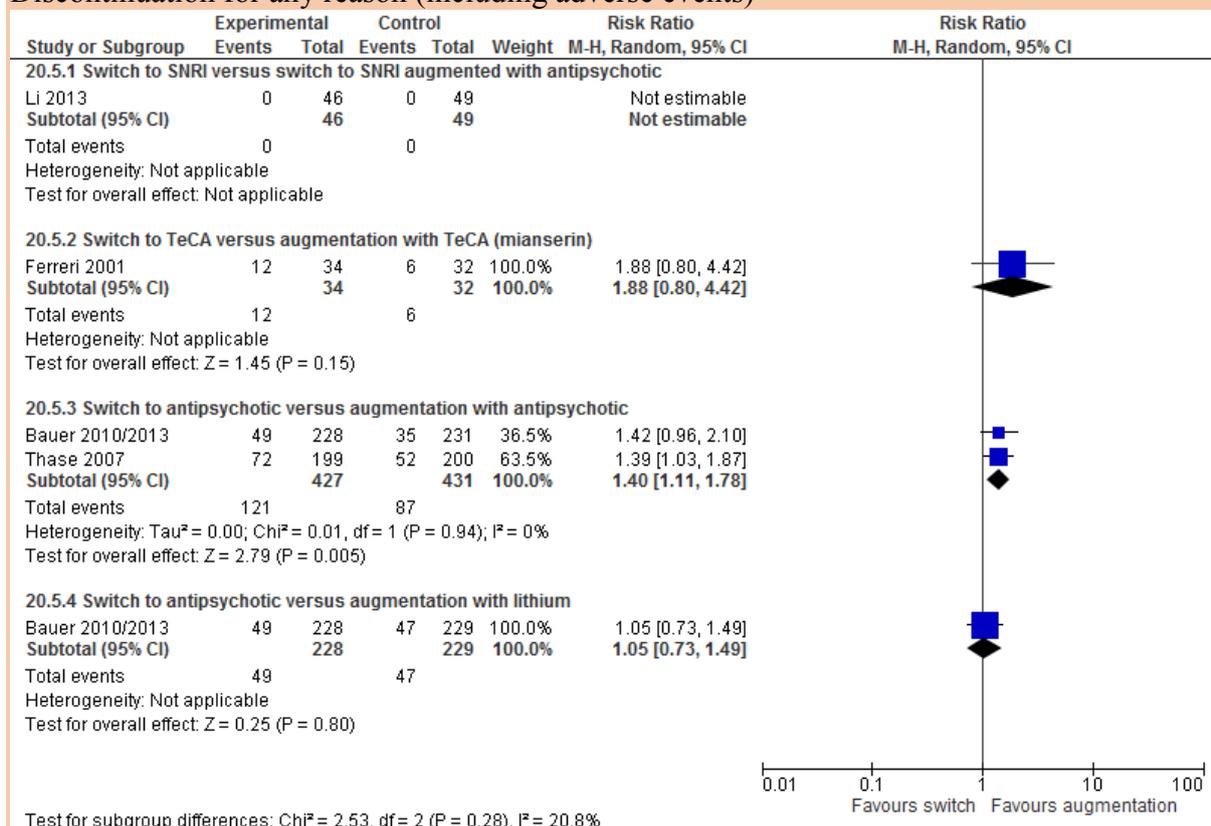
Depression symptomatology (MADRS/HAMD change score)

Depression in adults: treatment and management

Forest plots



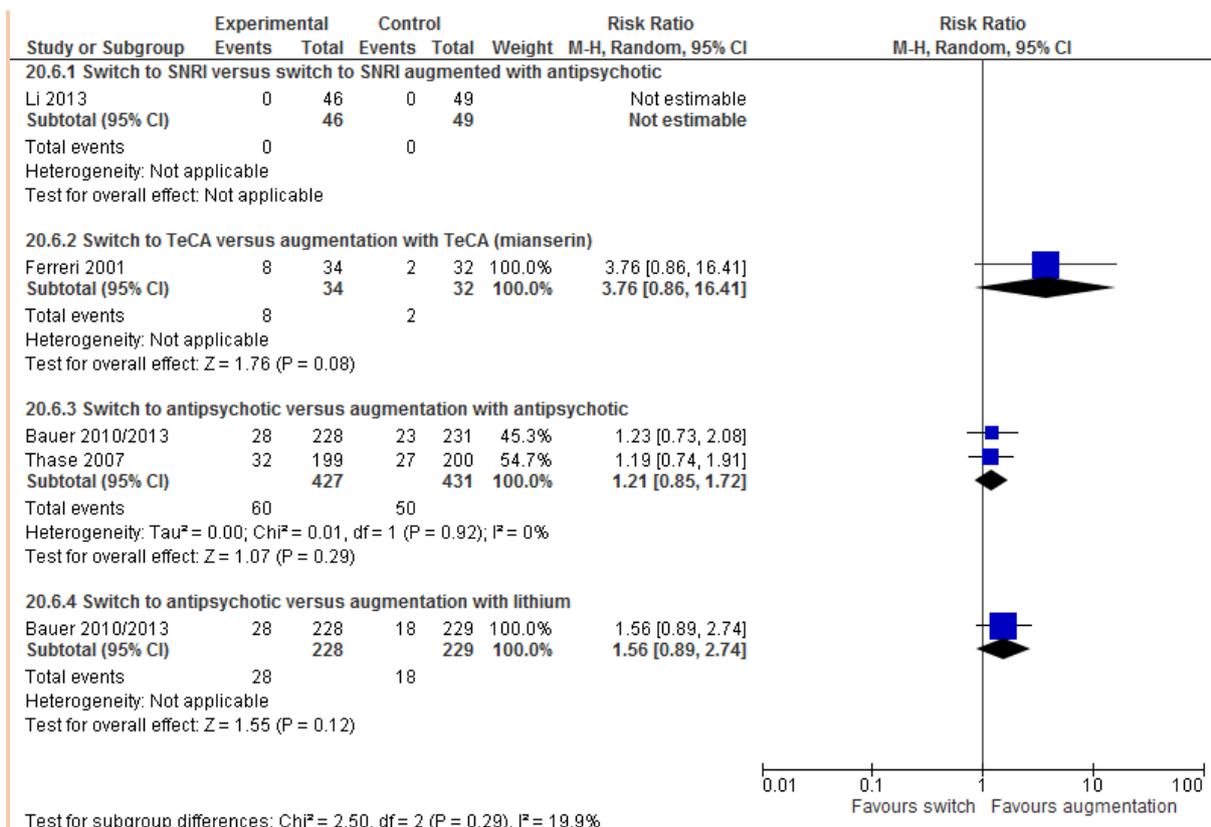
Discontinuation for any reason (including adverse events)



Discontinuation due to adverse events

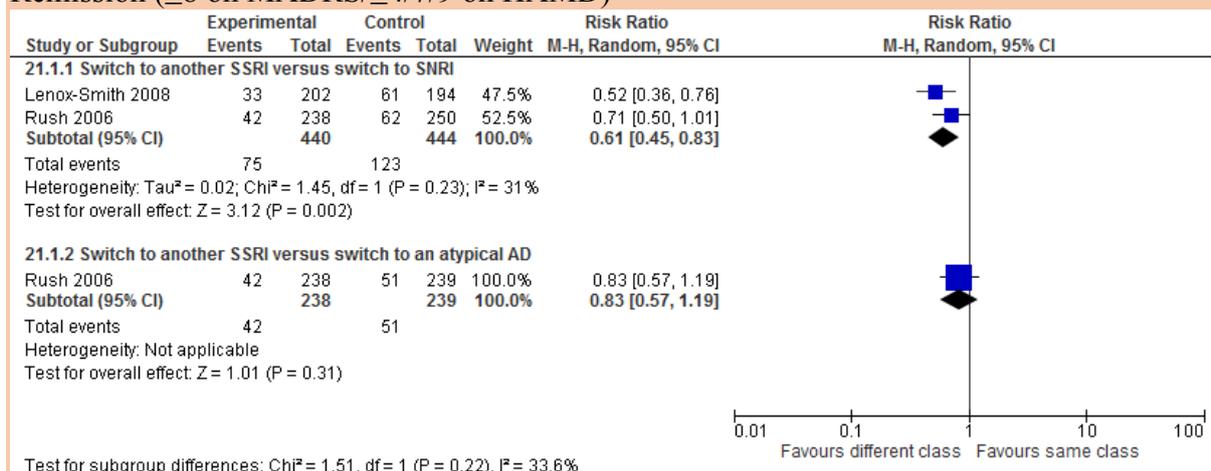
Depression in adults: treatment and management

Forest plots



Switching to another antidepressant of the same class compared to switching to another antidepressant of a different class

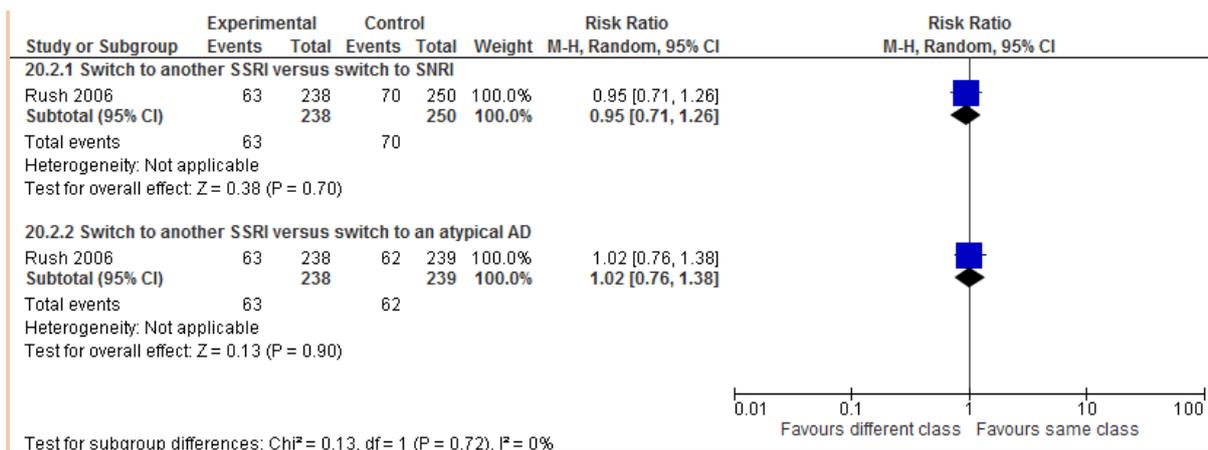
Remission (≤ 8 on MADRS/ $\leq 4/7/9$ on HAMD)



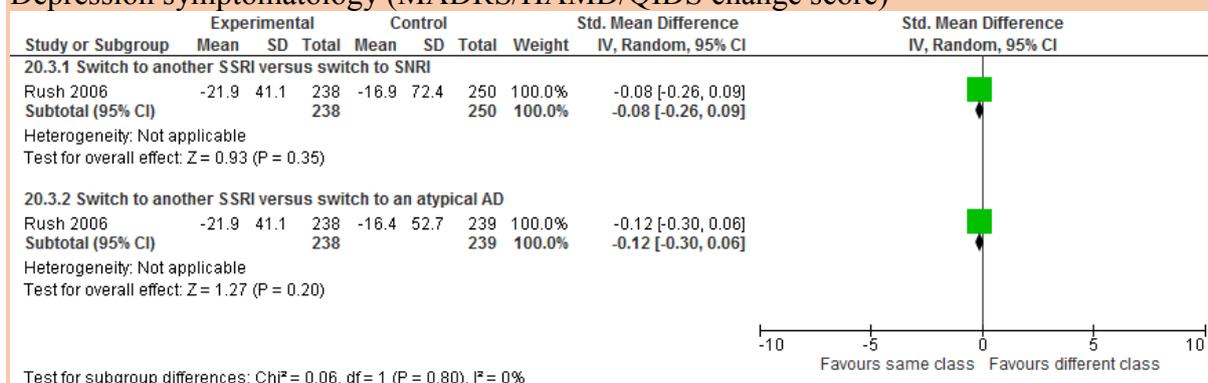
Response ($\geq 50\%$ improvement on MADRS/HAMD/QIDS)

Depression in adults: treatment and management

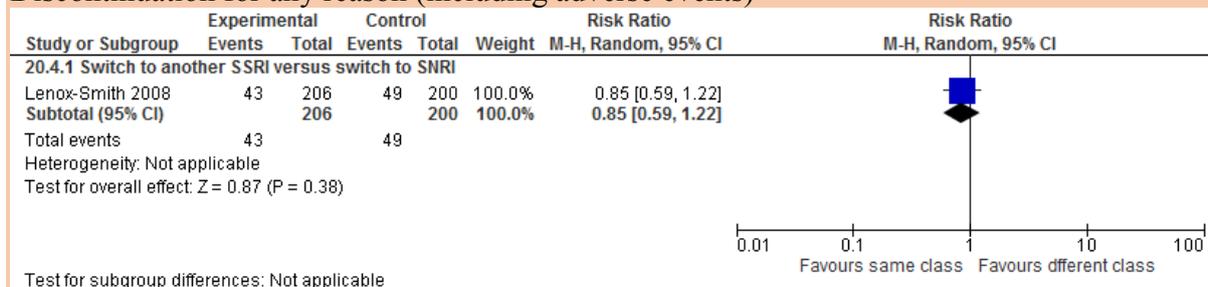
Forest plots



Depression symptomatology (MADRS/HAMD/QIDS change score)

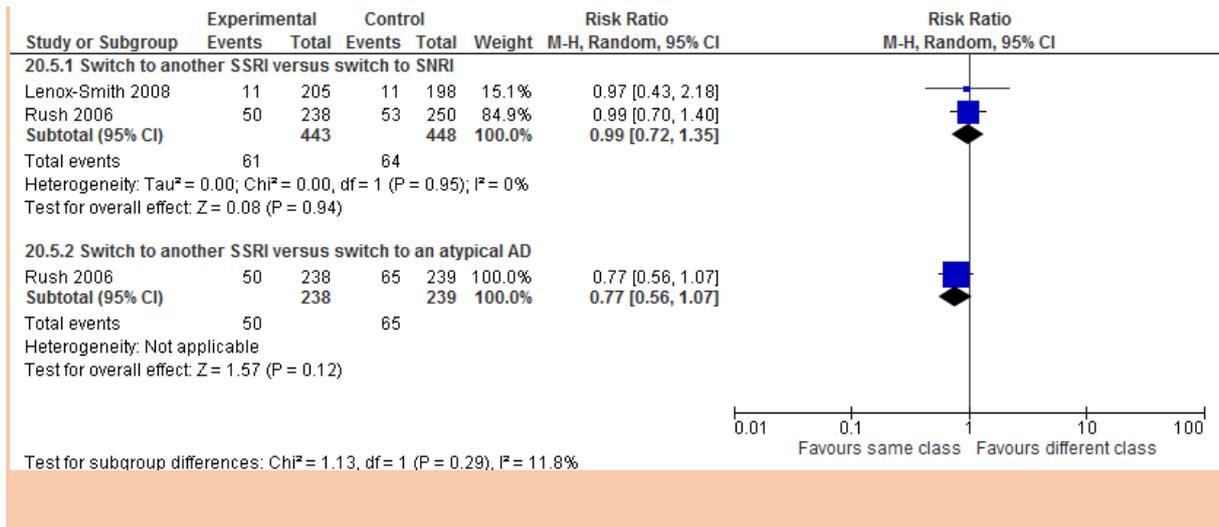


Discontinuation for any reason (including adverse events)



Discontinuation due to adverse events

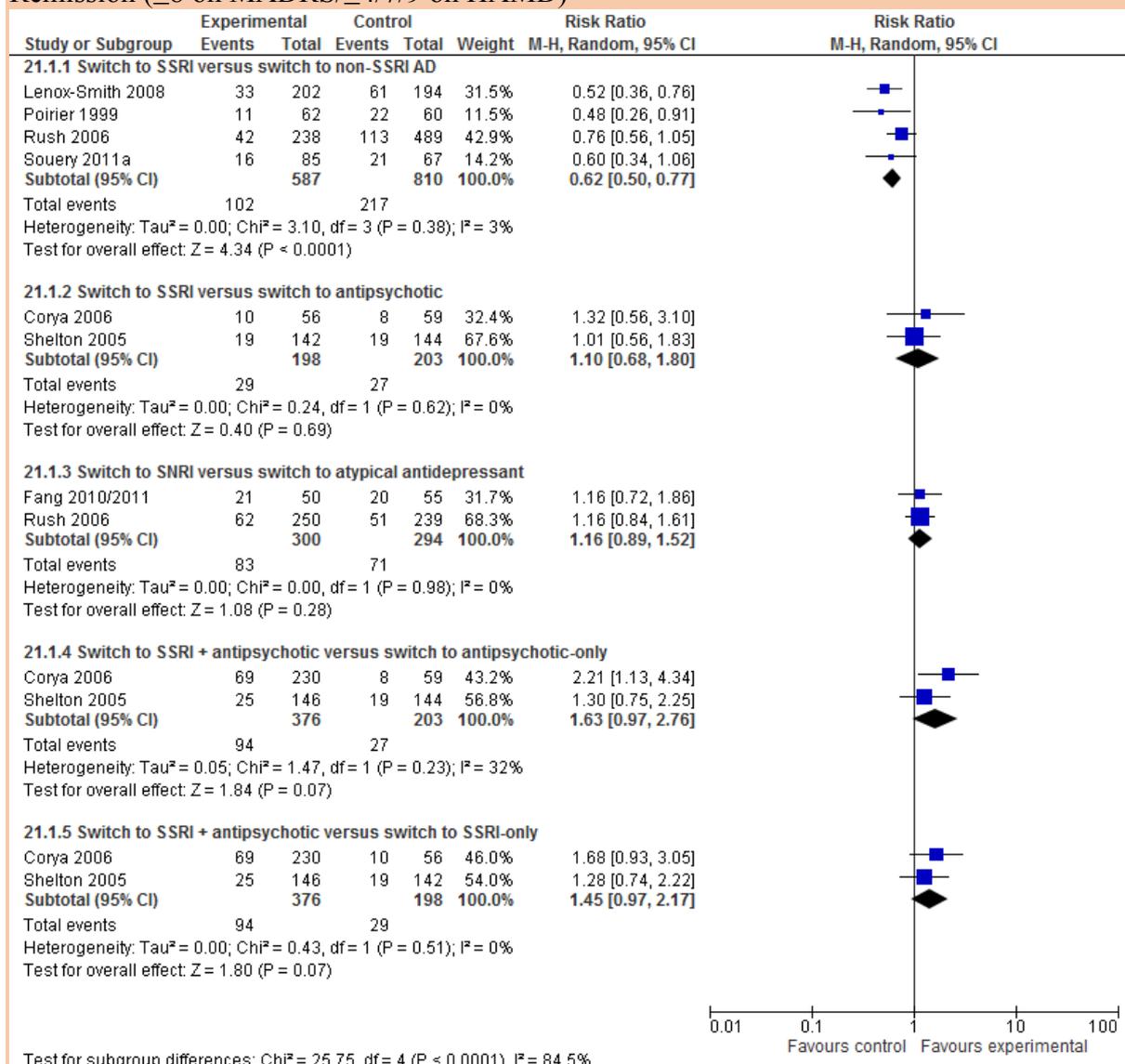
Depression in adults: treatment and management
Forest plots



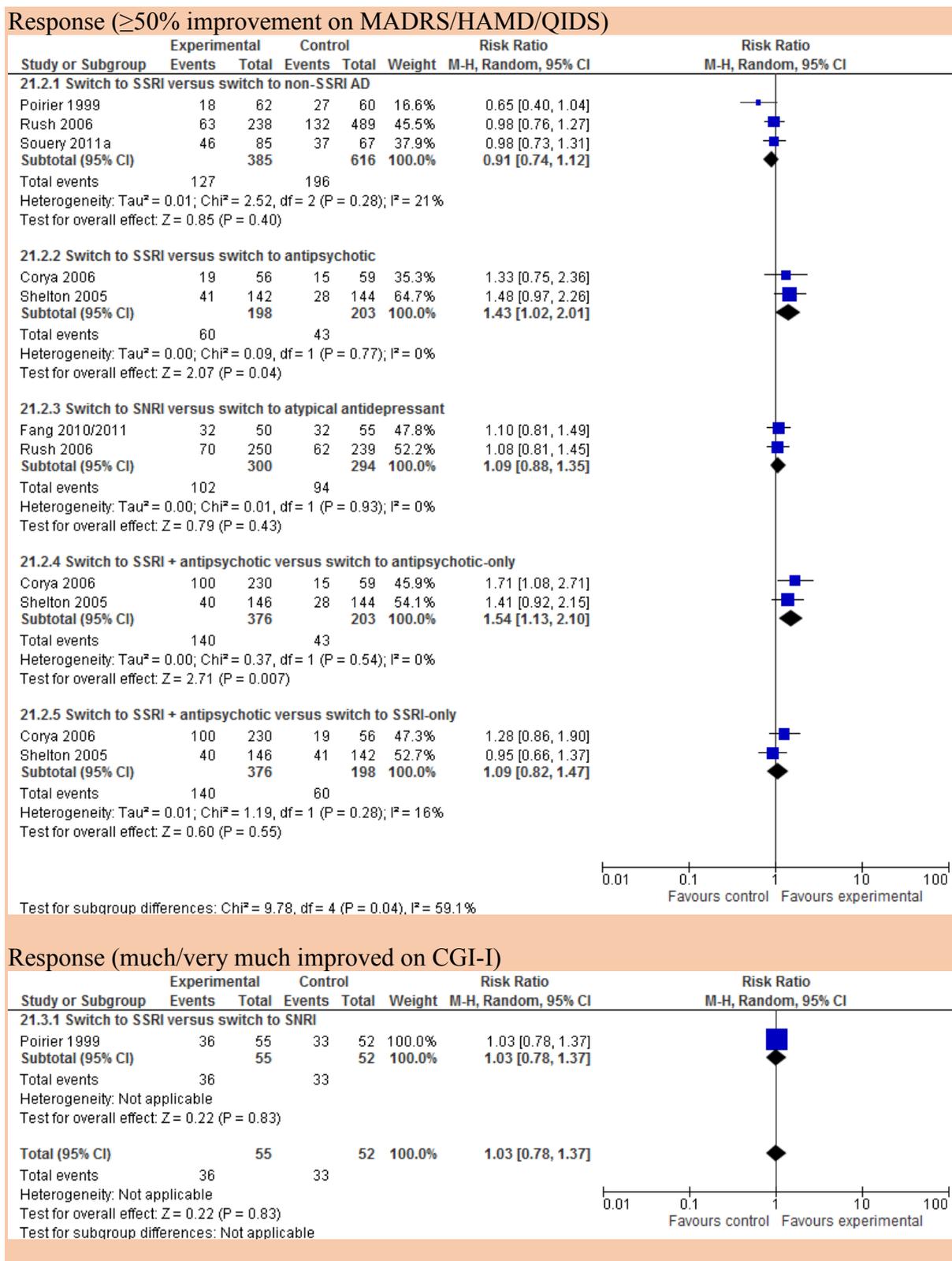
Depression in adults: treatment and management
Forest plots

Switching to another antidepressant or non-antidepressant agent (head-to-head comparisons)

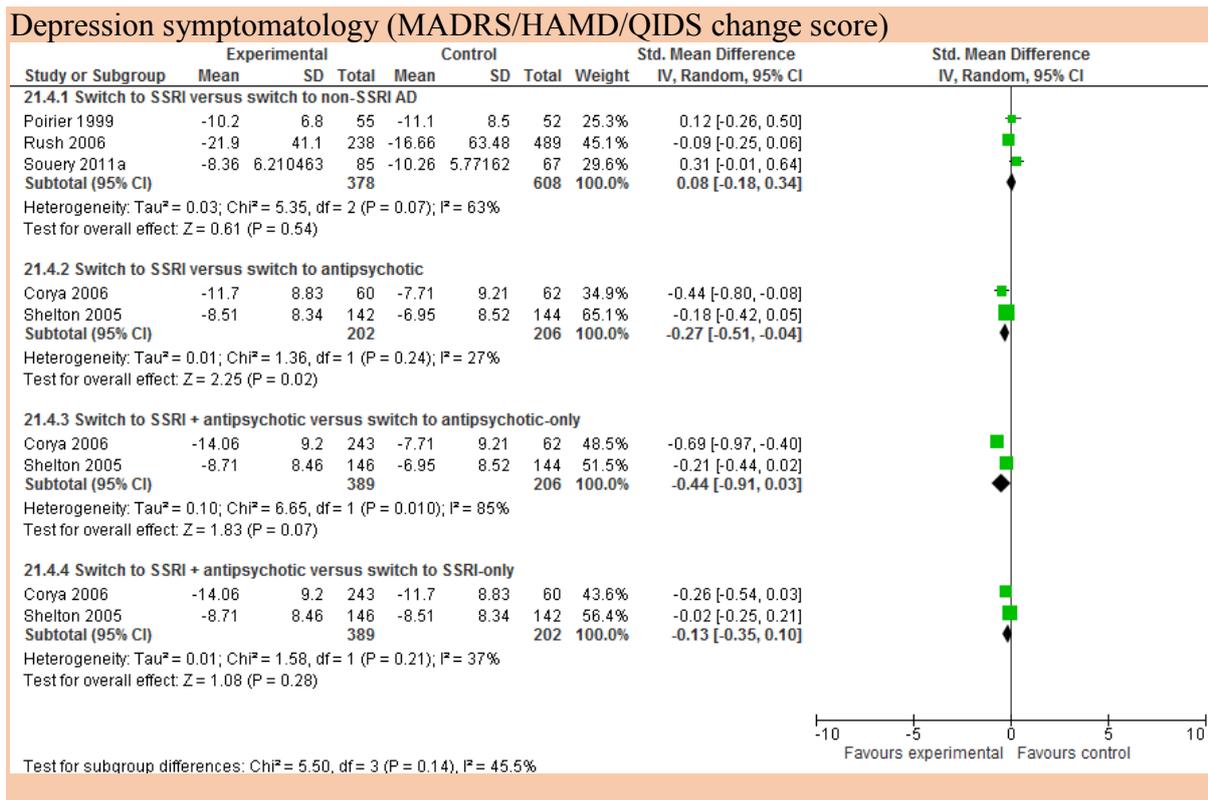
Remission (≤ 8 on MADRS/ $\leq 4/7/9$ on HAMD)



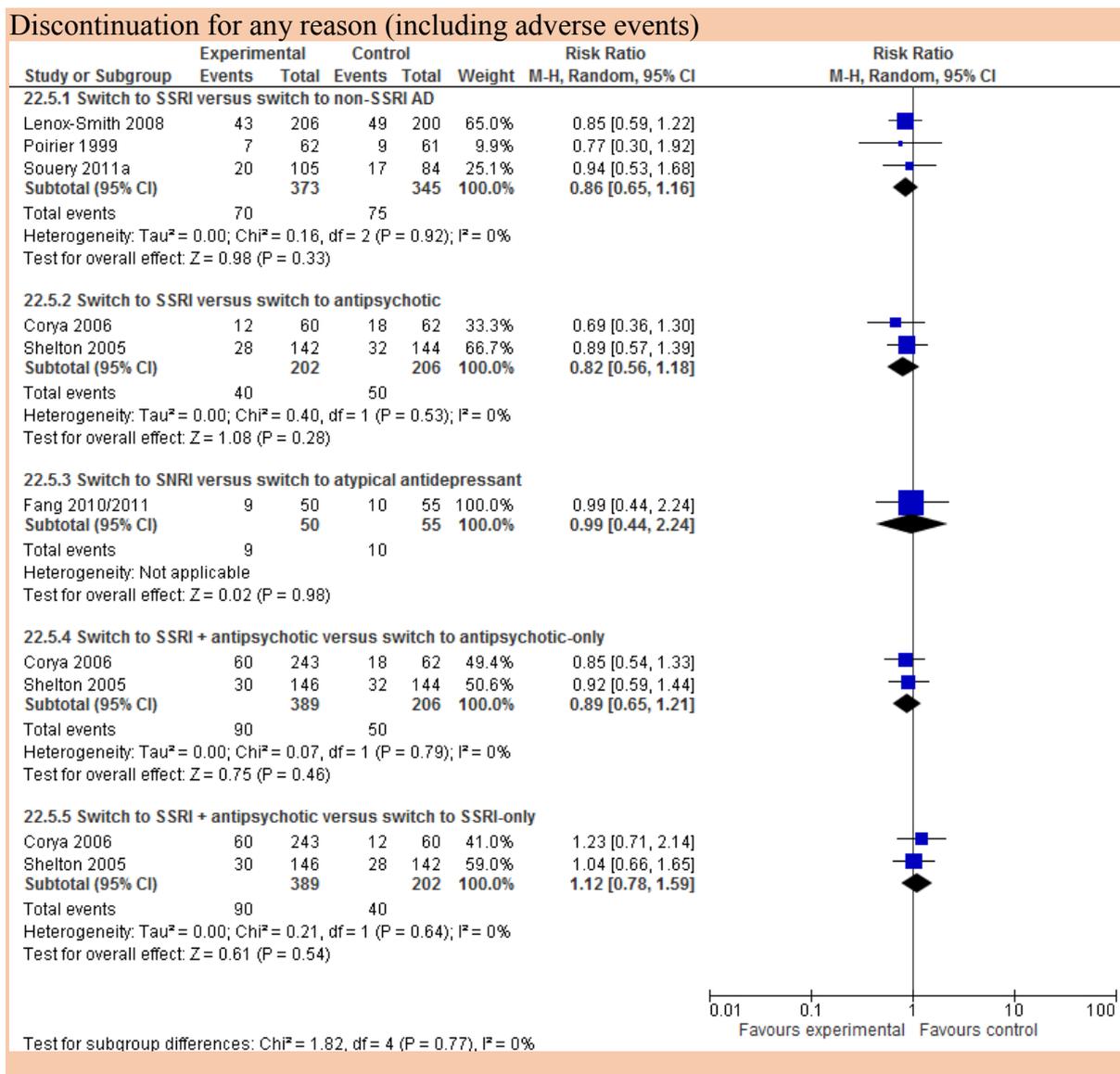
Depression in adults: treatment and management
Forest plots



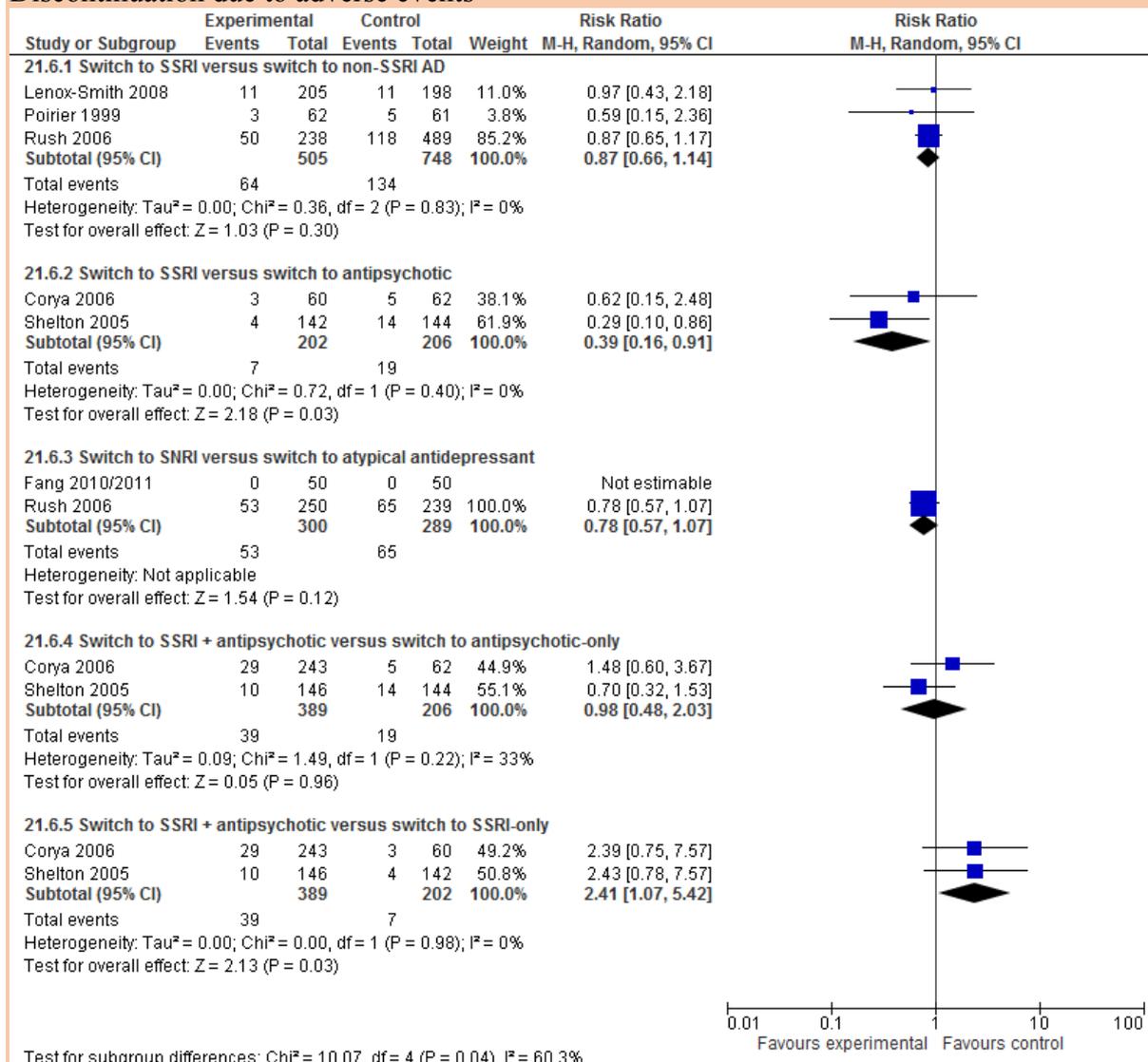
Depression in adults: treatment and management
Forest plots



Depression in adults: treatment and management
Forest plots

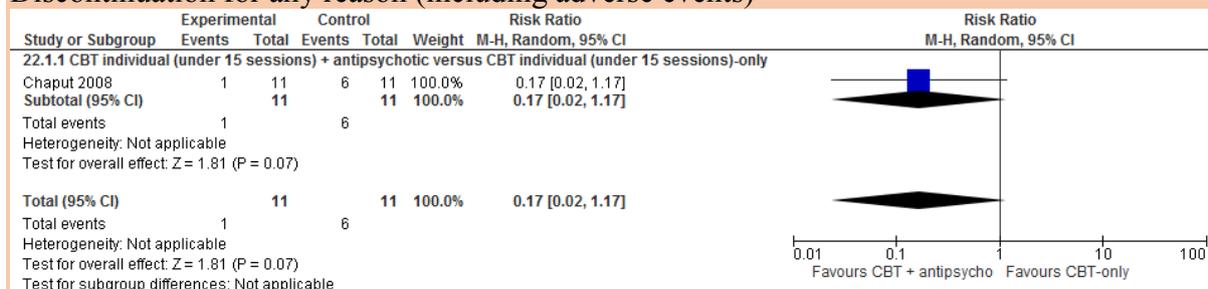


Discontinuation due to adverse events



Switching to a combined psychological and pharmacological intervention versus switching to a psychological intervention-only

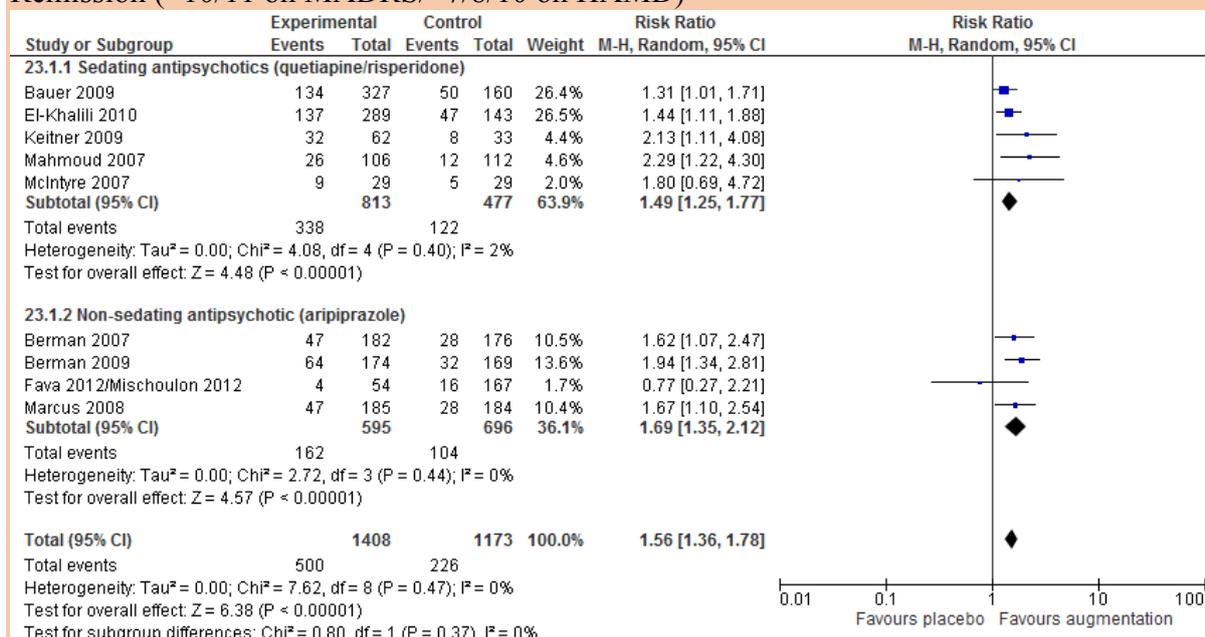
Discontinuation for any reason (including adverse events)



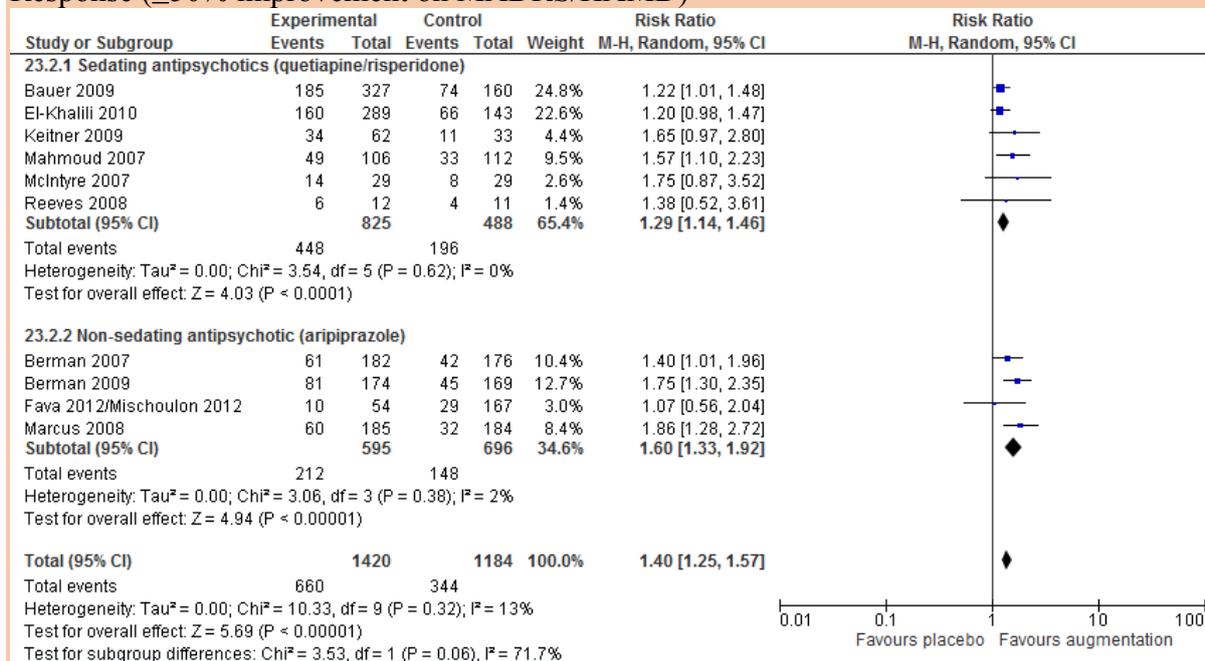
Depression in adults: treatment and management
Forest plots

Antipsychotic augmentation versus placebo: Sub-analysis by sedating versus non-sedating antipsychotics

Remission (<10/11 on MADRS/<7/8/10 on HAMD)



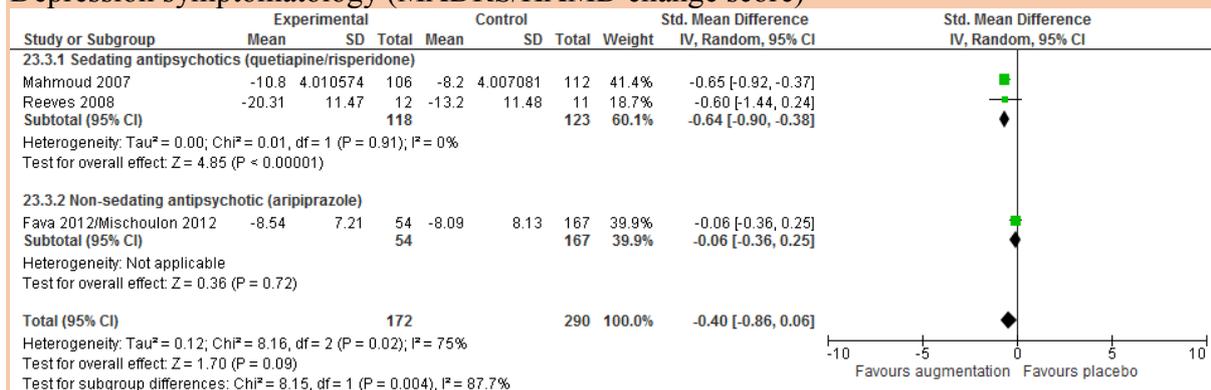
Response (≥50% improvement on MADRS/HAMD)



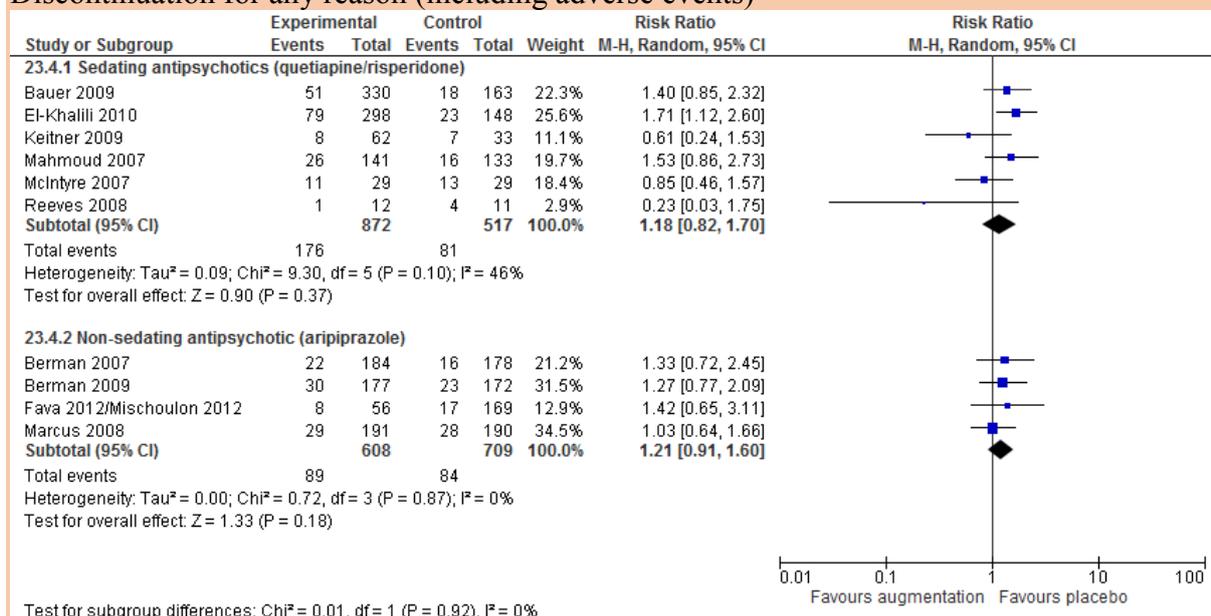
Depression in adults: treatment and management

Forest plots

Depression symptomatology (MADRS/HAMD change score)



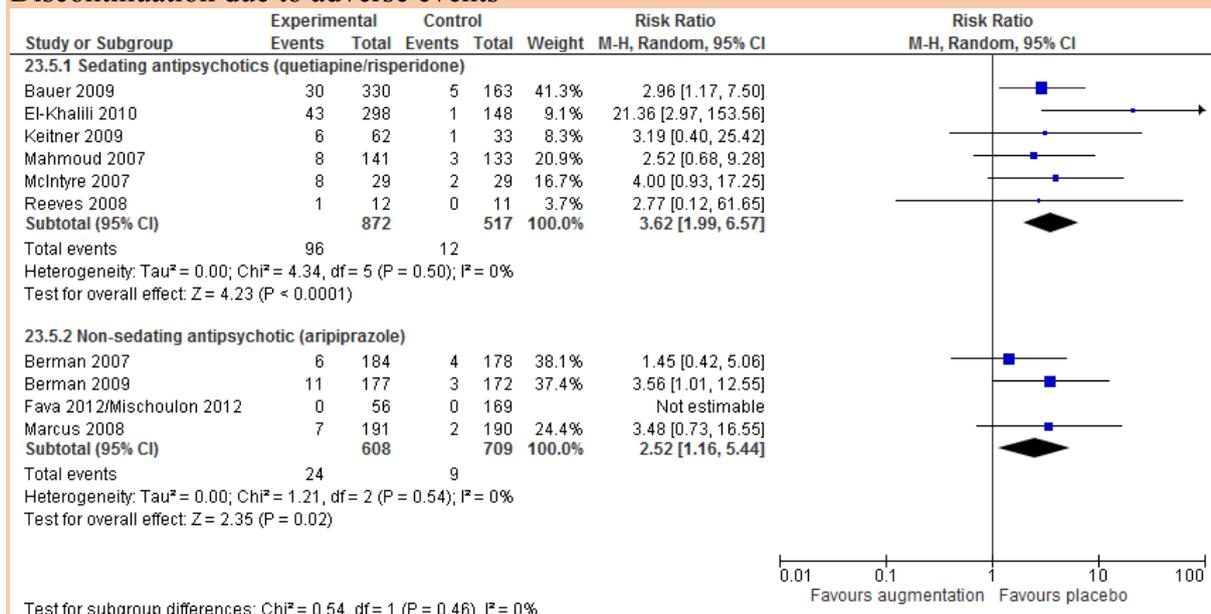
Discontinuation for any reason (including adverse events)



Depression in adults: treatment and management

Forest plots

Discontinuation due to adverse events



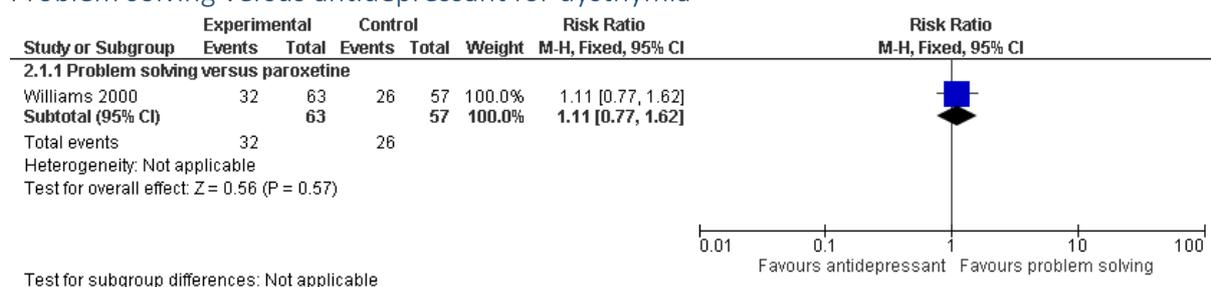
Chronic depressive symptoms (chapter 9)

Problem solving versus pill placebo for chronic depressive symptoms

Remission (score <7 on HAM-D)



Problem solving versus antidepressant for dysthymia

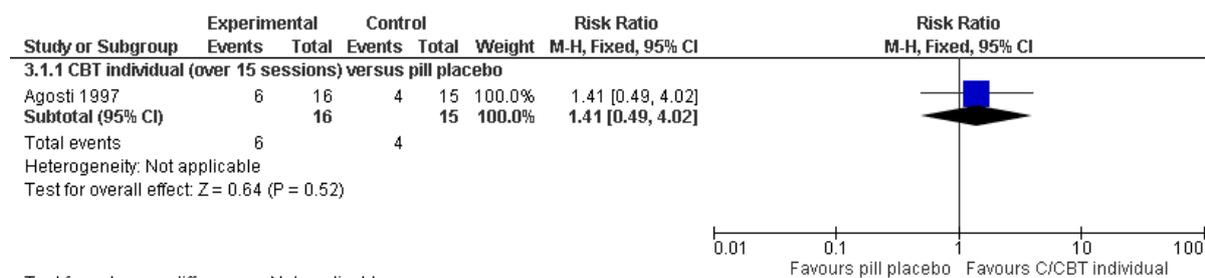


Cognitive and cognitive behavioural therapies versus pill placebo for chronic depressive symptoms

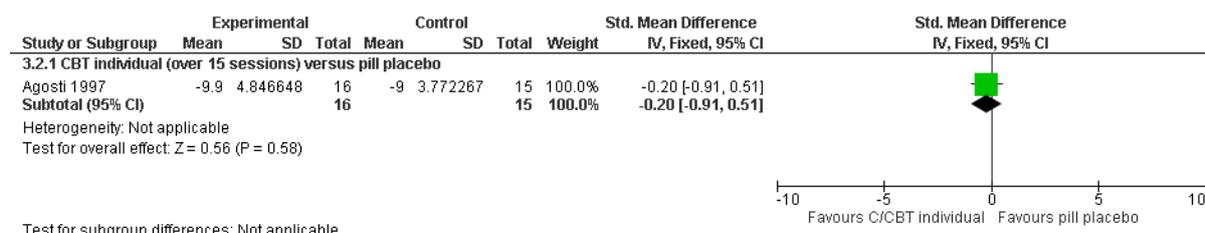
Remission (<7 on HAM-D)

Depression in adults: treatment and management

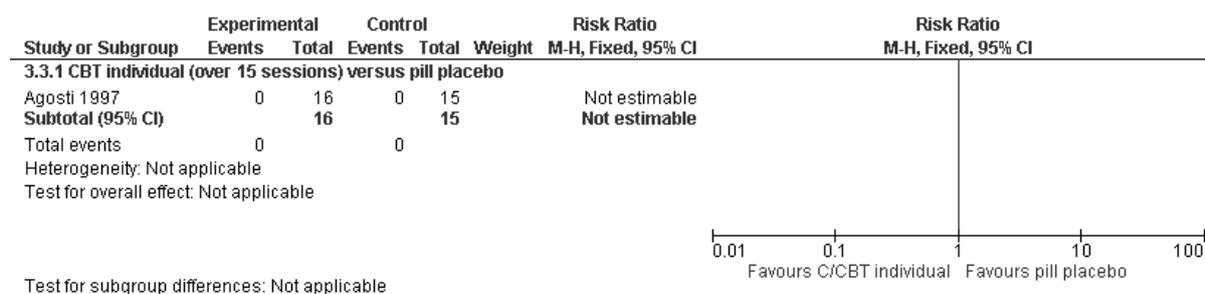
Forest plots



Depression symptomatology (HAM-D change score)



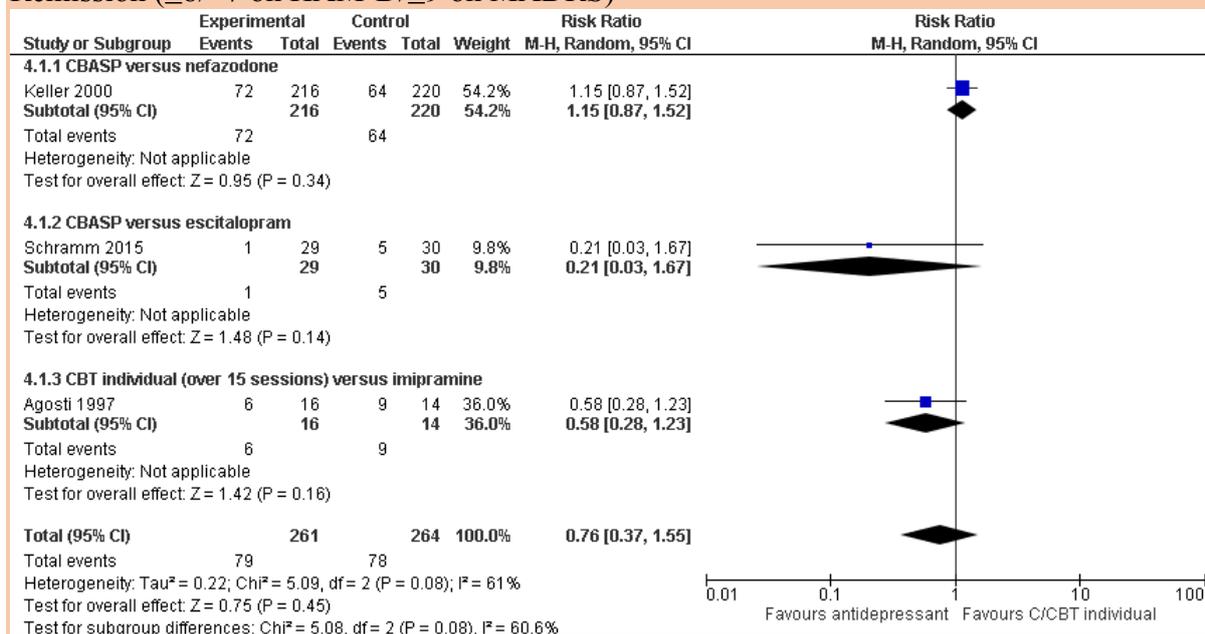
Discontinuation for any reason



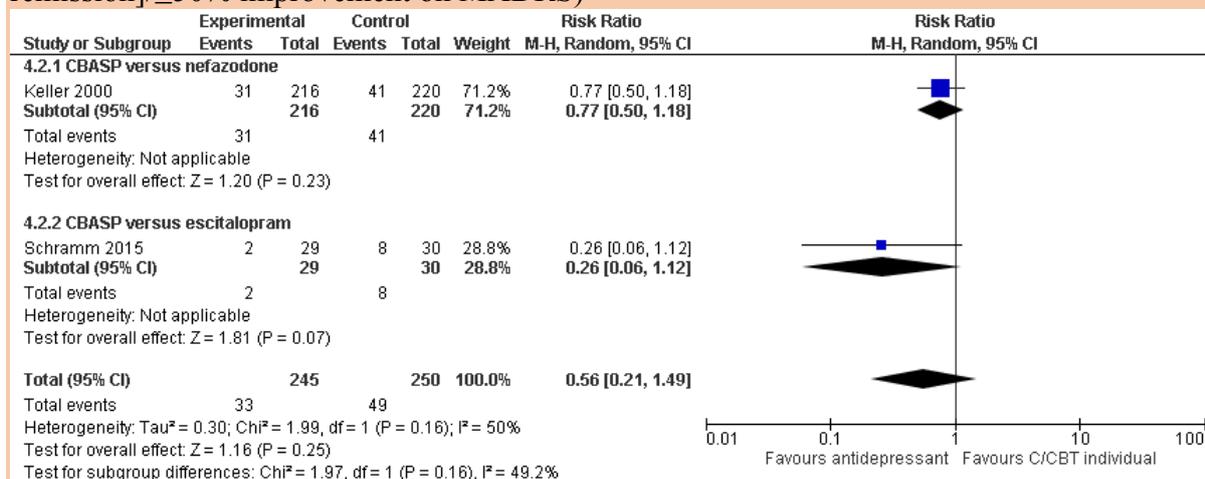
Depression in adults: treatment and management
Forest plots

Cognitive and cognitive behavioural therapies versus antidepressants for chronic depressive symptoms

Remission (≤ 8 / < 7 on HAM-D/ ≤ 9 on MADRS)



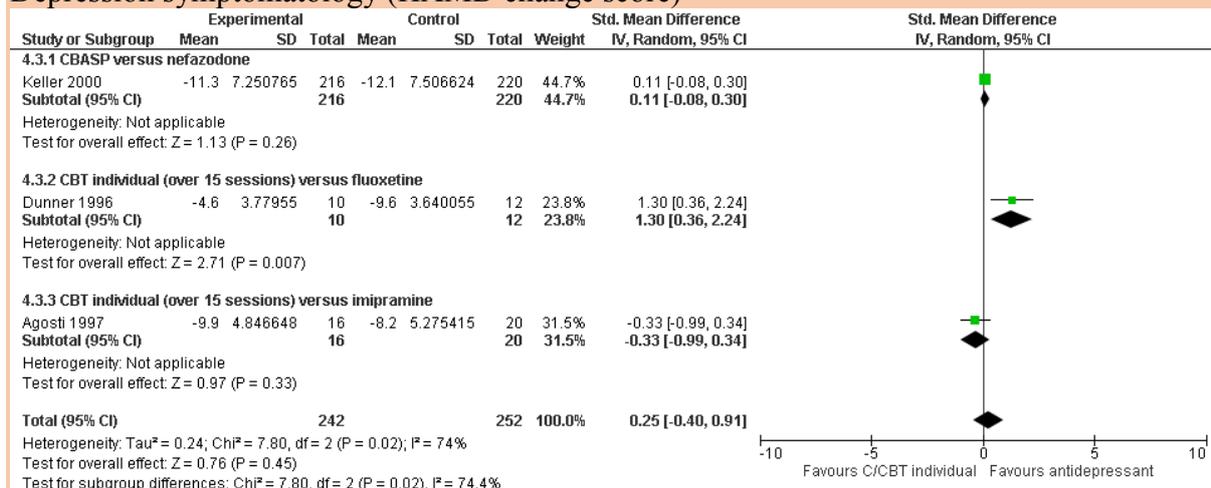
Response ($\geq 50\%$ improvement on HAM-D & HAMD score 8-15 [response without remission]/ $\geq 50\%$ improvement on MADRS)



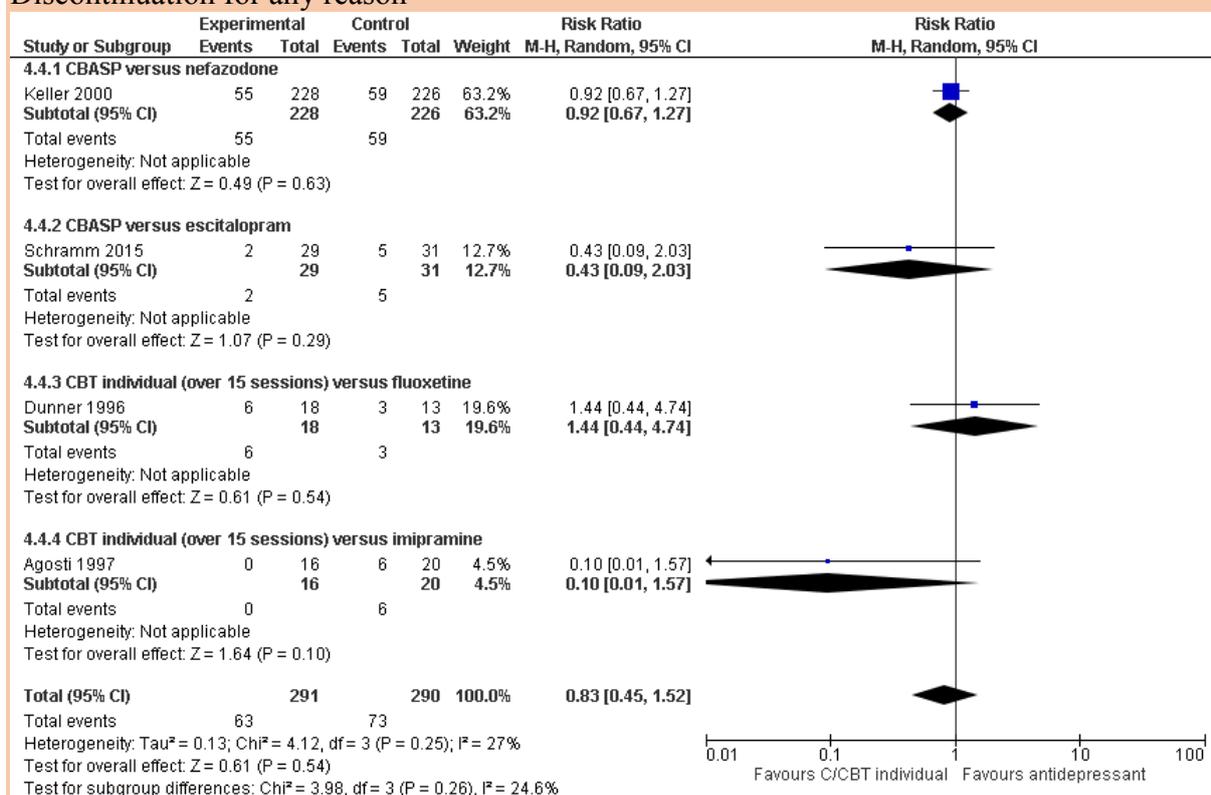
Depression in adults: treatment and management

Forest plots

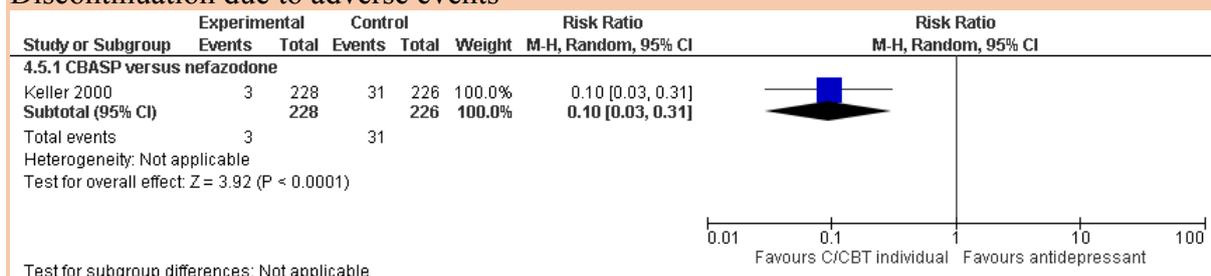
Depression symptomatology (HAMD change score)



Discontinuation for any reason

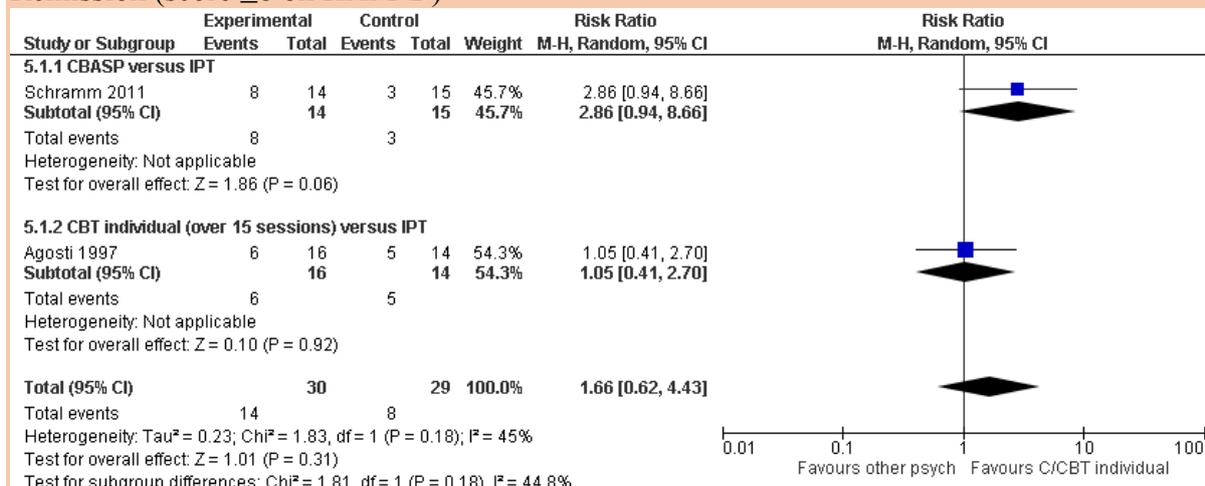


Discontinuation due to adverse events

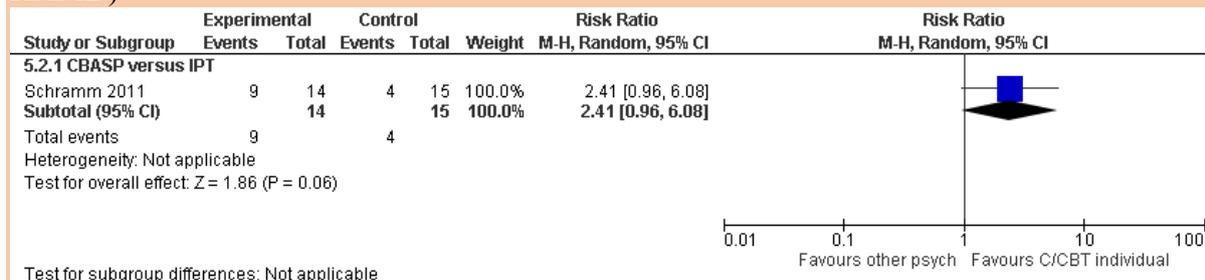


Depression in adults: treatment and management
Forest plots

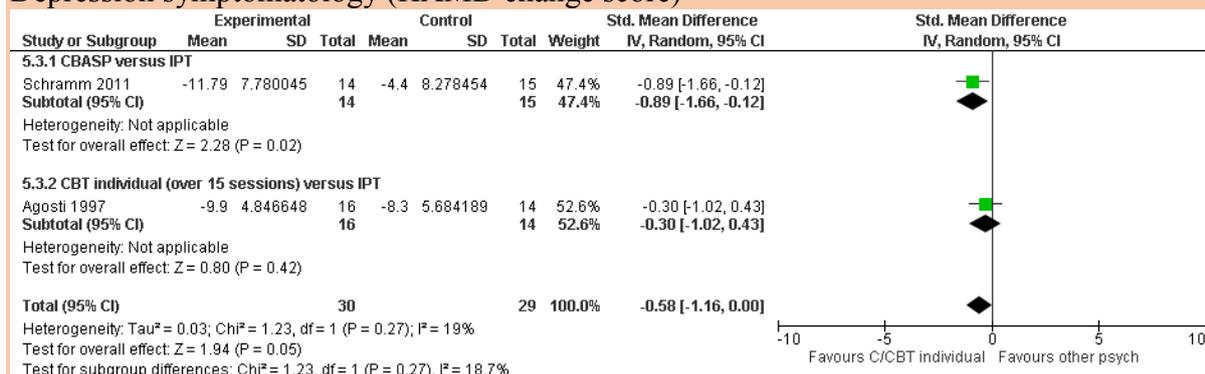
CBASP versus other psychological intervention for chronic depressive symptoms
Remission (score ≤ 8 on HAM-D)



Response ($\geq 50\%$ improvement on HAMD & HAMD score $\leq 15/\geq 50\%$ improvement on HAMD)



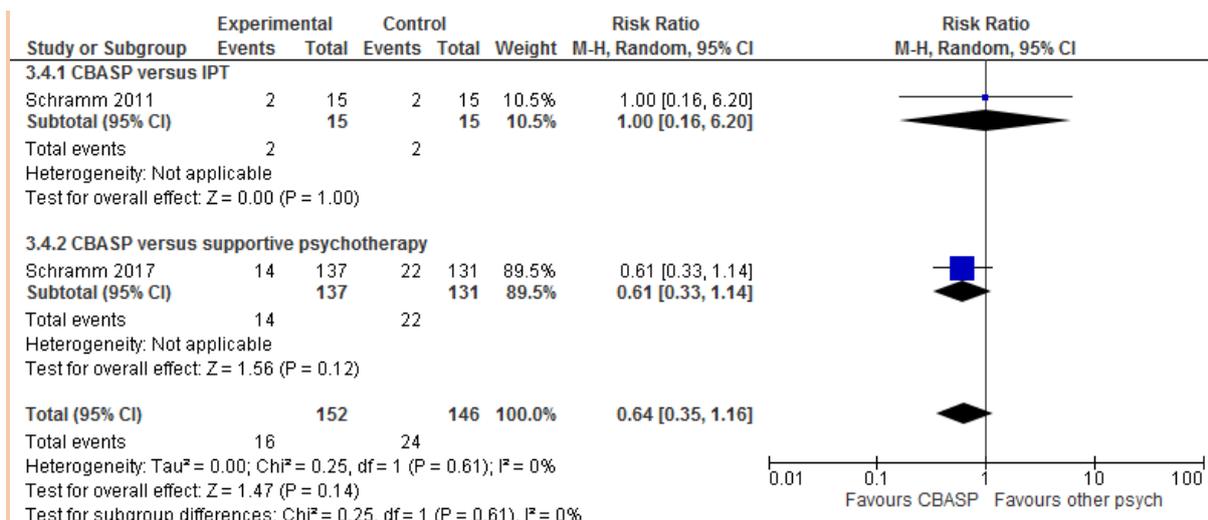
Depression symptomatology (HAMD change score)



Discontinuation for any reason

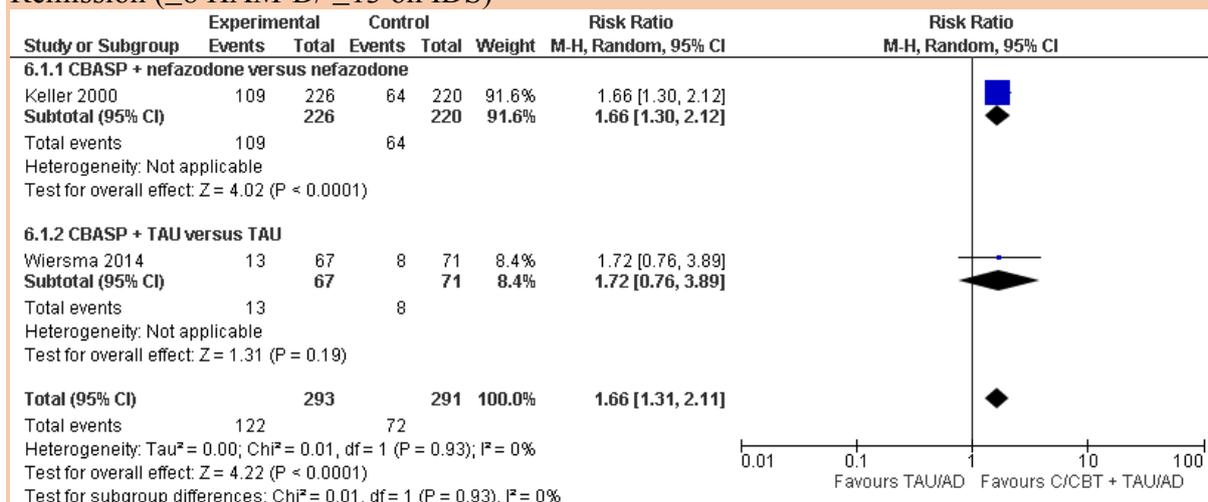
Depression in adults: treatment and management

Forest plots



Cognitive and cognitive behavioural therapies + TAU/AD versus TAU/AD-only for chronic depressive symptoms

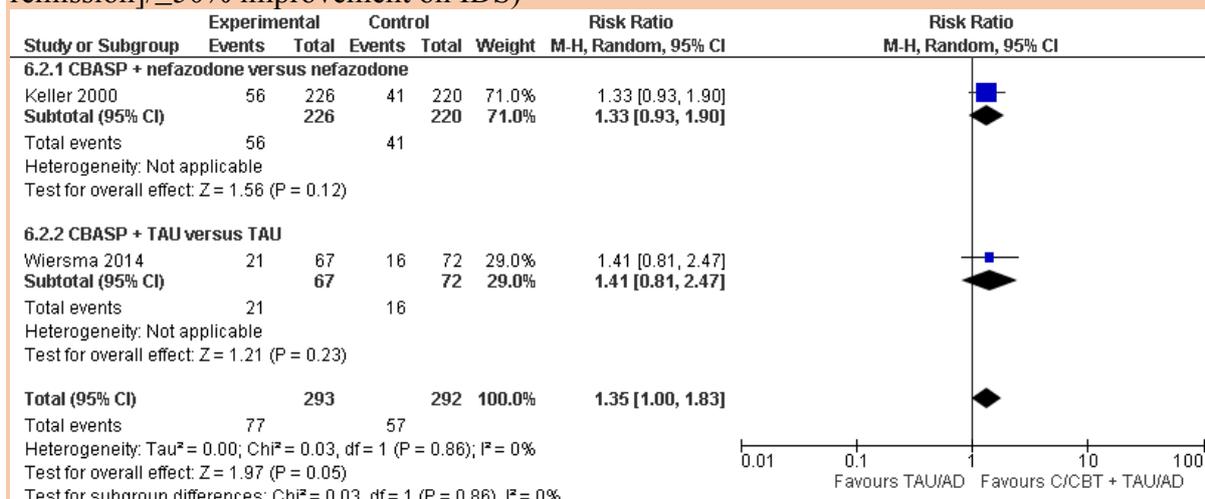
Remission (≤ 8 HAM-D/ ≤ 13 on IDS)



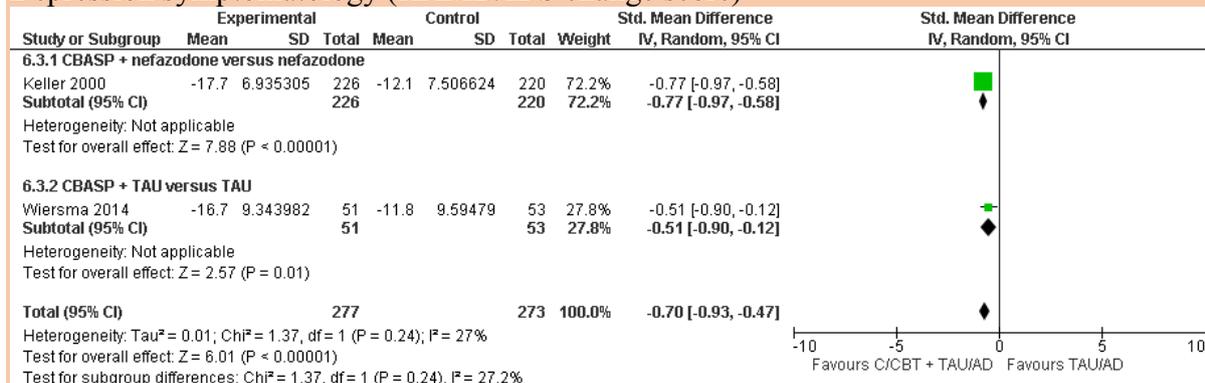
Depression in adults: treatment and management

Forest plots

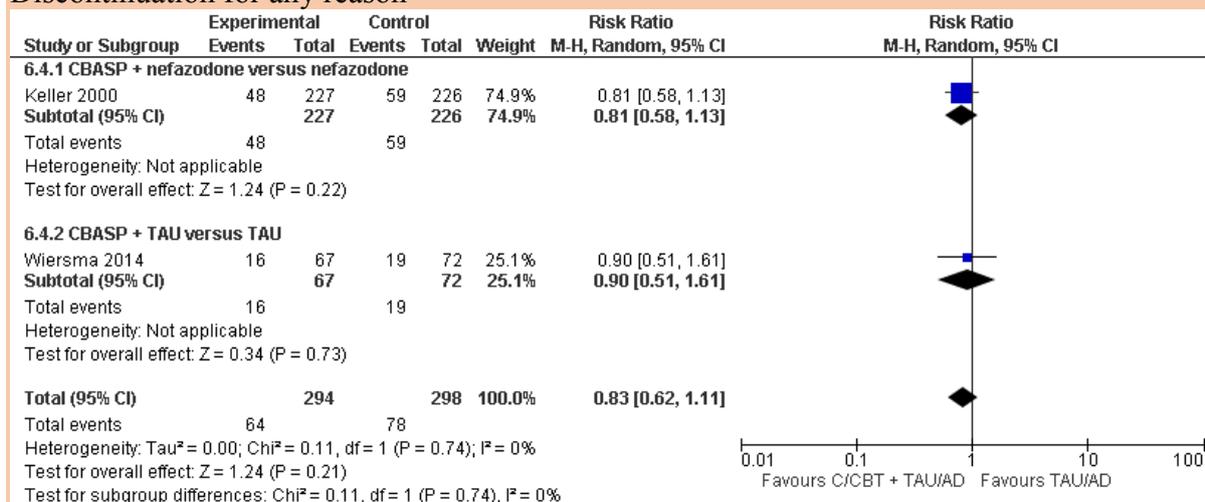
Response ($\geq 50\%$ improvement on HAMD & HAMD score 8-15 [response without remission])/ $\geq 50\%$ improvement on IDS)



Depression symptomatology (HAMD/IDS change score)



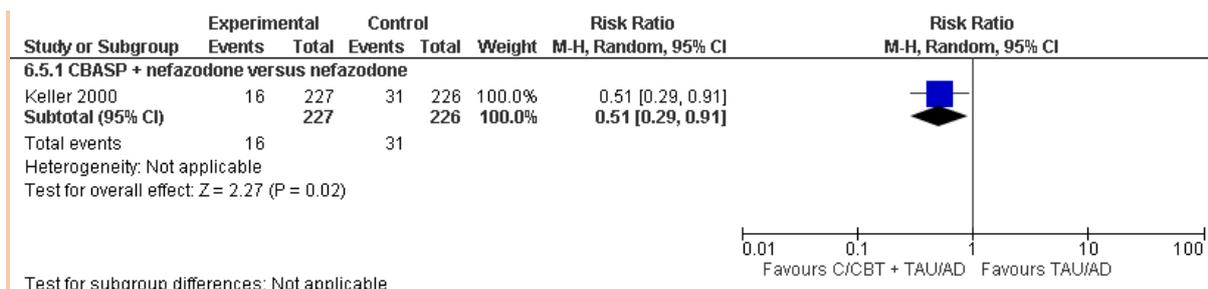
Discontinuation for any reason



Discontinuation due to adverse events

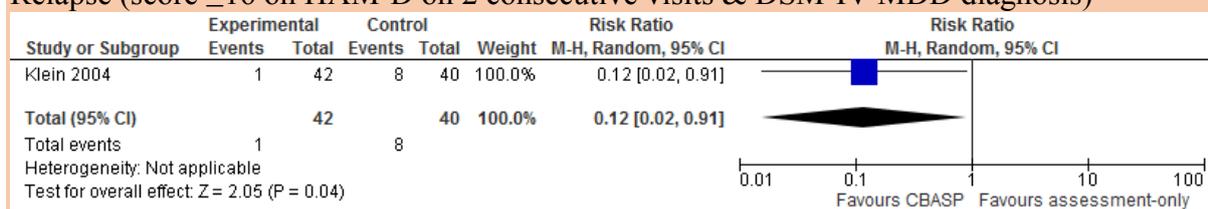
Depression in adults: treatment and management

Forest plots

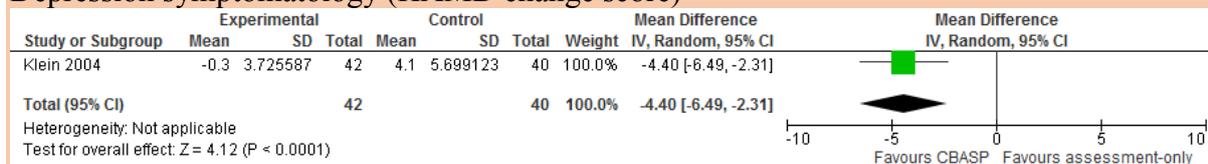


CBASP (maintenance treatment) versus assessment-only for relapse prevention in chronic depressive symptoms

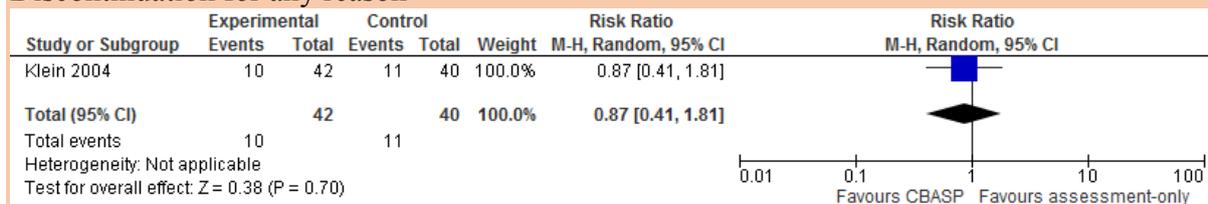
Relapse (score ≥ 16 on HAM-D on 2 consecutive visits & DSM-IV MDD diagnosis)



Depression symptomatology (HAMD change score)

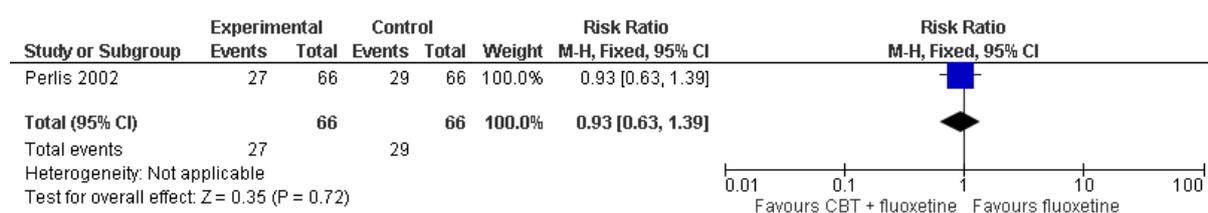


Discontinuation for any reason



CBT + fluoxetine (dose increase) versus fluoxetine (dose increase) for relapse prevention in chronic depressive symptoms

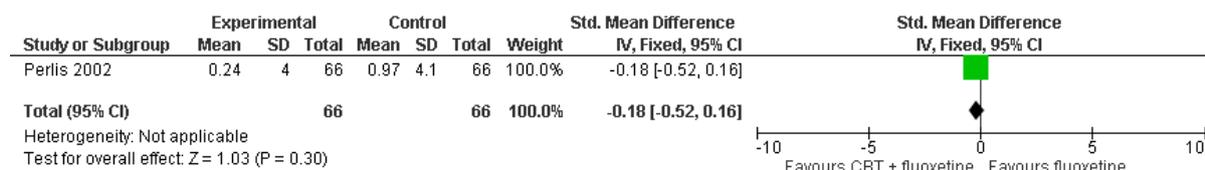
Relapse (≥ 15 on HAM-D on 2 consecutive visits or DSR-III-R MDD)



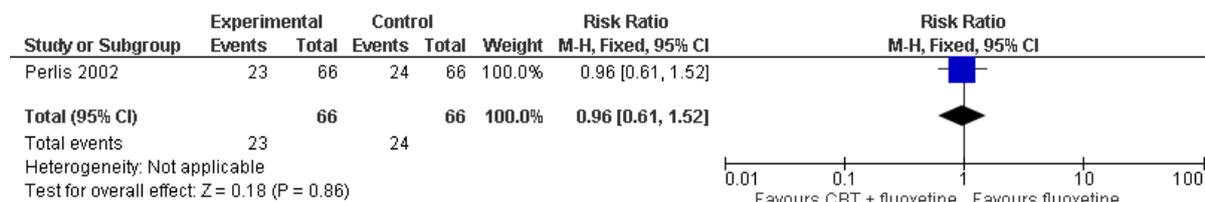
Depression symptomatology (HAMD change score)

Depression in adults: treatment and management

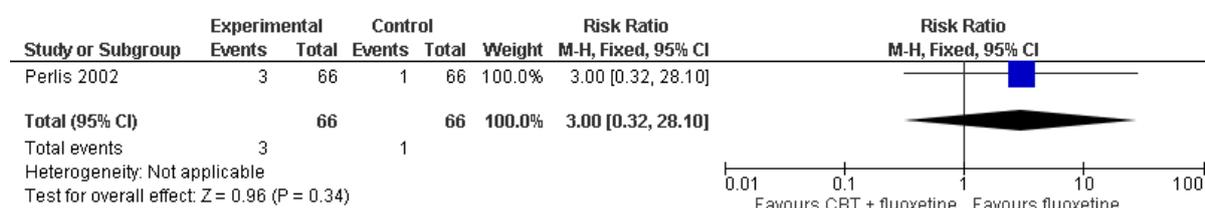
Forest plots



Discontinuation for any reason

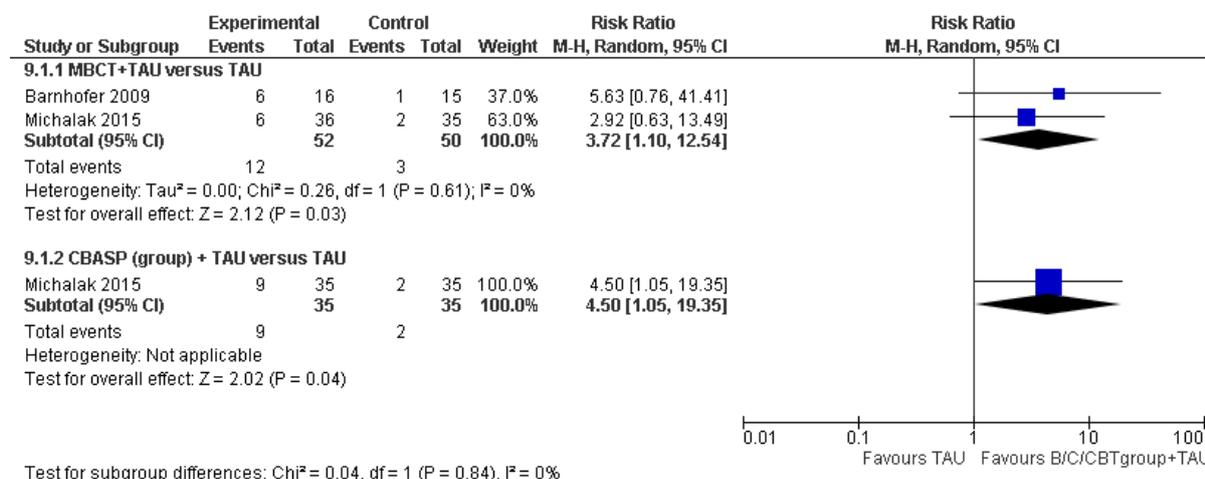


Discontinuation due to adverse events



Behavioural, cognitive, or CBT groups + TAU/AD versus TAU/AD only for chronic depressive symptoms

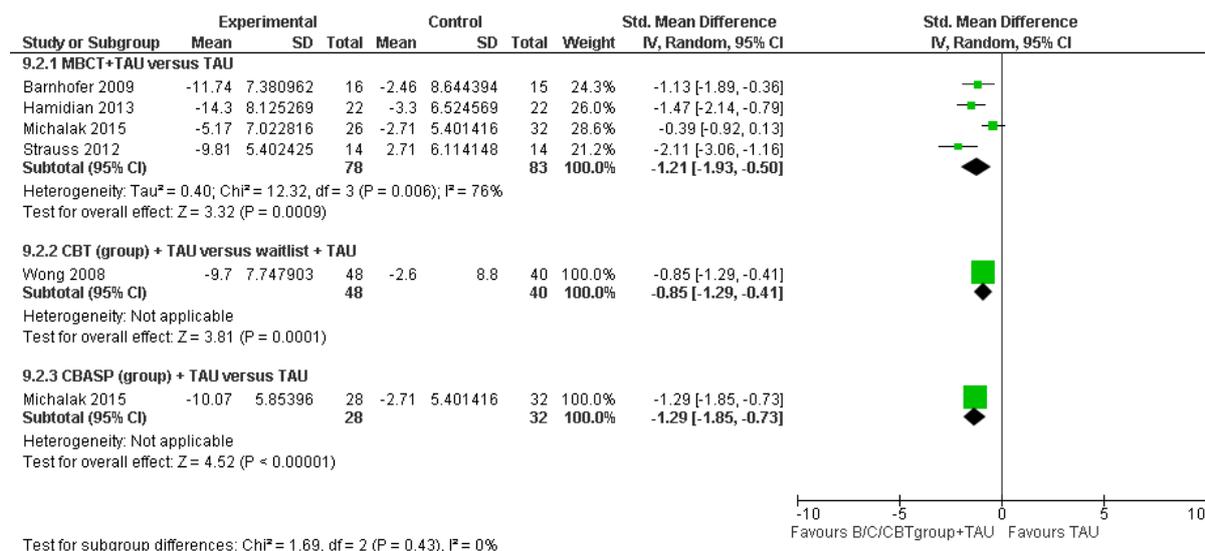
Remission (≤ 13 on BDI-II & $\geq 50\%$ improvement on BDI-II/ < 7 on HAMD)



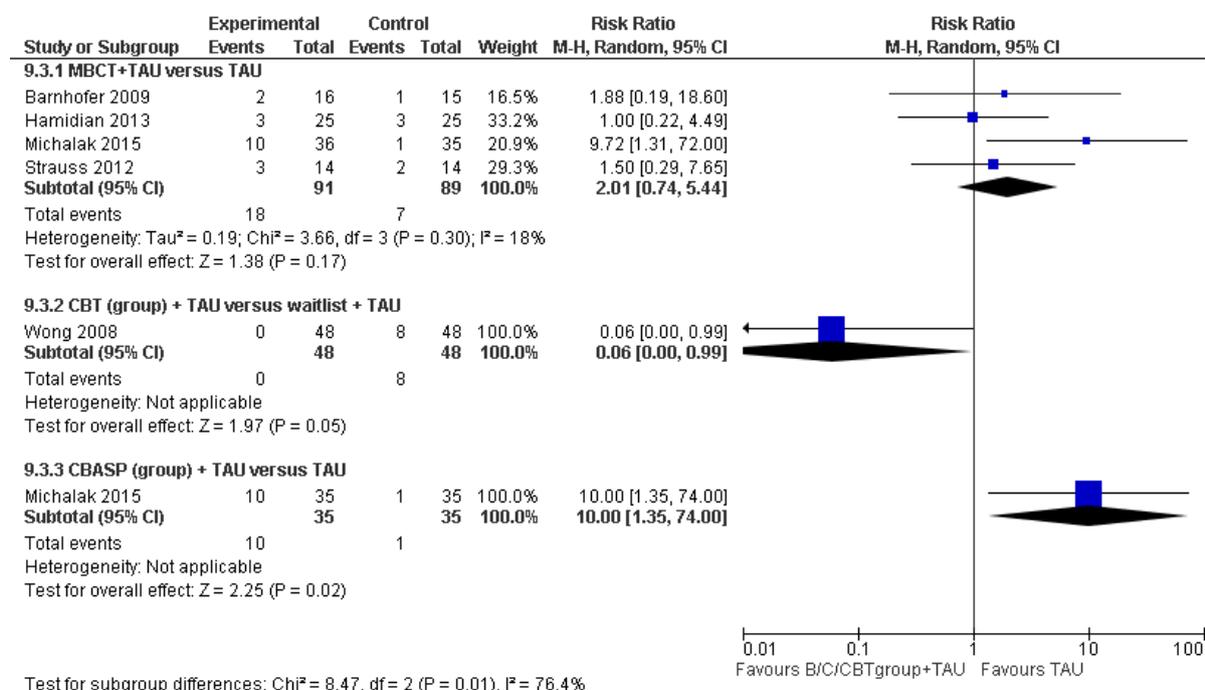
Depression symptomatology (BDI/BDI-II /HAMD change score)

Depression in adults: treatment and management

Forest plots

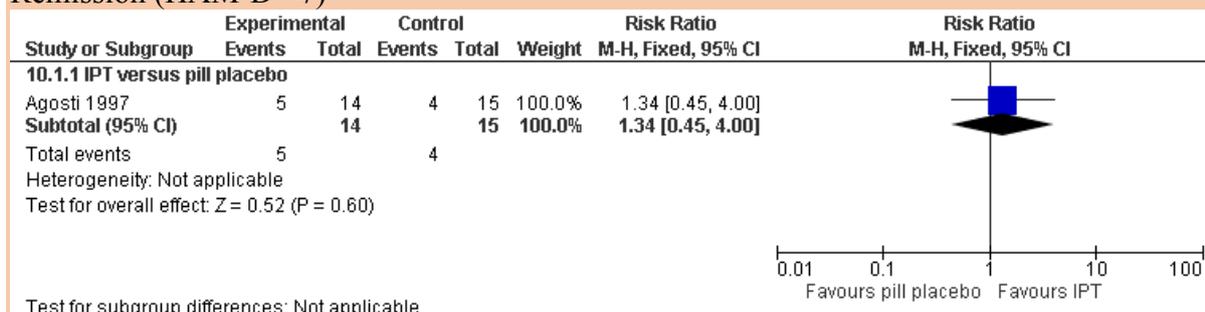


Discontinuation for any reason



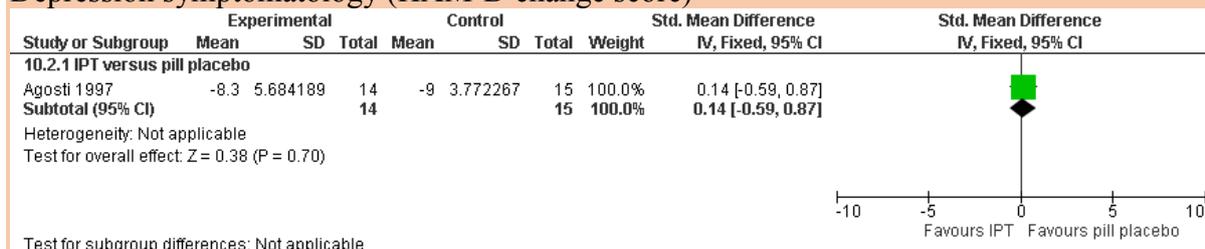
IPT versus pill placebo for chronic depressive symptoms

Remission (HAM-D <7)

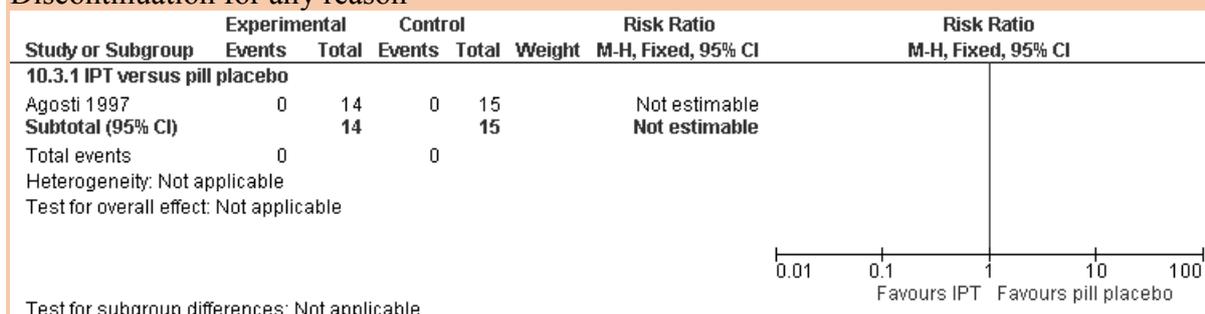


Depression in adults: treatment and management
Forest plots

Depression symptomatology (HAM-D change score)

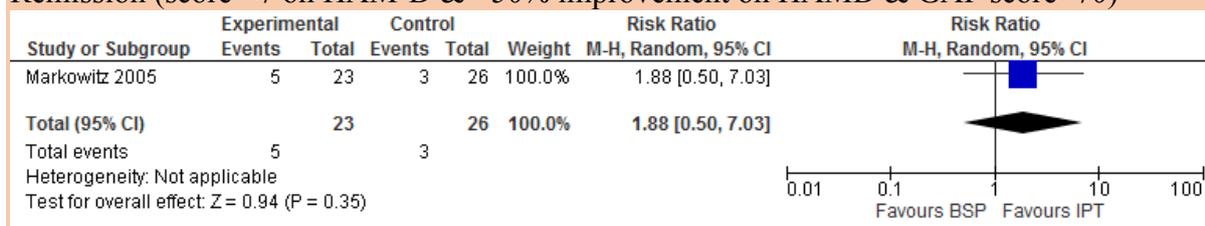


Discontinuation for any reason

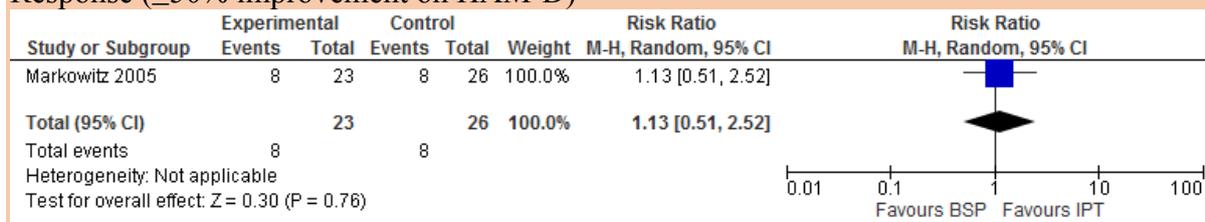


IPT versus brief supportive psychotherapy (BSP) for chronic depressive symptoms

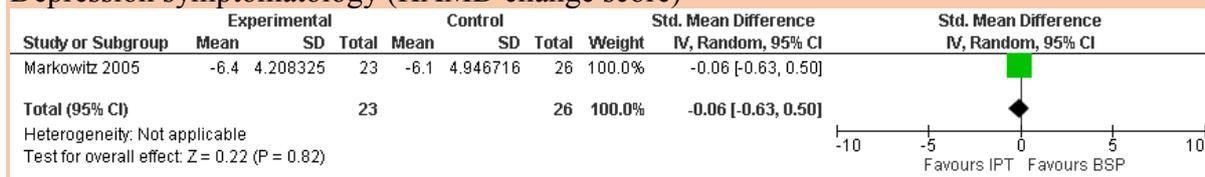
Remission (score <7 on HAM-D & >50% improvement on HAMD & GAF score >70)



Response (≥50% improvement on HAM-D)



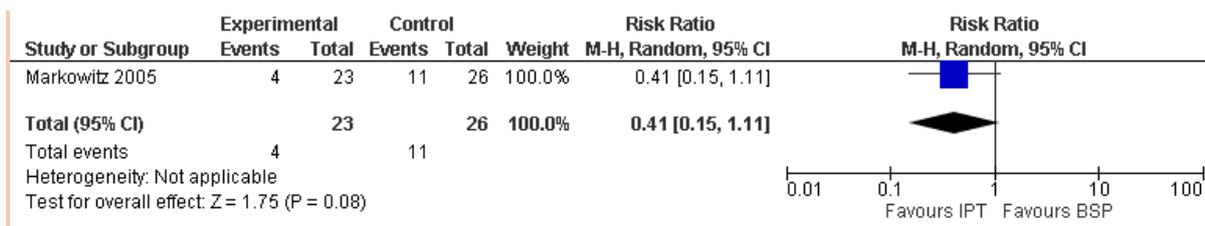
Depression symptomatology (HAMD change score)



Discontinuation for any reason

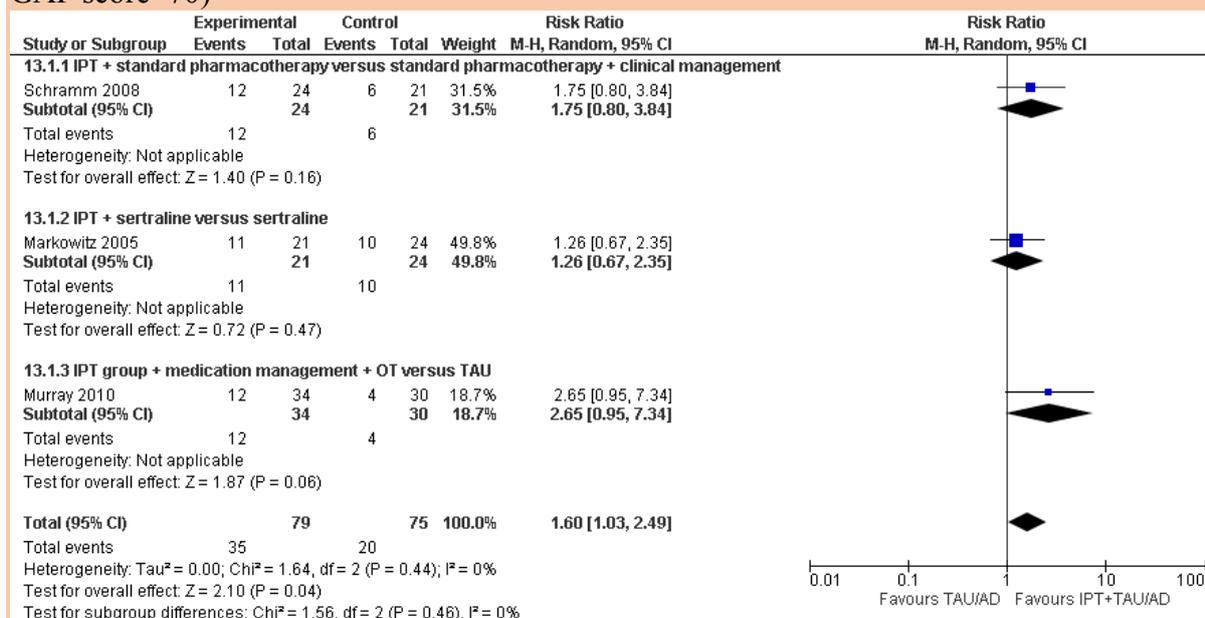
Depression in adults: treatment and management

Forest plots

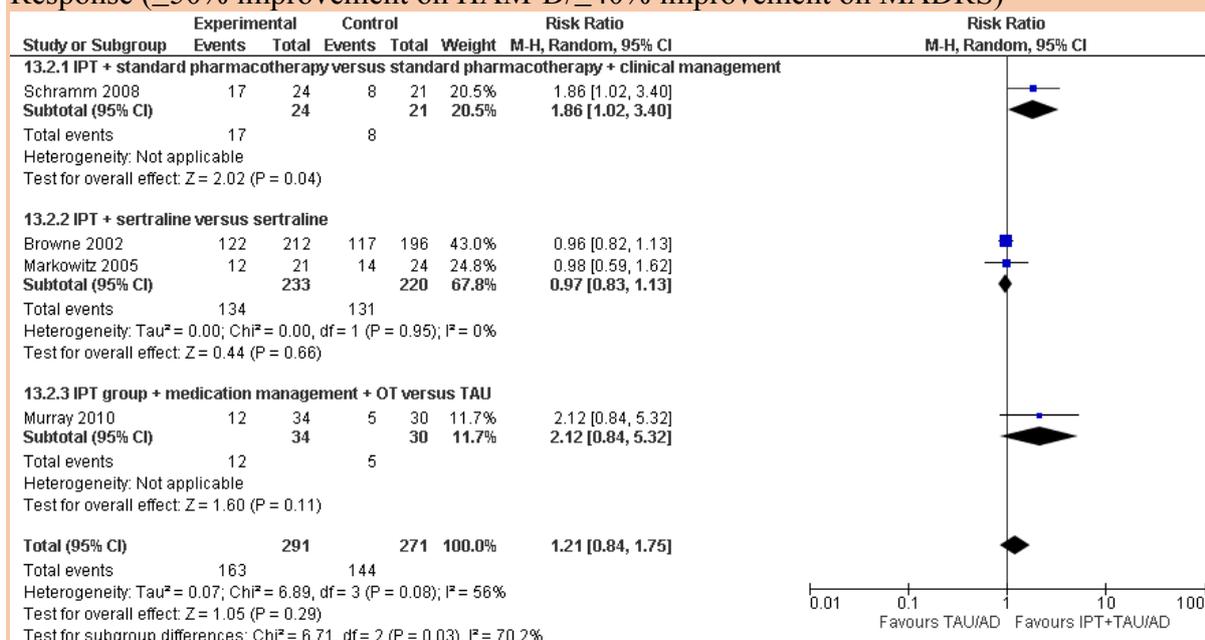


IPT + TAU/AD versus TAU/AD-only for chronic depressive symptoms

Remission (score ≤ 7 on HAM-D/score < 7 on HAM-D & $> 50\%$ improvement on HAMD & GAF score > 70)



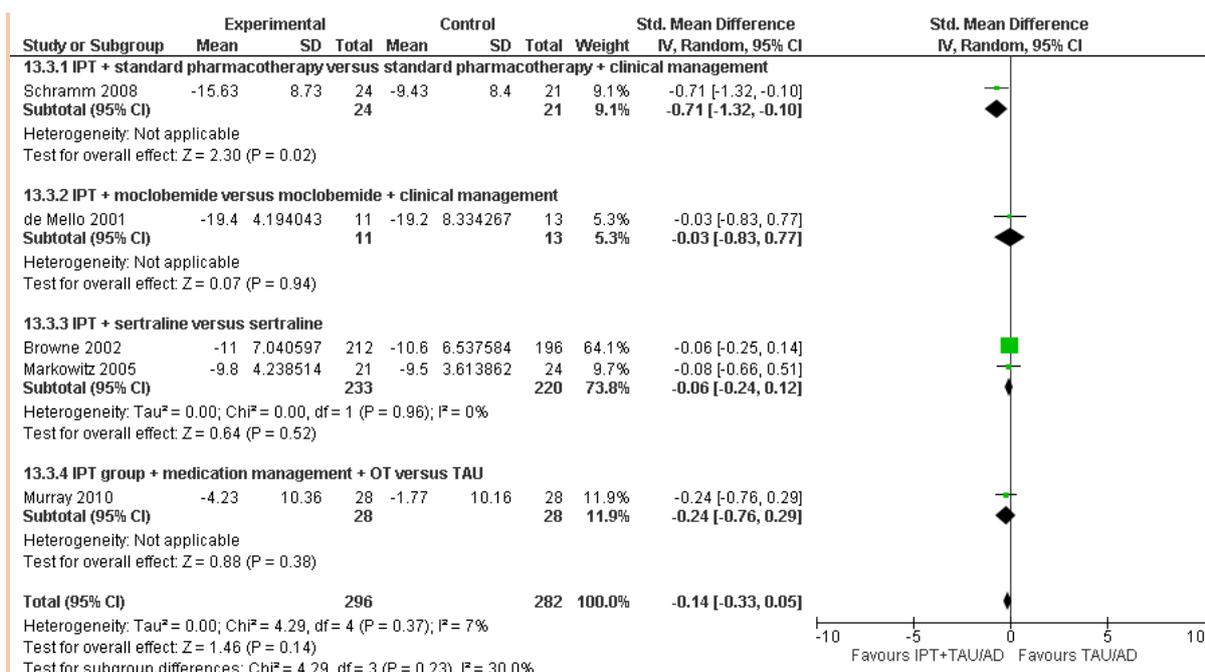
Response ($\geq 50\%$ improvement on HAM-D/ $\geq 40\%$ improvement on MADRS)



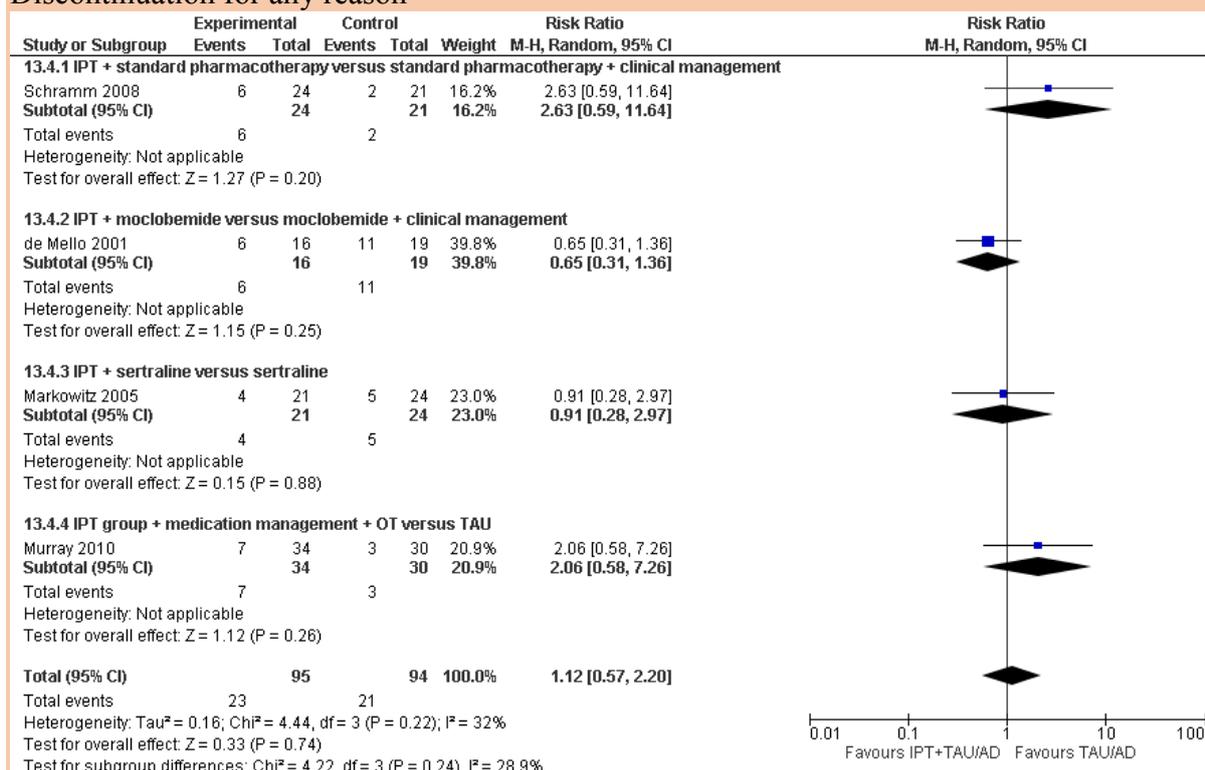
Depression symptomatology (HAMD/MADRS change score)

Depression in adults: treatment and management

Forest plots



Discontinuation for any reason

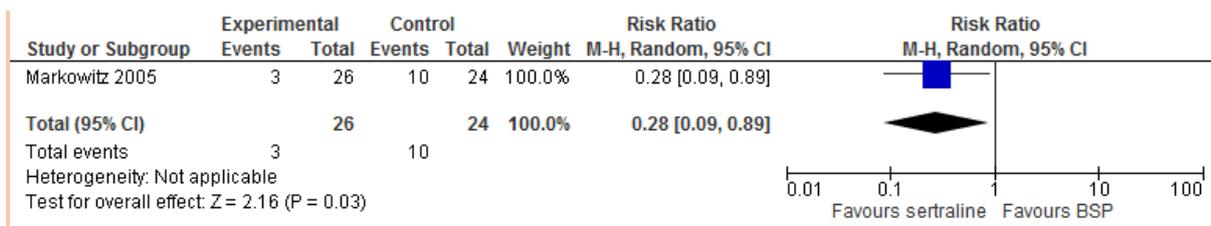


Brief supportive psychotherapy (BSP) versus sertraline for chronic depressive symptoms

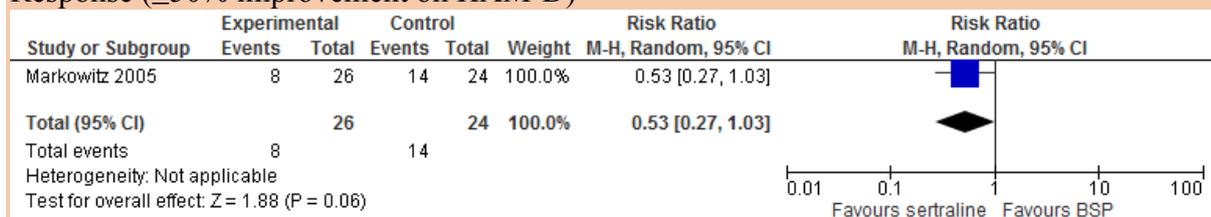
Remission (score <7 on HAM-D & >50% improvement on HAMD & GAF score >70)

Depression in adults: treatment and management

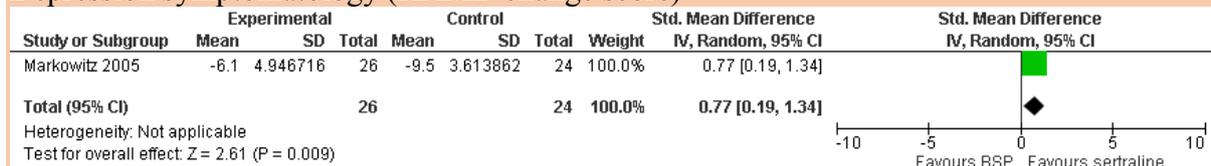
Forest plots



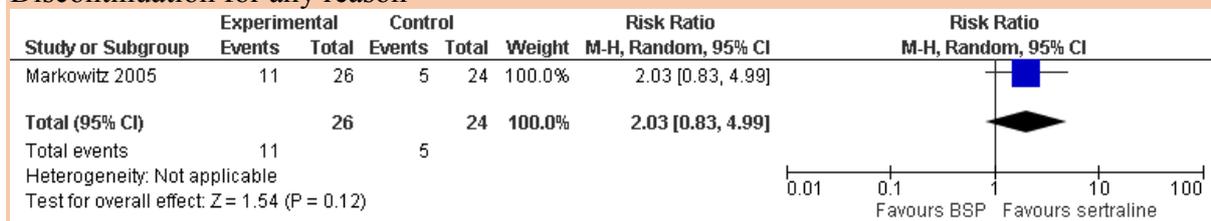
Response ($\geq 50\%$ improvement on HAM-D)



Depression symptomatology (HAMD change score)

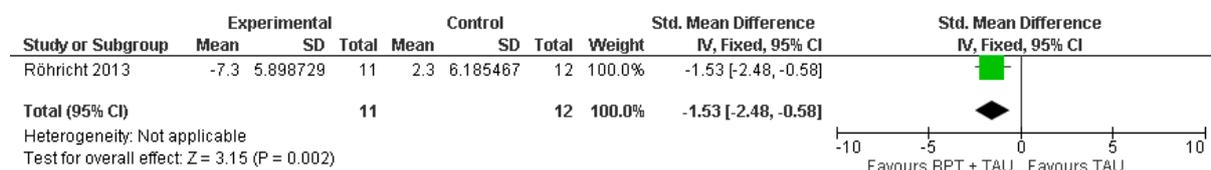


Discontinuation for any reason

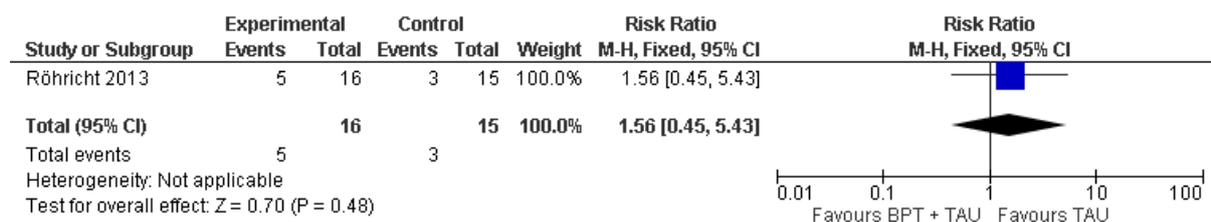


Body psychotherapy (BPT) + TAU versus TAU for chronic depressive symptoms

Depression symptomatology (HAMD change score)



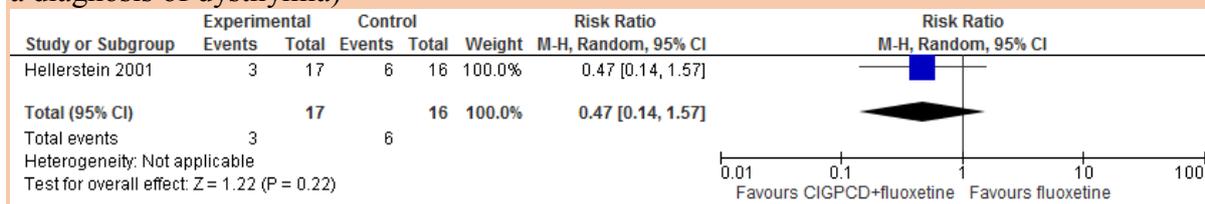
Discontinuation for any reason



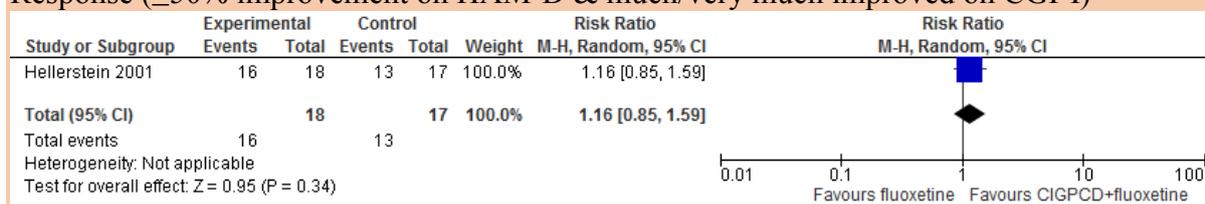
Depression in adults: treatment and management
Forest plots

Cognitive-Interpersonal Group Psychotherapy for Chronic Depression (CIGP-CD) + fluoxetine versus fluoxetine (maintenance treatment) for relapse prevention in dysthymia

Relapse (score >0 on item #1 (depressed mood) on HAM-D OR meeting DSM-IV criteria for a diagnosis of dysthymia)



Response ($\geq 50\%$ improvement on HAM-D & much/very much improved on CGI-I)



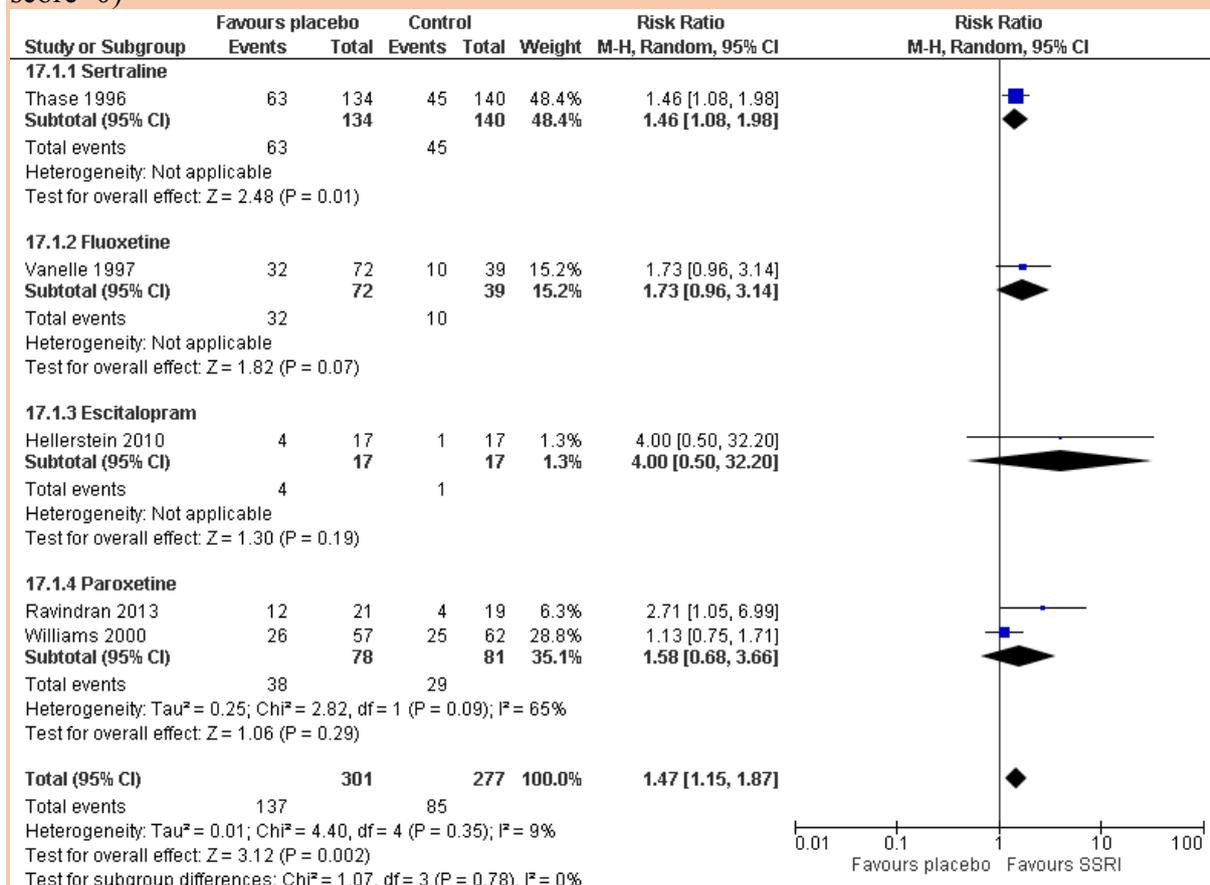
Discontinuation for any reason



Depression in adults: treatment and management
Forest plots

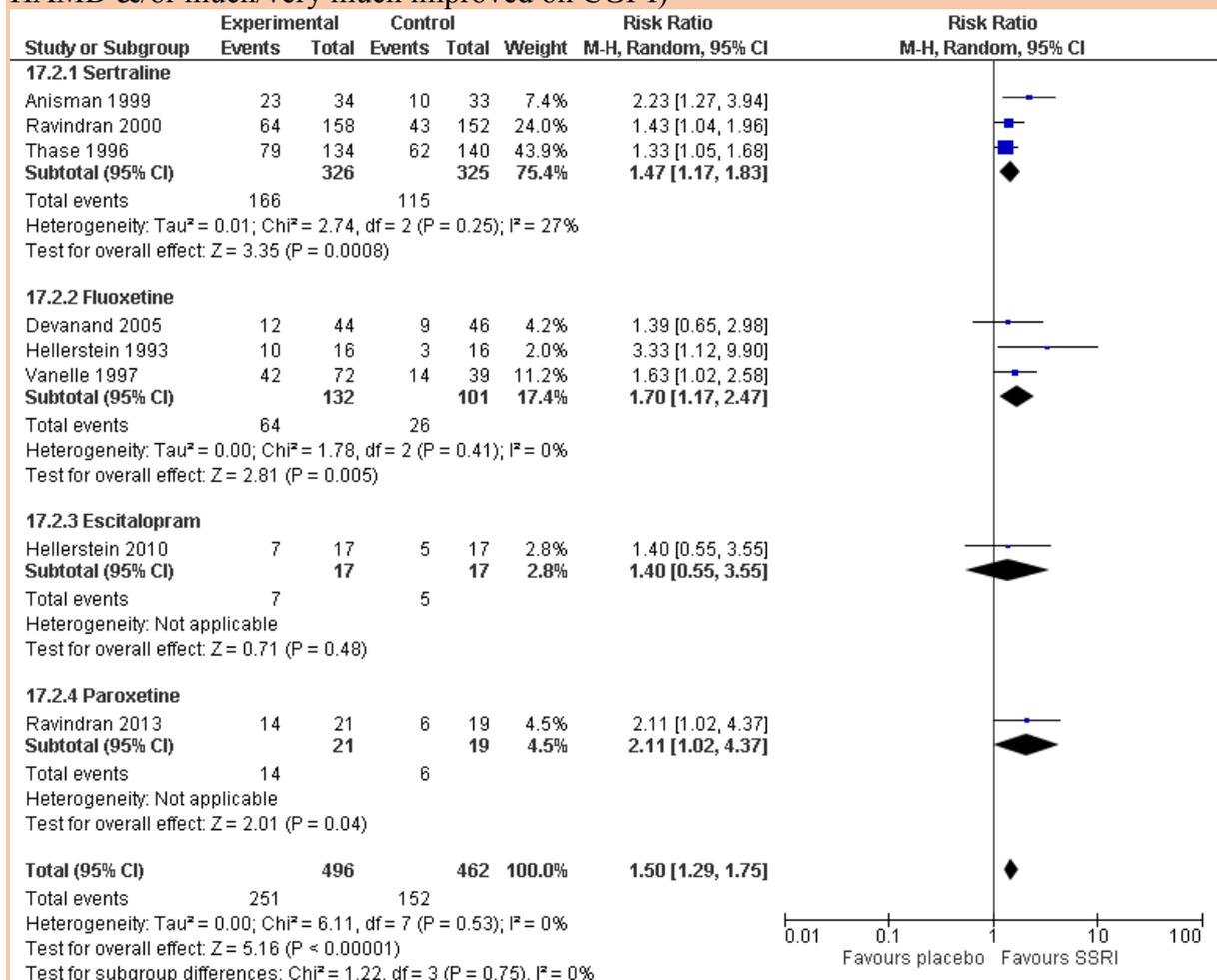
SSRIs versus placebo for chronic depressive symptoms

Remission (score ≤ 4 / < 7 / ≤ 8 on HAM-D/ ≤ 4 on HAM-D & HAMD item # 1 [depressed mood] score=0)



Depression in adults: treatment and management
Forest plots

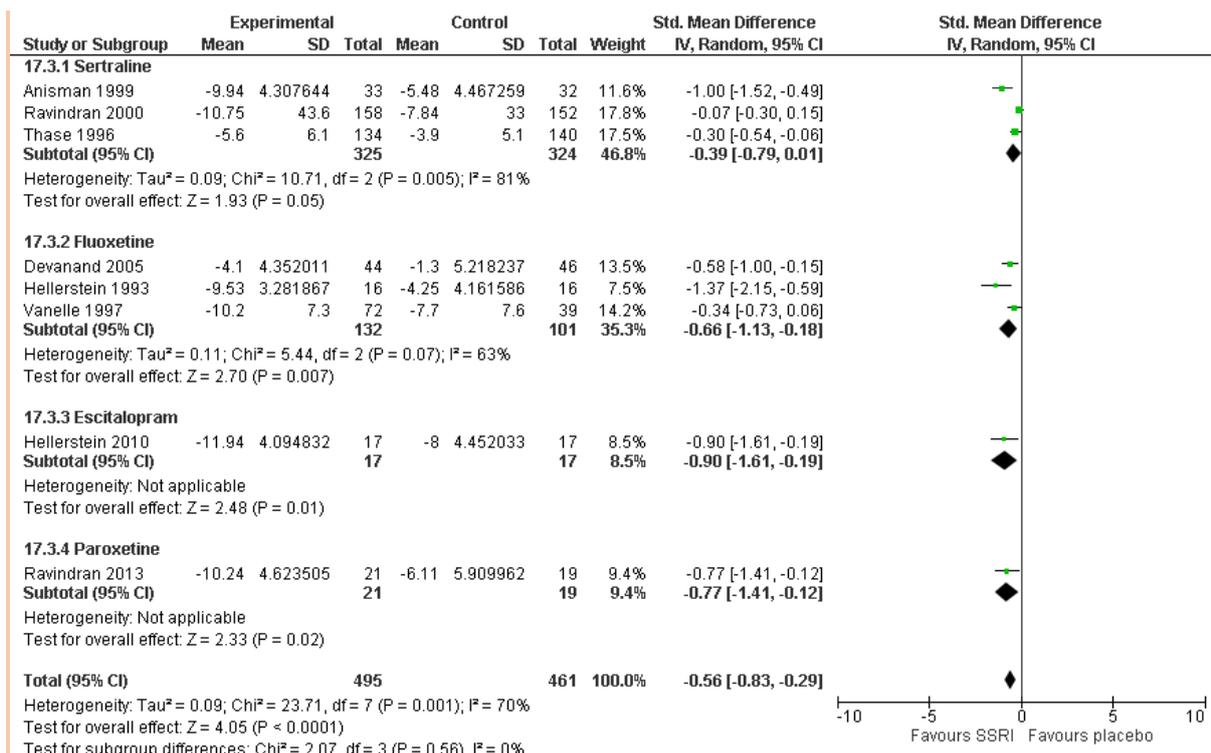
Response ($\geq 50\%$ improvement on HAMD & HAMD score ≤ 10 / $\geq 50\%$ improvement on HAMD &/or much/very much improved on CGI-I)



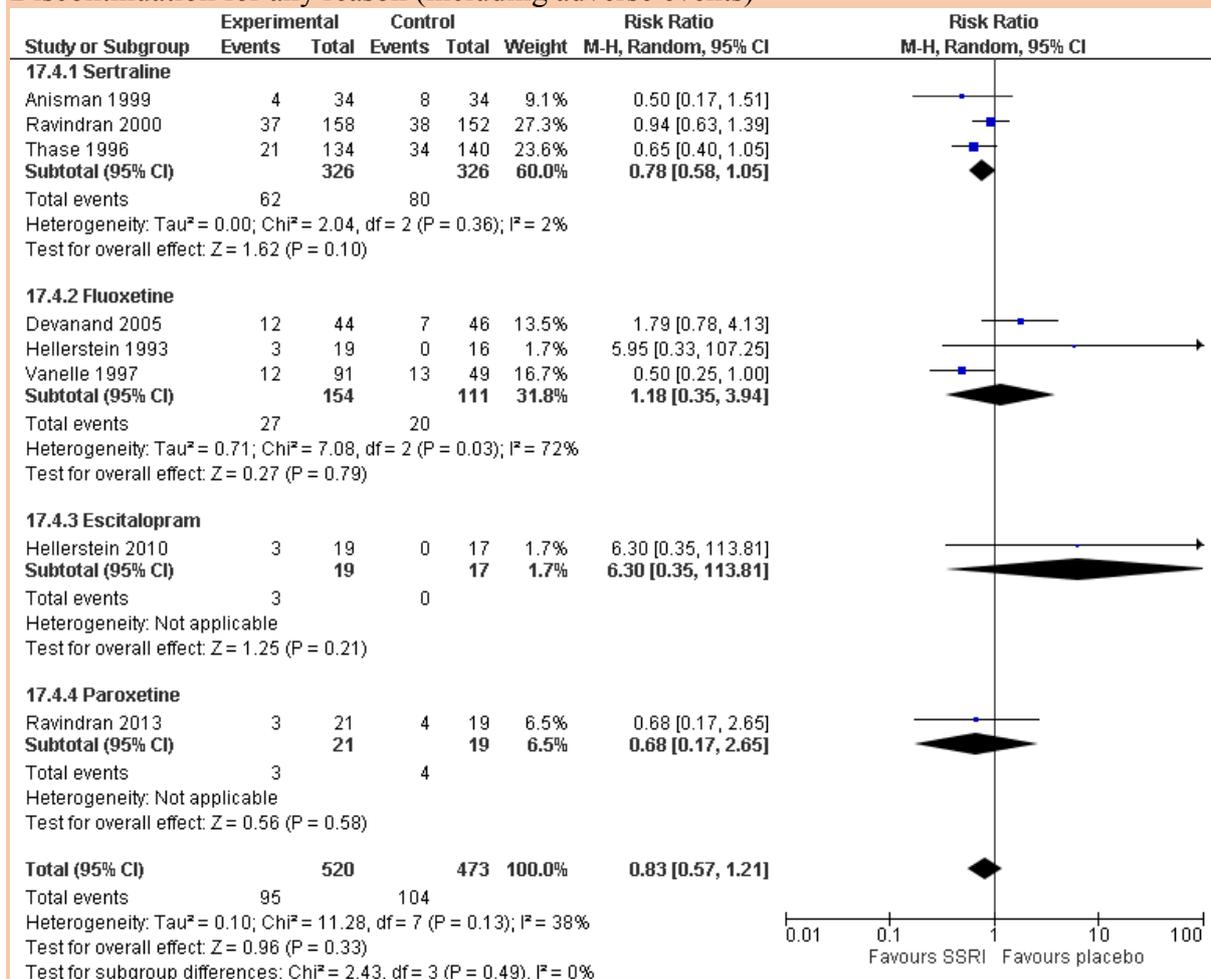
Depression symptomatology (HAMD change score)

Depression in adults: treatment and management

Forest plots



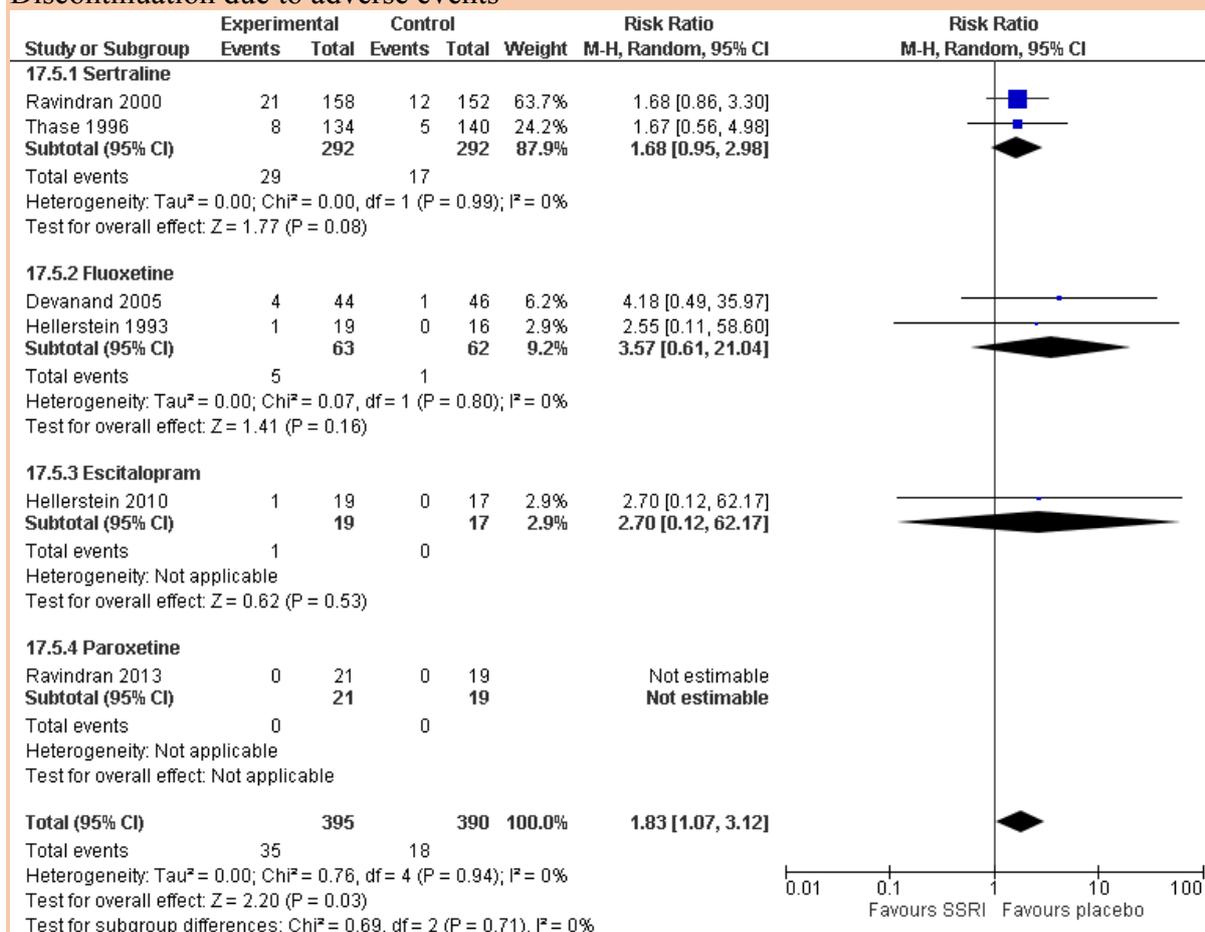
Discontinuation for any reason (including adverse events)



Depression in adults: treatment and management

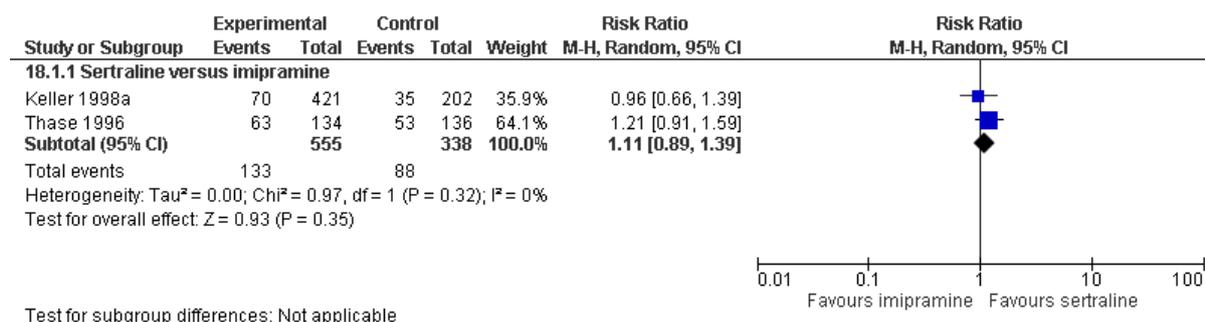
Forest plots

Discontinuation due to adverse events

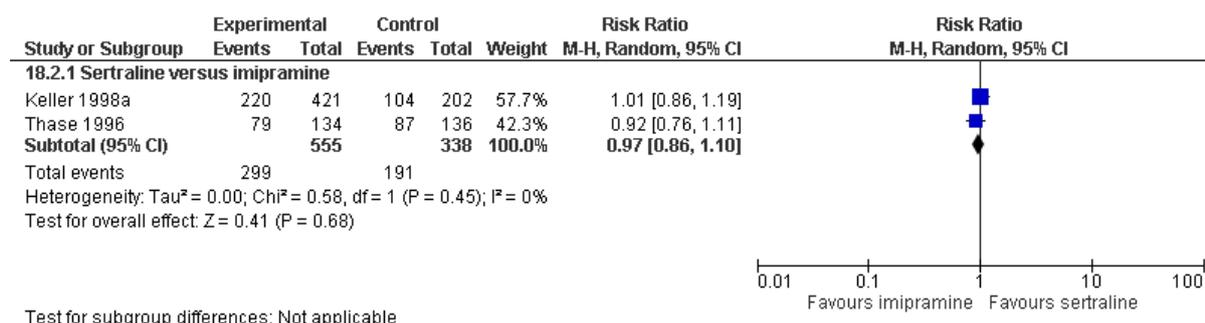


SSRI versus TCA for chronic depressive symptoms

Remission (score ≤ 7 on HAM-D & much/very much improved on CGI-I/≤4 on HAM-D)



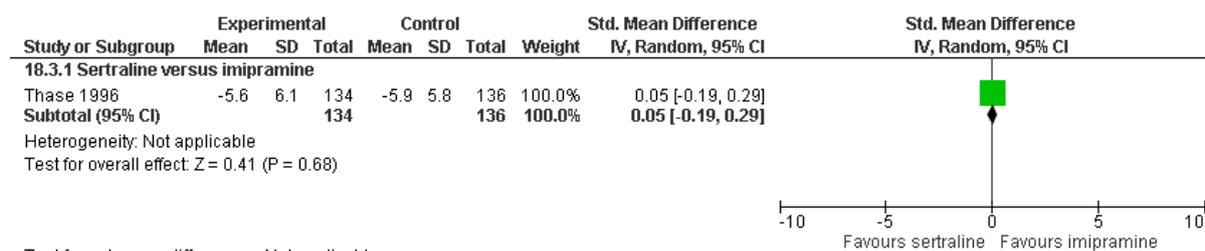
Response (≥50% on HAM-D & much/very much improved on CGI-I/≤4 on HAM-D)



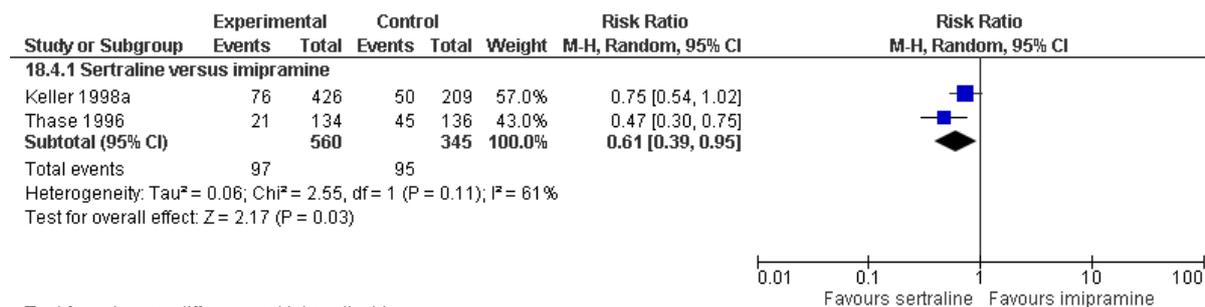
Depression in adults: treatment and management

Forest plots

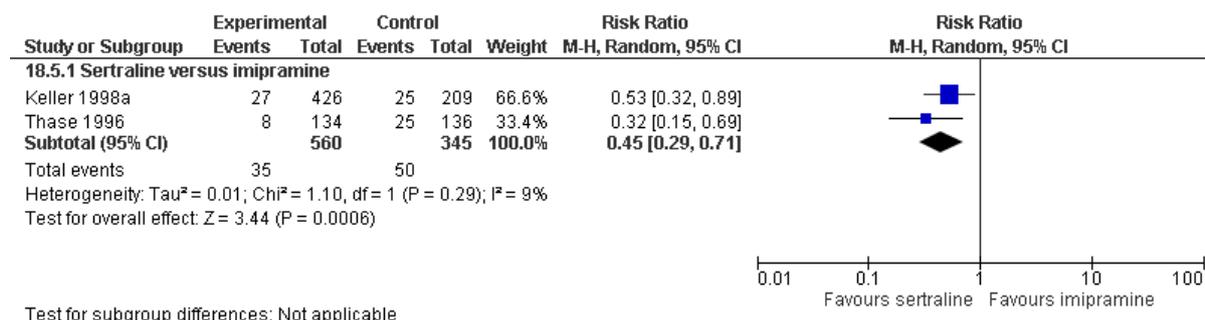
Depression symptomatology (HAM-D change score)



Discontinuation for any reason (including adverse events)

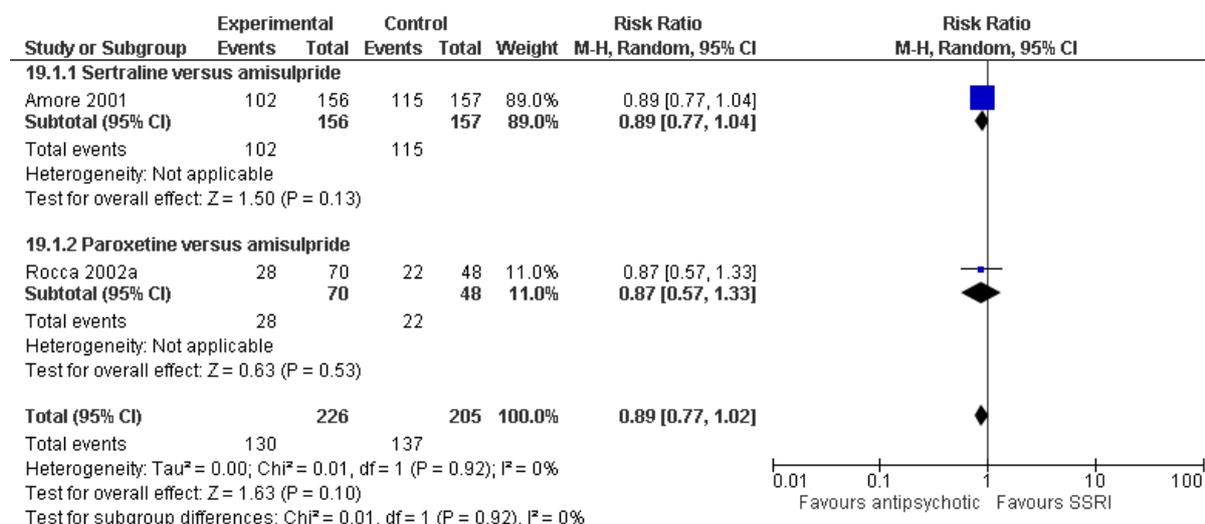


Discontinuation due to adverse events



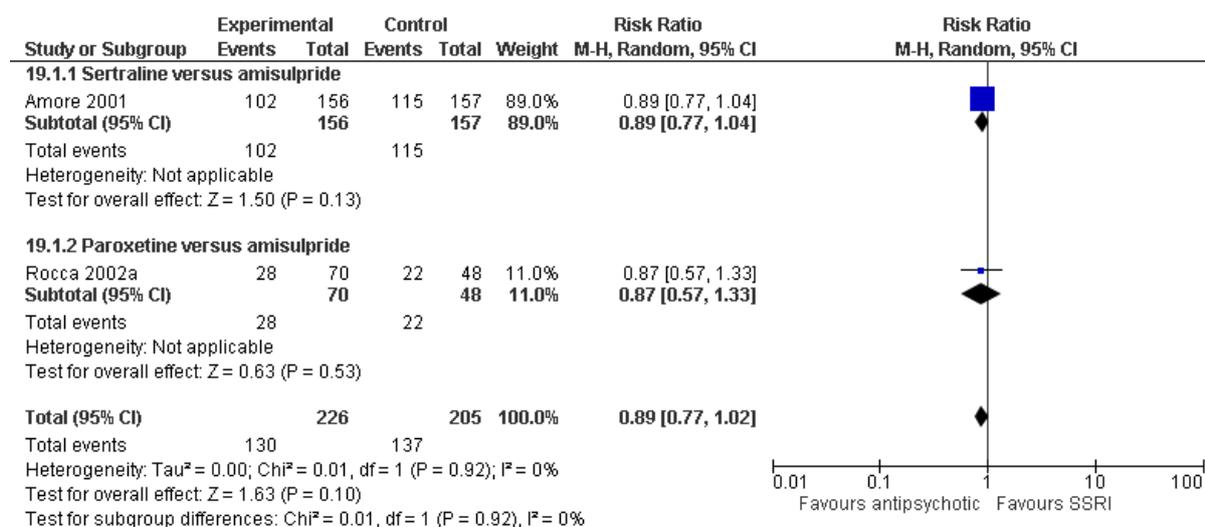
SSRI versus antipsychotic for dysthymia or double depression

Remission (</=7 on HAM-D)

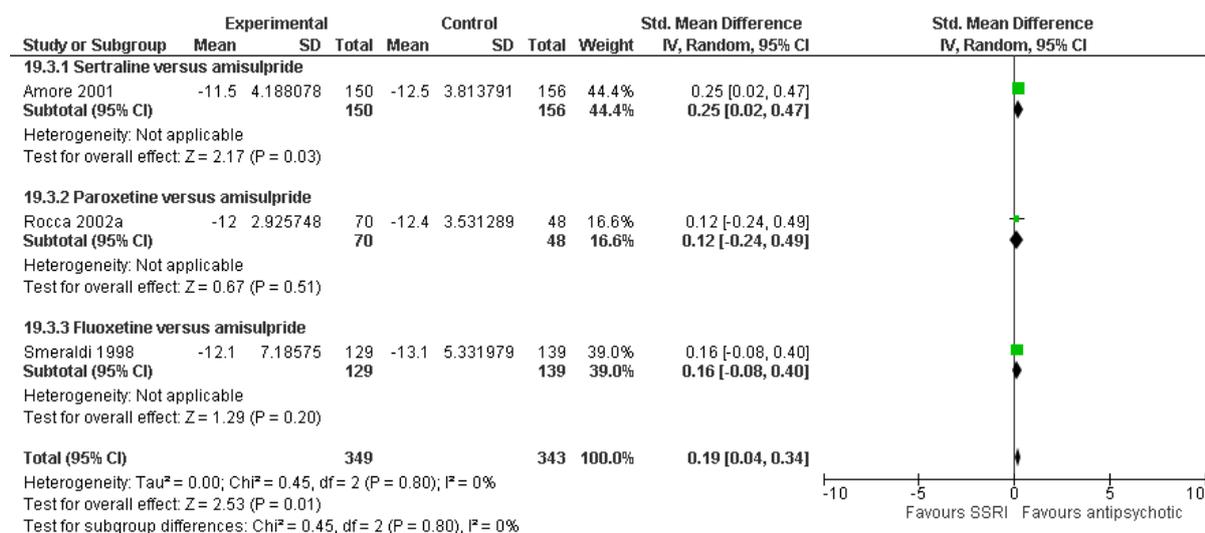


Depression in adults: treatment and management Forest plots

Response ($\geq 50\%$ improvement on HAMD/MADR)



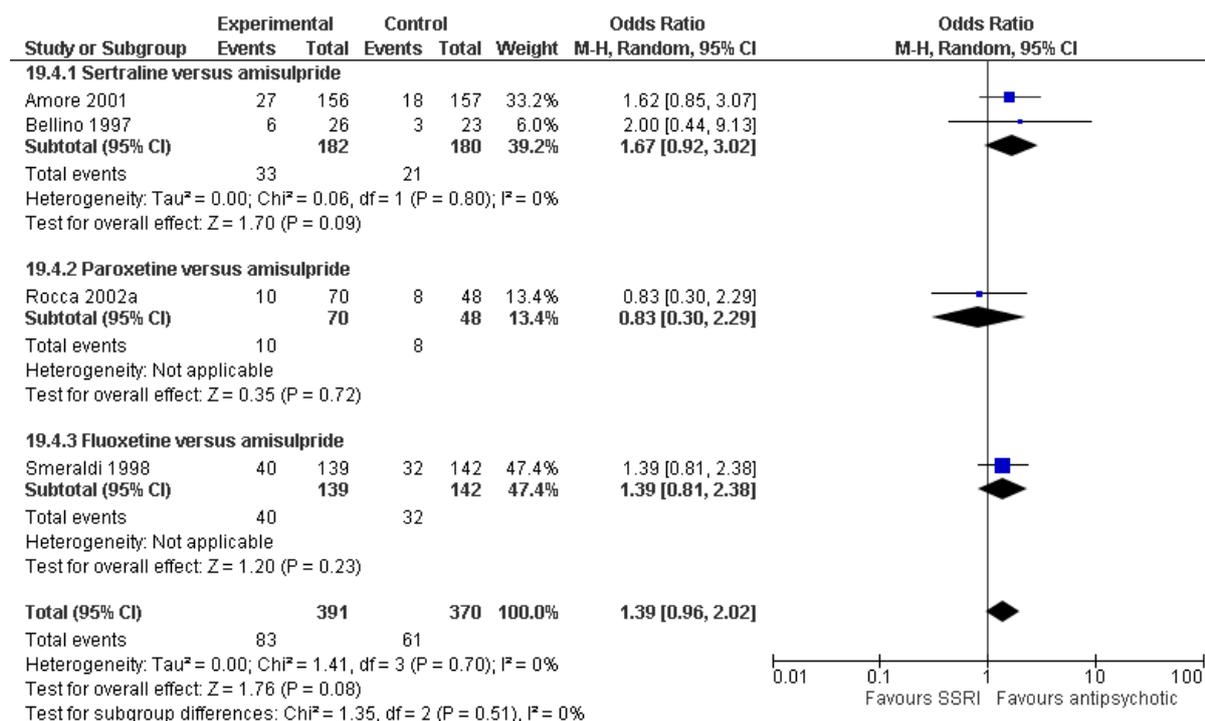
Depression symptomatology (HAMD/MADRS change score)



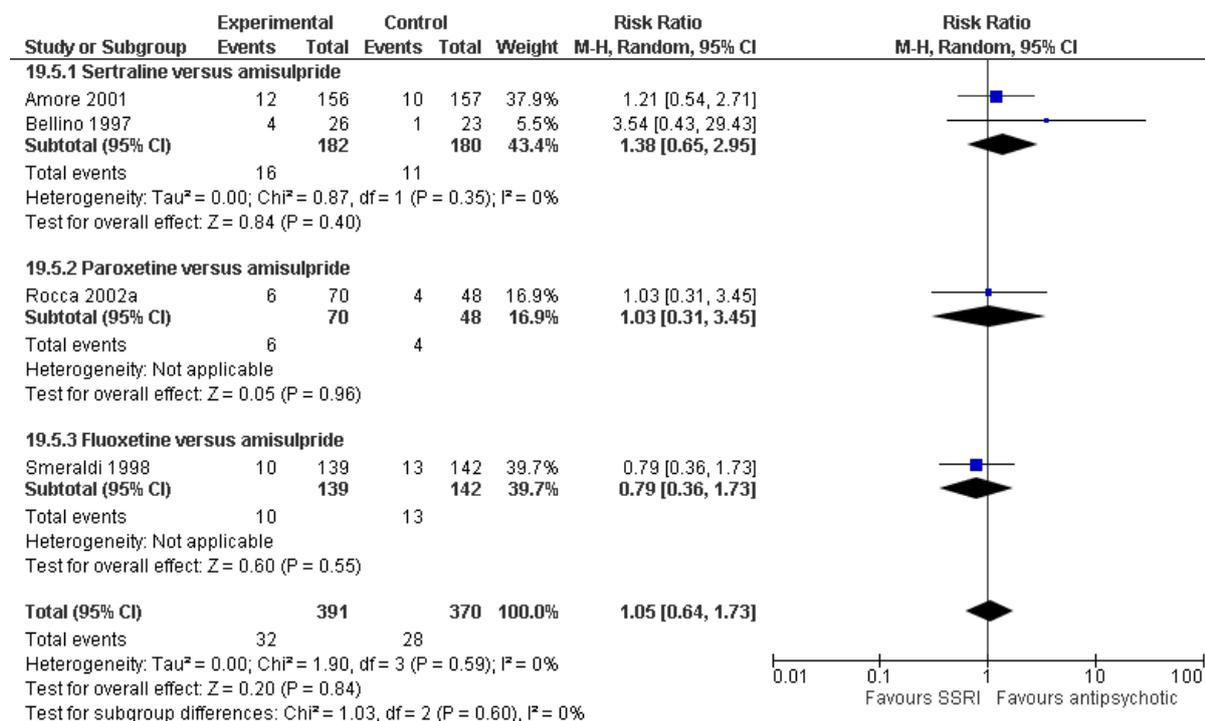
Discontinuation for any reason

Depression in adults: treatment and management

Forest plots



Discontinuation due to adverse events

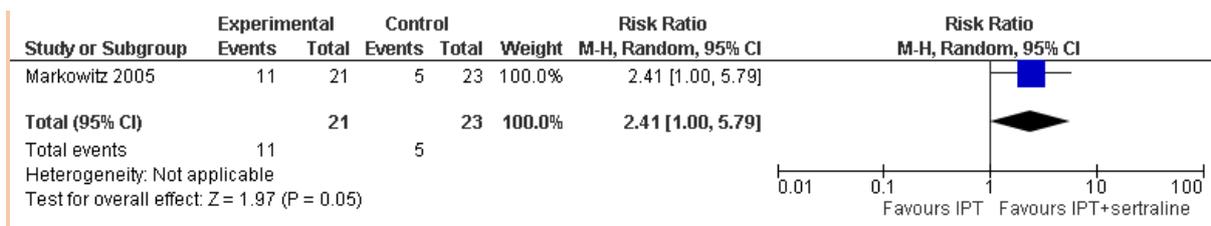


Sertraline versus IPT versus IPT- only for dysthymia

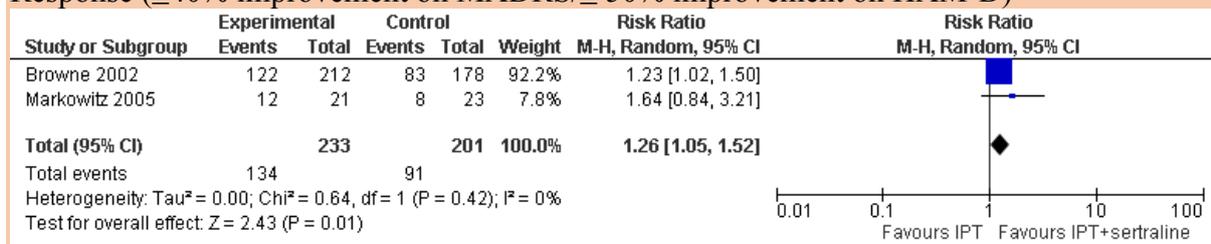
Remission (score <7 on HAM-D & > 50% improvement on HAMD & GAF score > 70)

Depression in adults: treatment and management

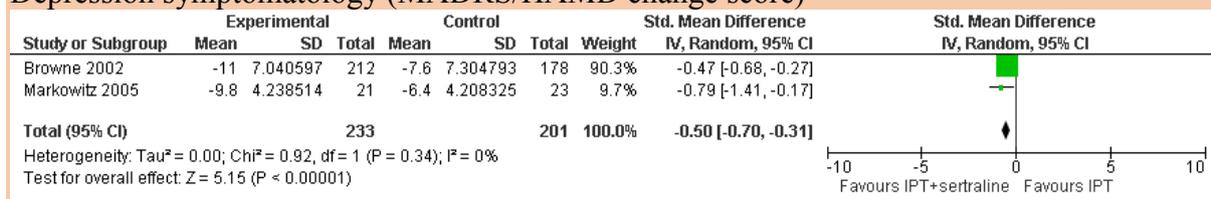
Forest plots



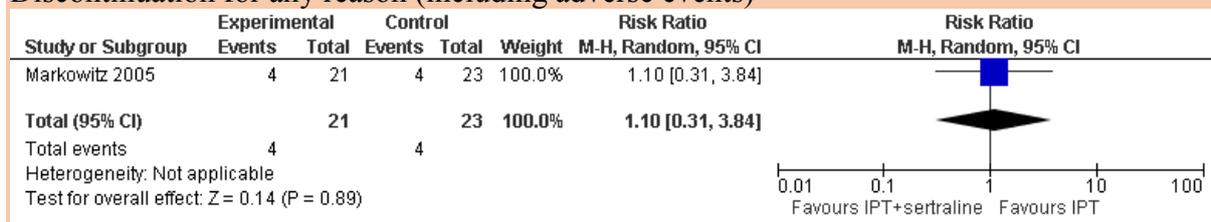
Response ($\geq 40\%$ improvement on MADRS/ $\geq 50\%$ improvement on HAM-D)



Depression symptomatology (MADRS/HAMD change score)



Discontinuation for any reason (including adverse events)

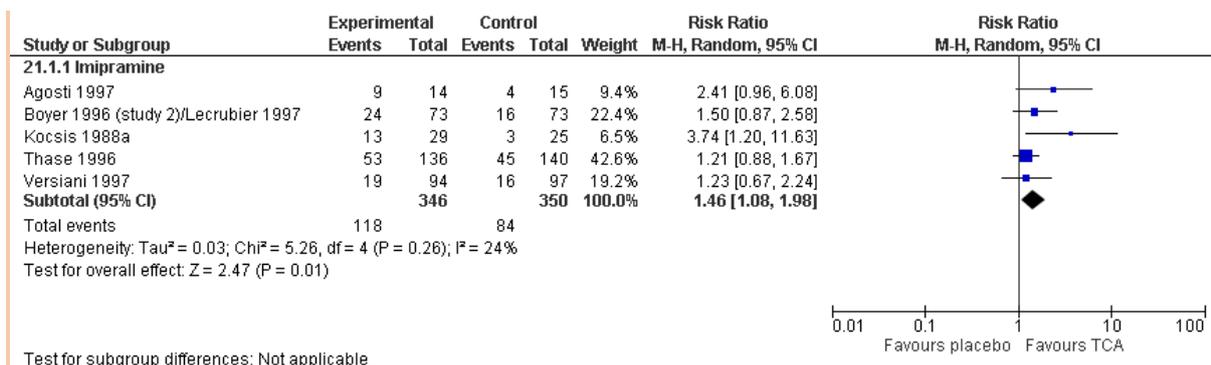


TCA's versus placebo for chronic depressive symptoms

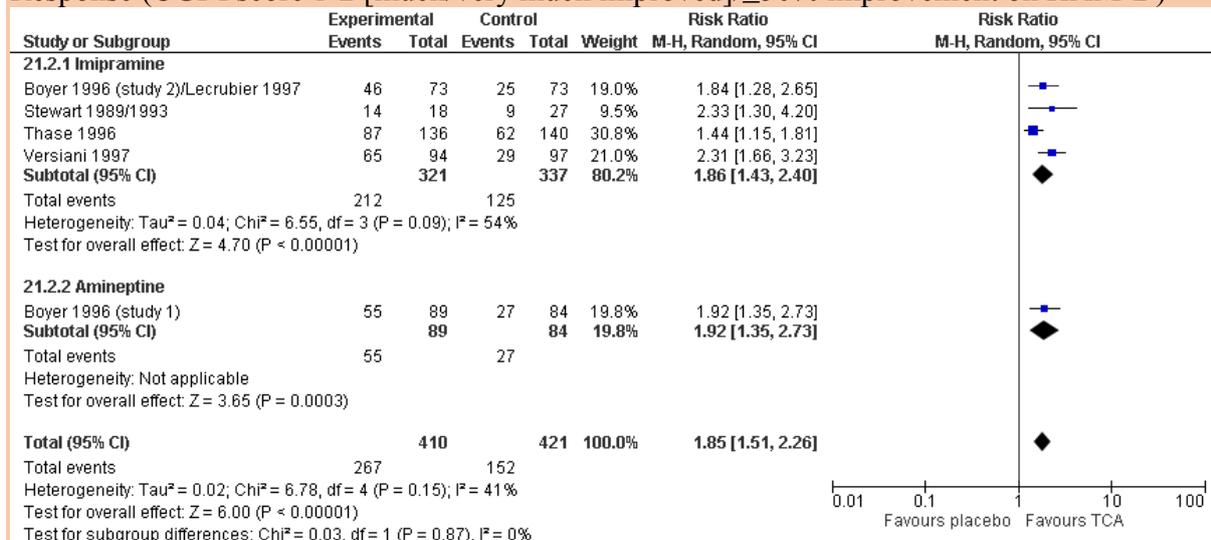
Remission (score ≤ 4 on HAM-D/ ≤ 6 on HAM-D & ≥ 10 -point improvement on GAS & no longer meet DSM-III criteria for dysthymia/ < 8 on MADRS)

Depression in adults: treatment and management

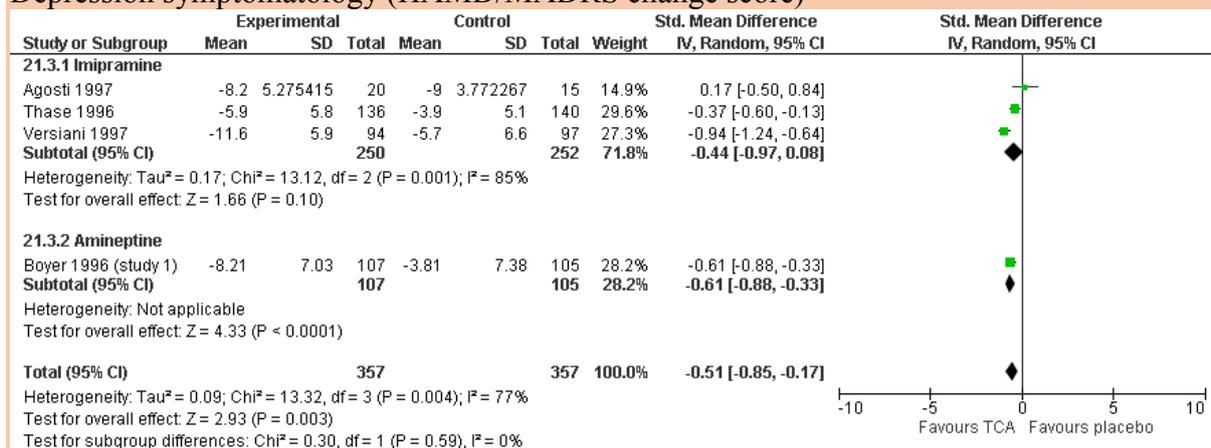
Forest plots



Response (CGI-I score 1-2 [much/very much improved]/≥50% improvement on HAM-D)



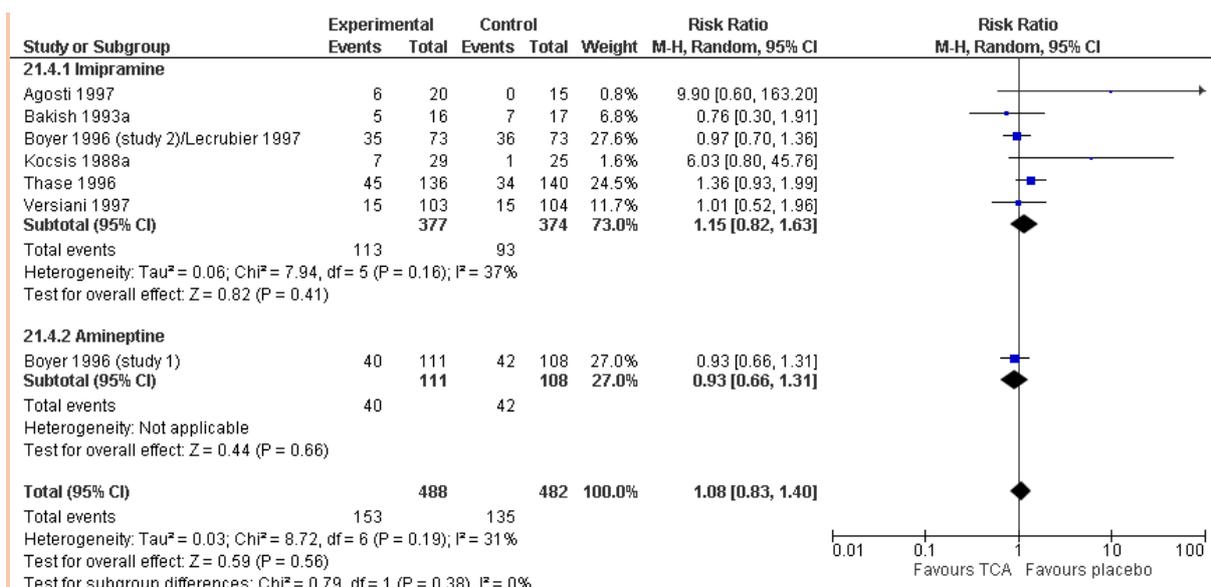
Depression symptomatology (HAMD/MADRS change score)



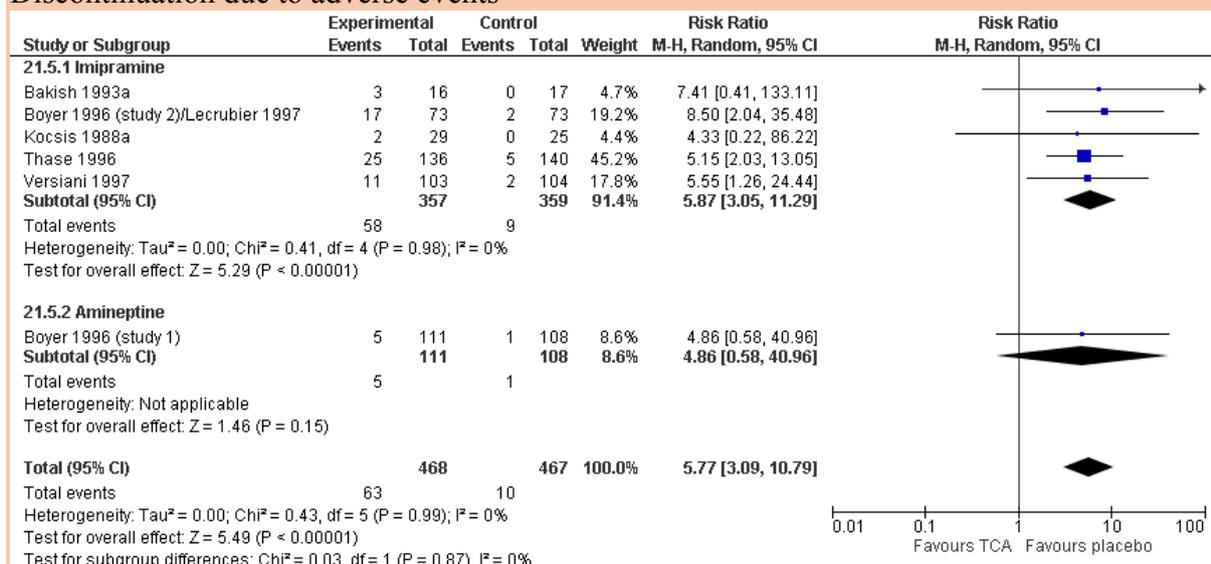
Discontinuation for any reason

Depression in adults: treatment and management

Forest plots

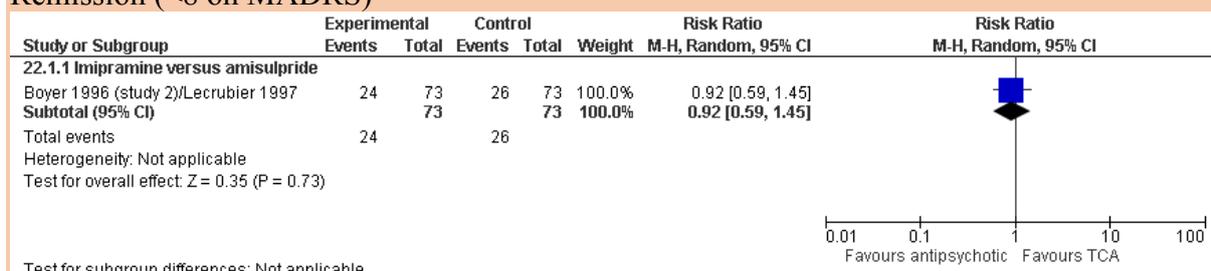


Discontinuation due to adverse events



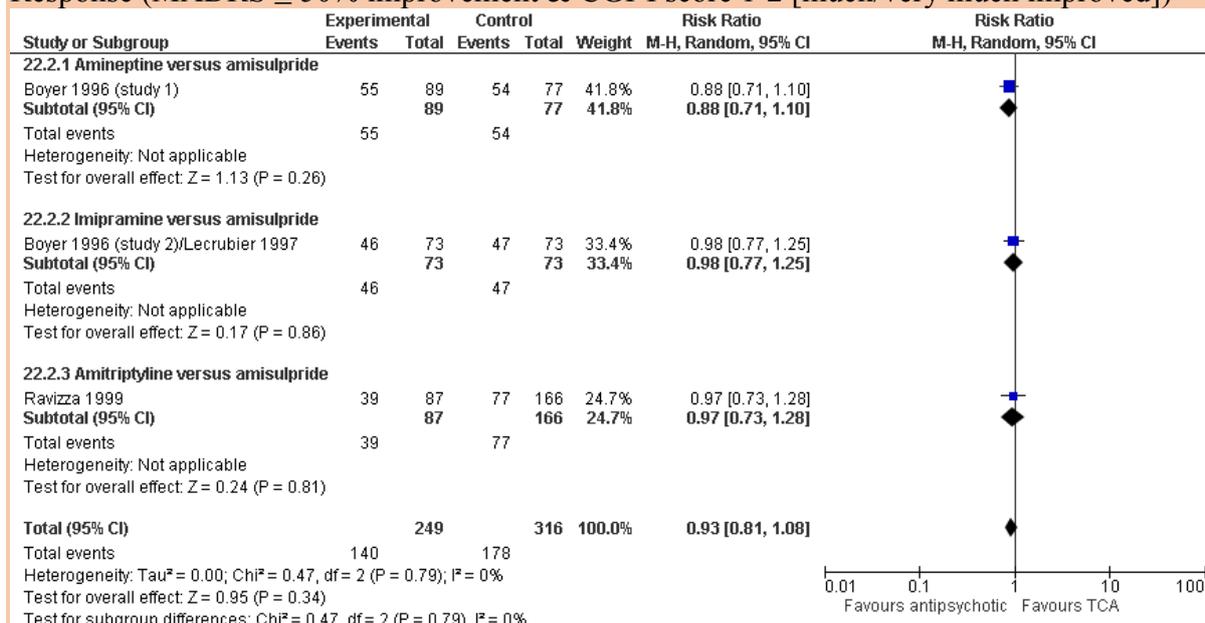
TCA versus antipsychotic for chronic depressive symptoms

Remission (<8 on MADRS)

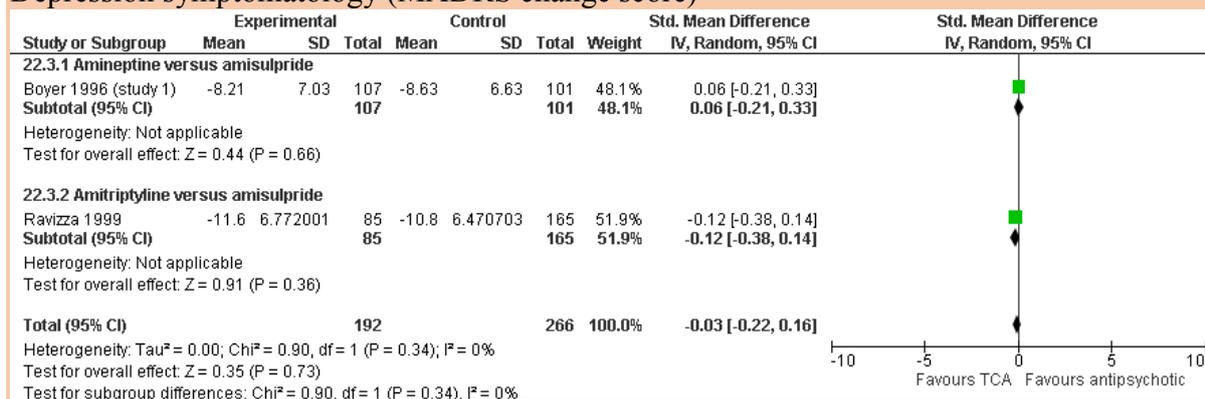


Depression in adults: treatment and management
Forest plots

Response (MADRS \geq 50% improvement & CGI-I score 1-2 [much/very much improved])



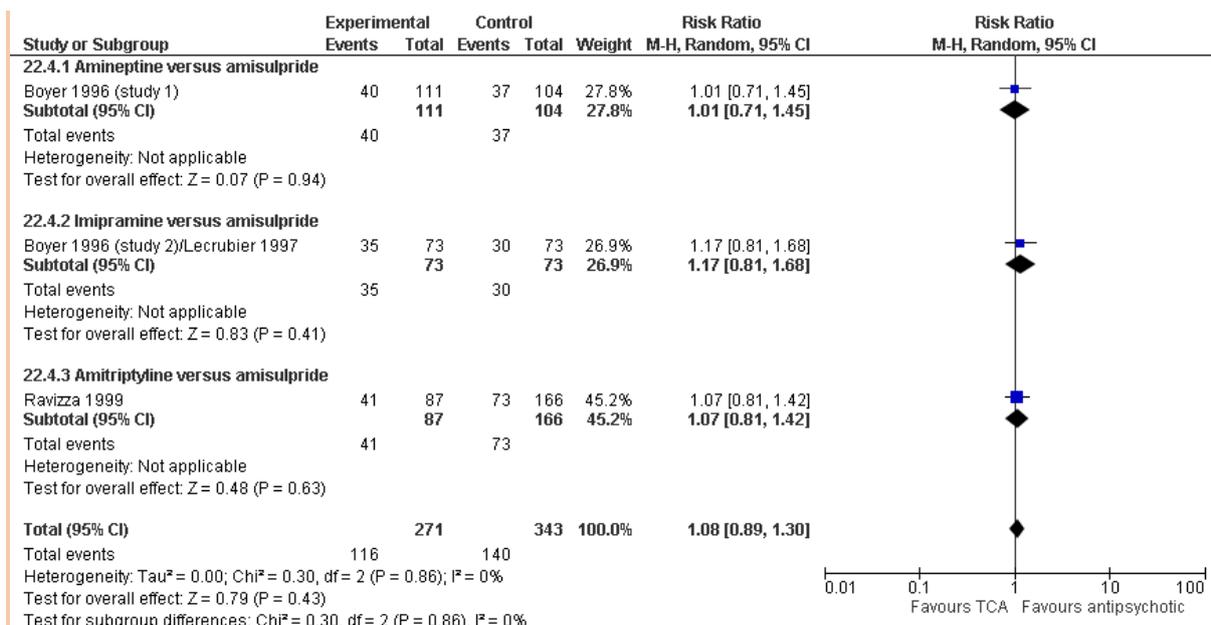
Depression symptomatology (MADRS change score)



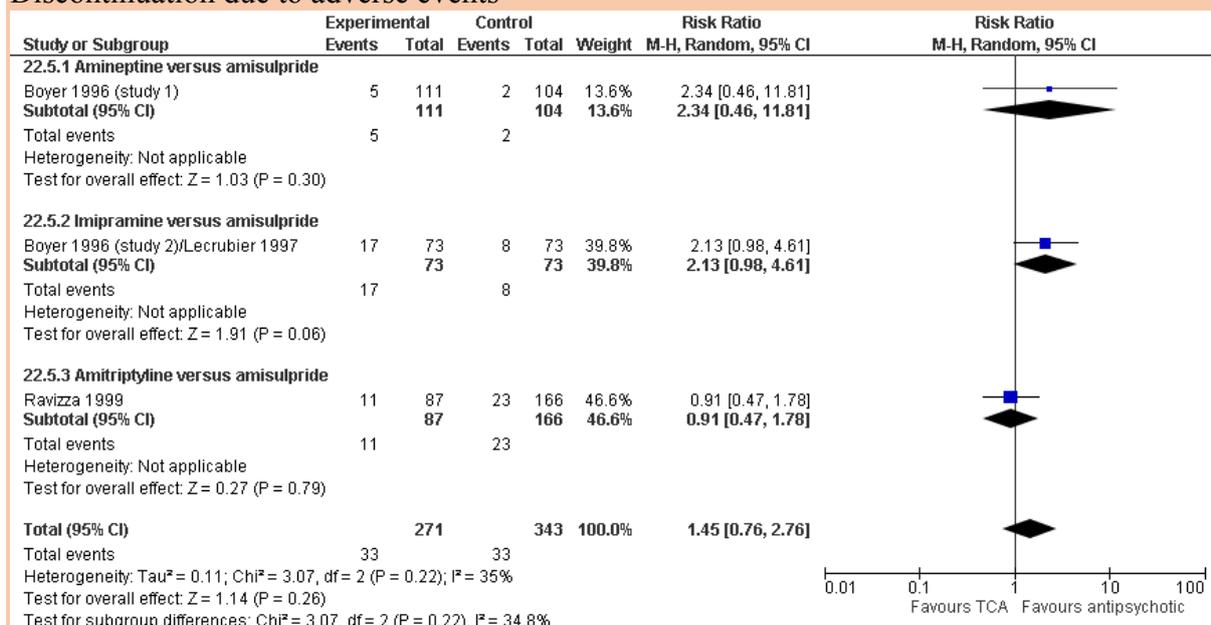
Discontinuation for any reason

Depression in adults: treatment and management

Forest plots



Discontinuation due to adverse events



Maintenance imipramine versus placebo for relapse prevention in chronic depressive symptoms

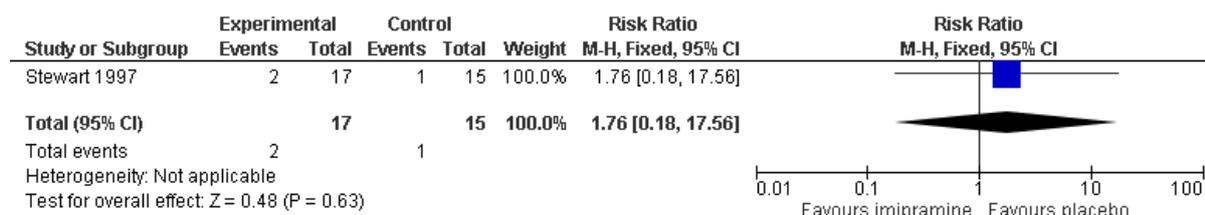
Relapse (≥ 3 on CGI-I on 2 consecutive weeks)



Discontinuation for any reason

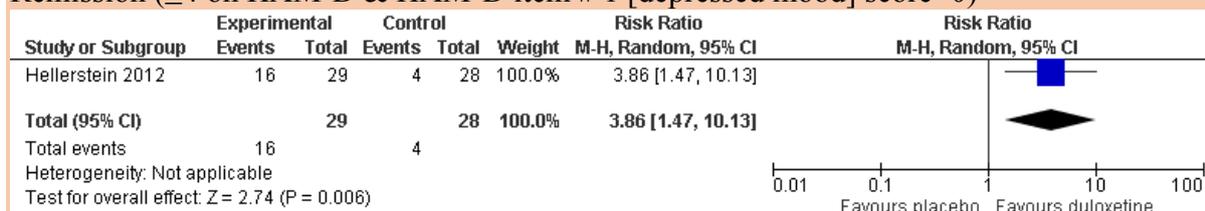
Depression in adults: treatment and management

Forest plots

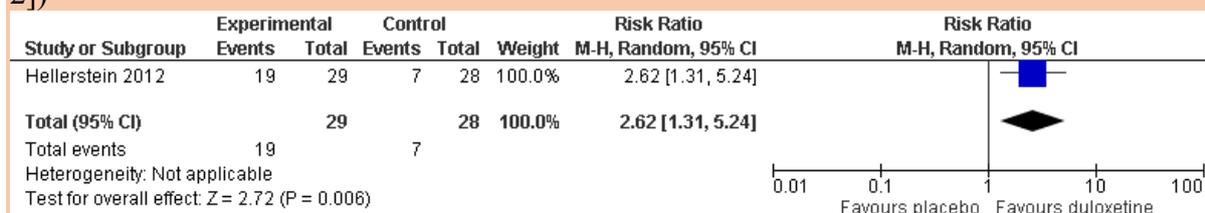


Duloxetine versus placebo for non-major chronic depressive symptoms

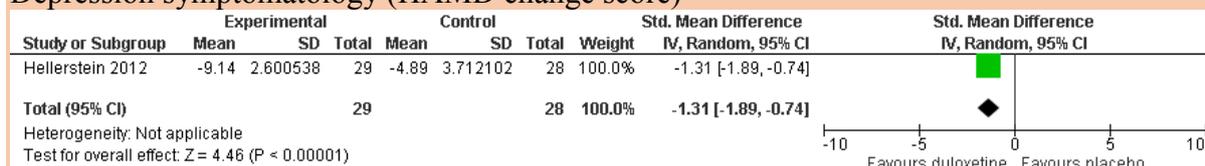
Remission (≤ 4 on HAM-D & HAM-D item # 1 [depressed mood] score=0)



Response ($\geq 50\%$ improvement on HAM-D & much/very much improved on CGI-I [score 1-2])

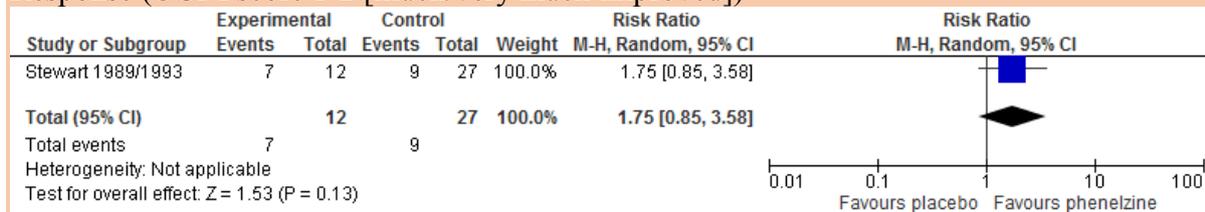


Depression symptomatology (HAMD change score)



Phenelzine versus placebo for chronic depressive symptoms

Response (CGI-I score 1-2 [much/very much improved])



Phenelzine versus imipramine for dysthymia

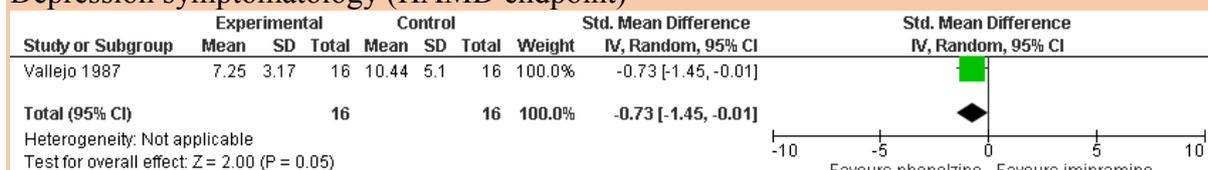
Response (CGI-I score 1-2 [much/very much improved])

Depression in adults: treatment and management

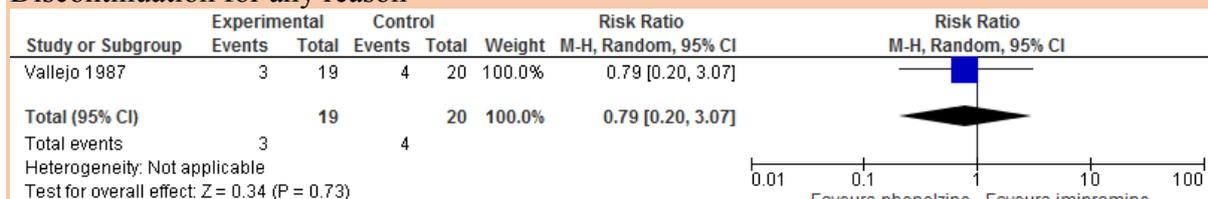
Forest plots



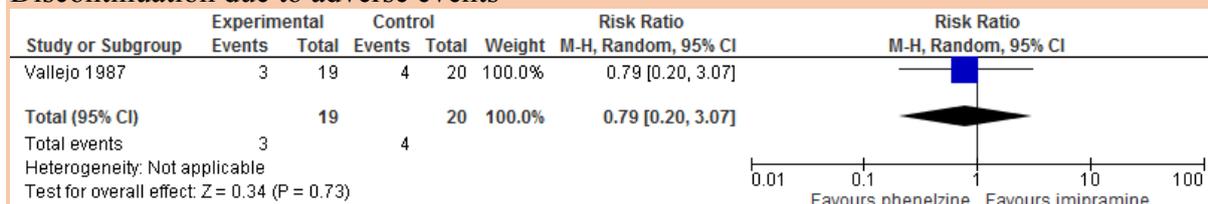
Depression symptomatology (HAMD endpoint)



Discontinuation for any reason

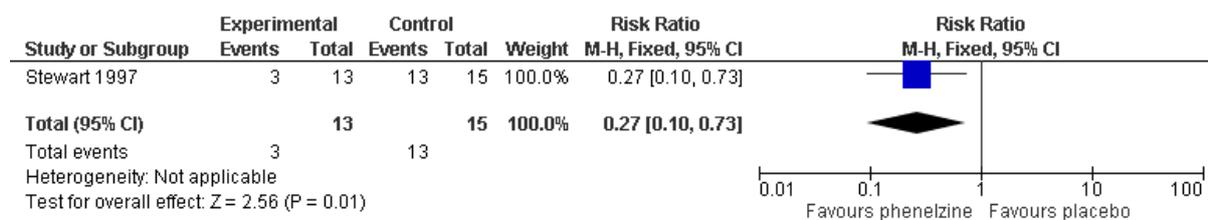


Discontinuation due to adverse events



Maintenance phenelzine versus placebo for relapse prevention in chronic depressive symptoms

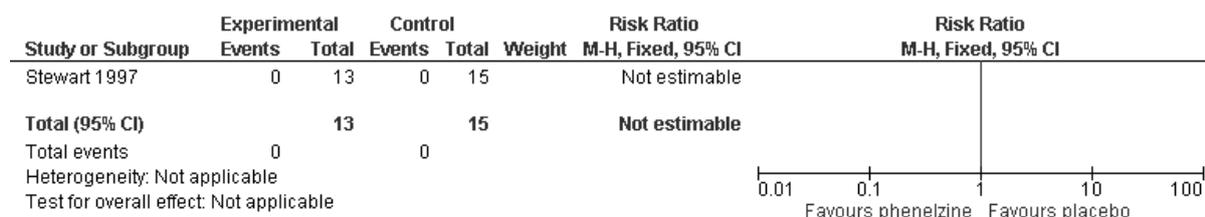
Relapse (≥ 3 on CGI-I on 2 consecutive weeks)



Discontinuation for any reason

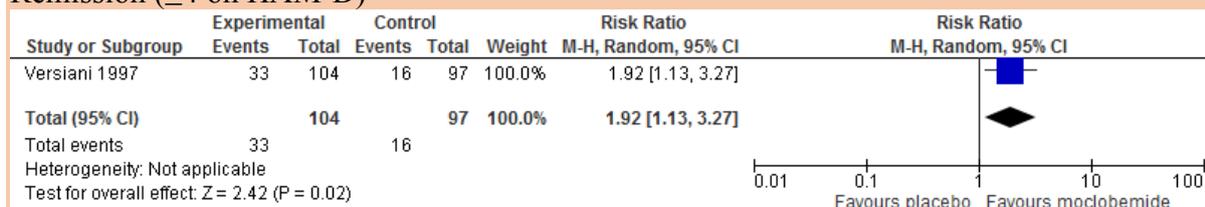
Depression in adults: treatment and management

Forest plots

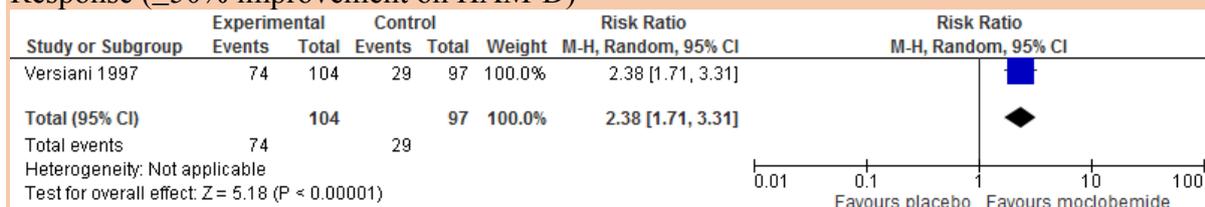


Moclobemide versus placebo for chronic depressive symptoms

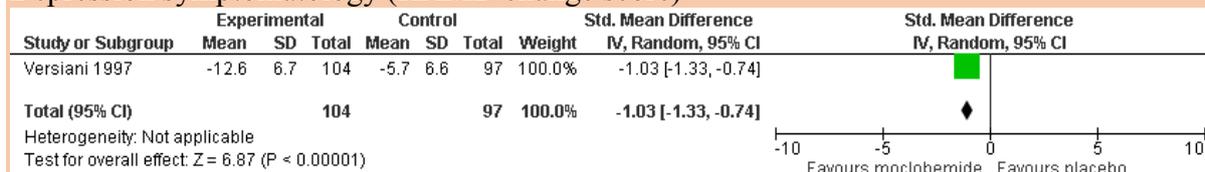
Remission (≤ 4 on HAM-D)



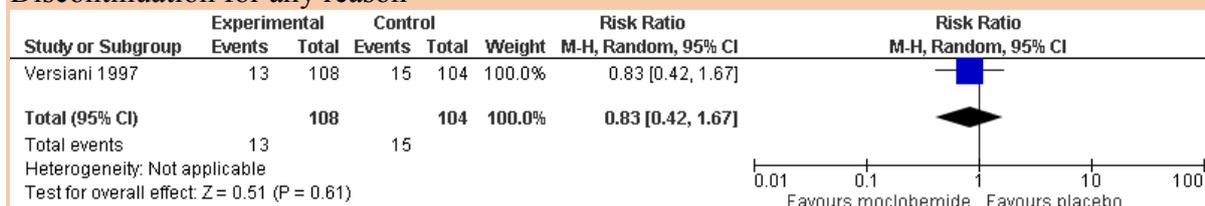
Response ($\geq 50\%$ improvement on HAM-D)



Depression symptomatology (HAMD change score)



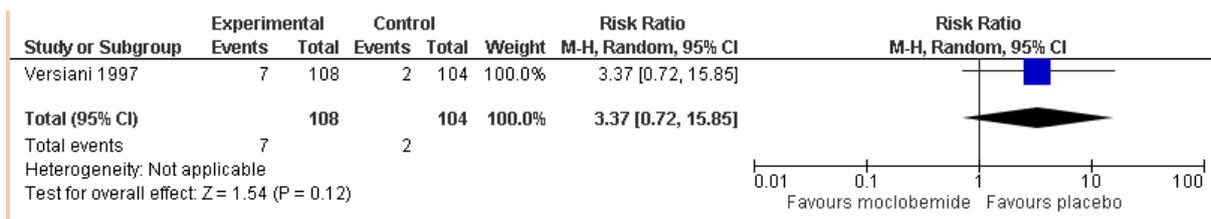
Discontinuation for any reason



Discontinuation due to adverse events

Depression in adults: treatment and management

Forest plots

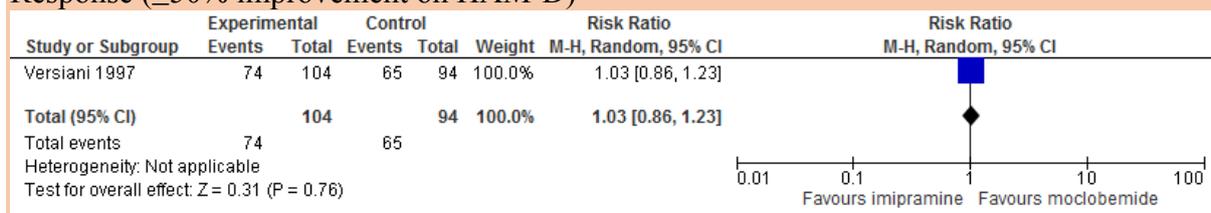


Moclobemide versus imipramine for chronic depressive symptoms

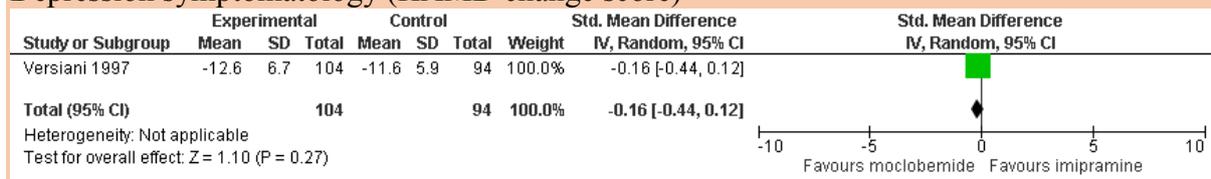
Remission (≤ 4 on HAM-D)



Response ($\geq 50\%$ improvement on HAM-D)



Depression symptomatology (HAMD change score)



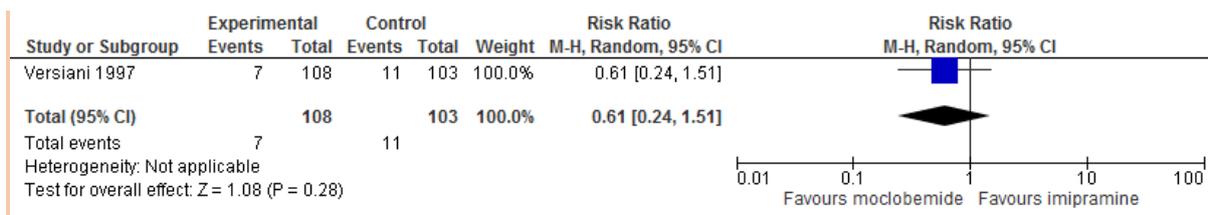
Discontinuation for any reason



Discontinuation due to adverse events

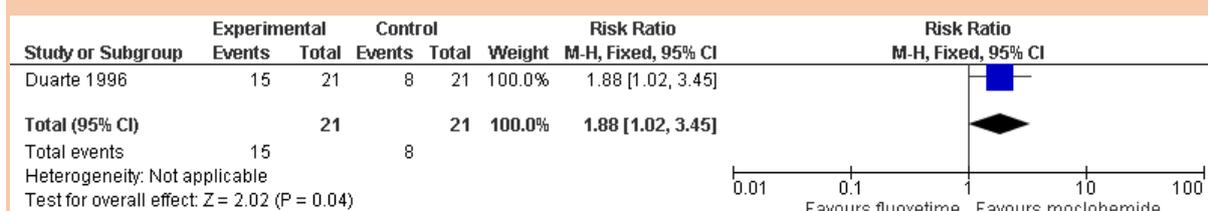
Depression in adults: treatment and management

Forest plots

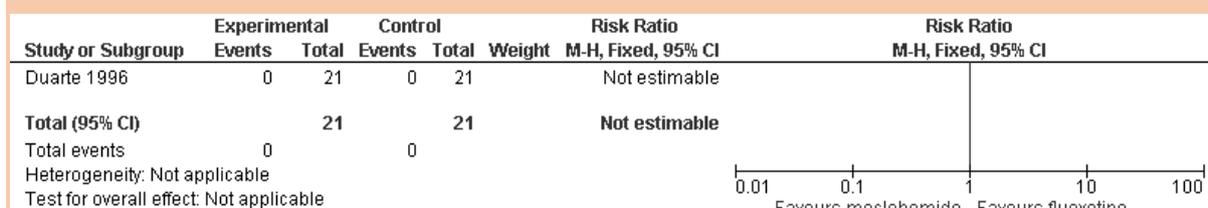


Moclobemide versus fluoxetine for double depression

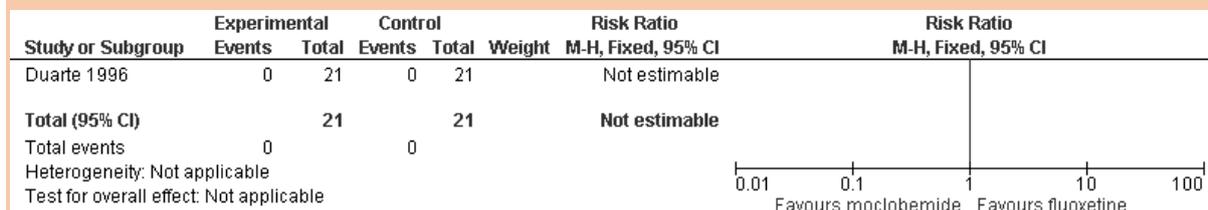
Response ($\geq 50\%$ improvement on HAMD score)



Discontinuation for any reason

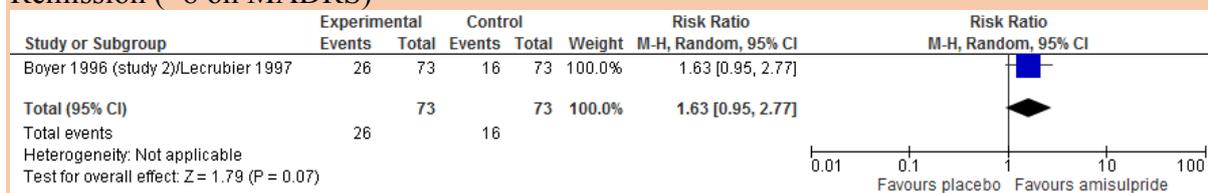


Discontinuation due to adverse events

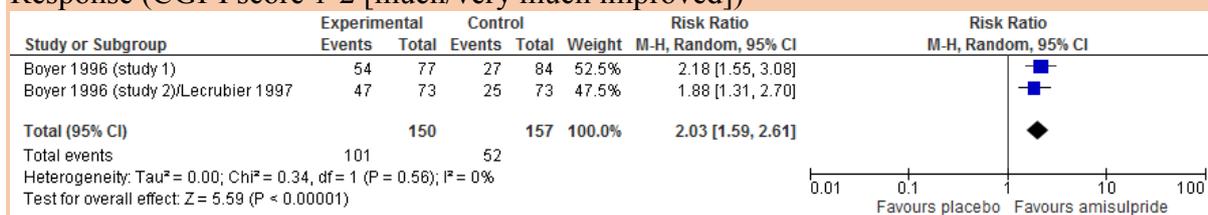


Amisulpride versus placebo for chronic depressive symptoms

Remission (< 8 on MADRS)



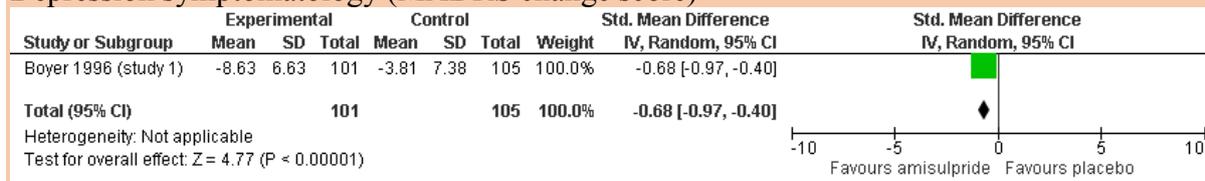
Response (CGI-I score 1-2 [much/very much improved])



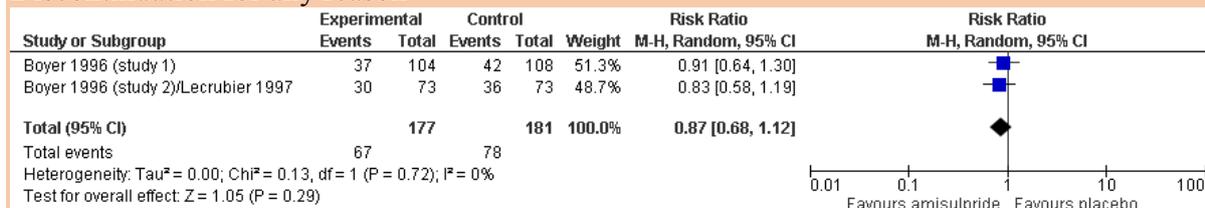
Depression in adults: treatment and management

Forest plots

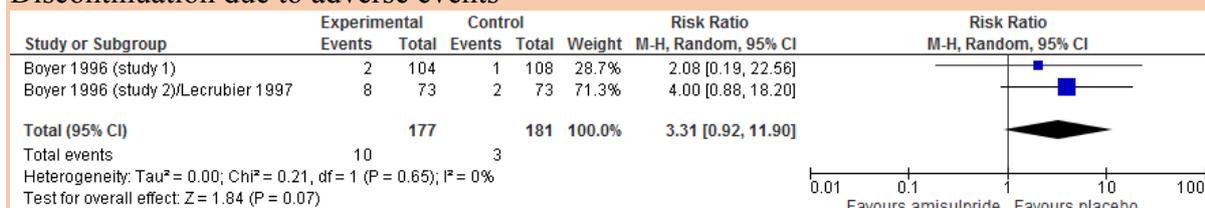
Depression symptomatology (MADRS change score)



Discontinuation for any reason



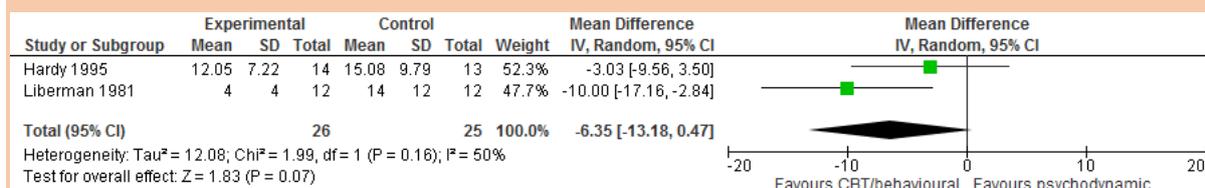
Discontinuation due to adverse events



Complex depression (chapter 10)

CBT/behavioural therapies versus psychodynamic therapies for complex depression

Depression symptomatology at endpoint (BDI)



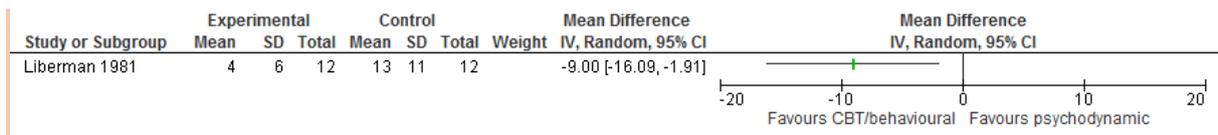
Depression symptomatology at 12 week follow-up (BDI)



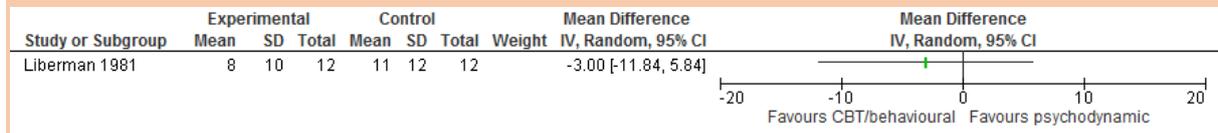
Depression symptomatology at 24 week follow-up (BDI)

Depression in adults: treatment and management

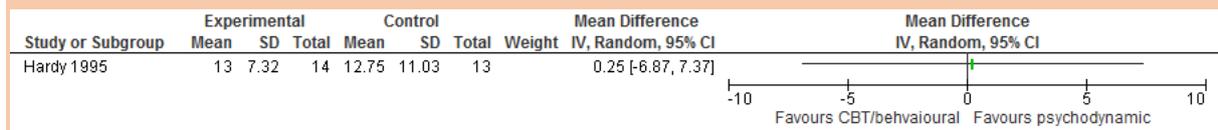
Forest plots



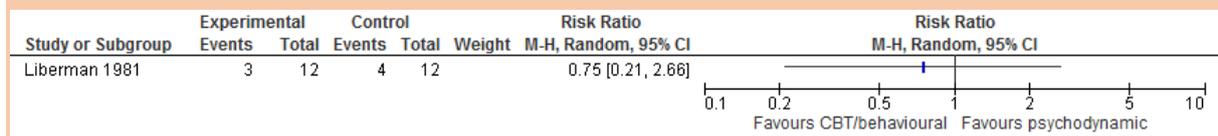
Depression symptomatology at 36 week follow-up (BDI)



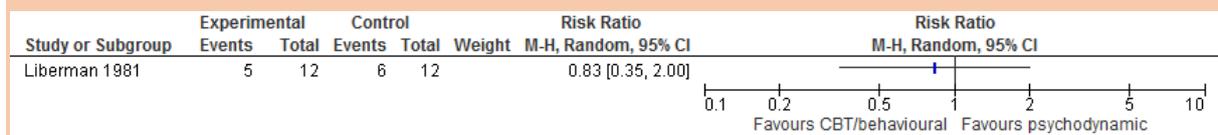
Depression symptomatology at 1 year follow-up (BDI)



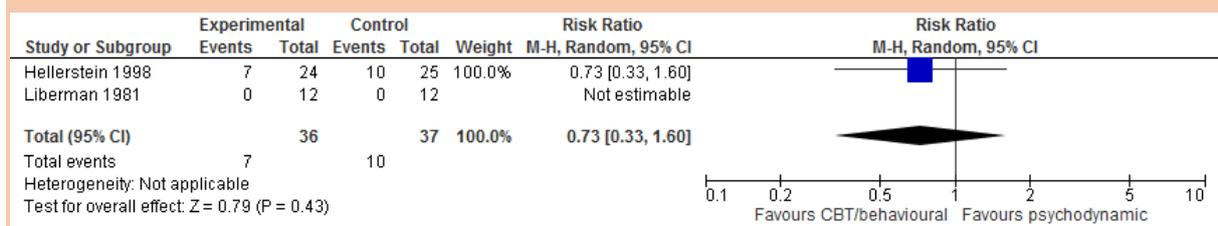
Suicide attempts at 24 week follow-up



Suicide attempts at 2 year follow-up



Discontinuations for any reason

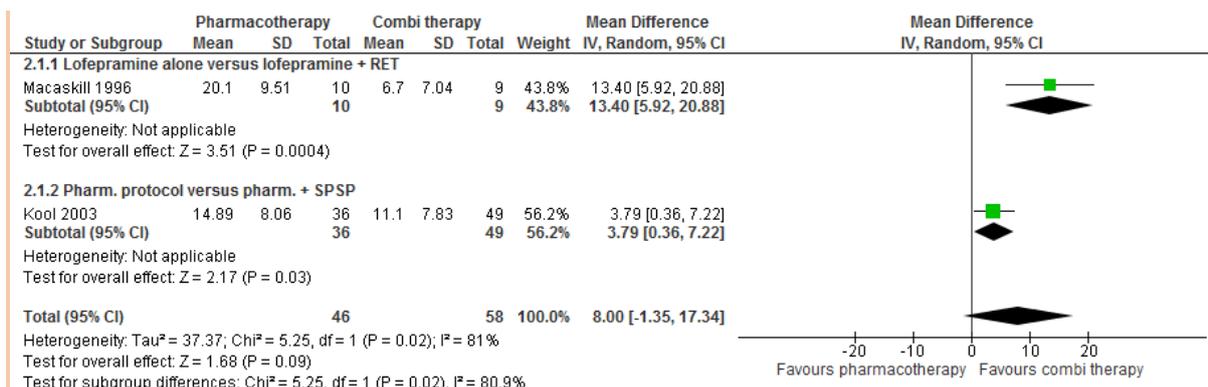


Pharmacotherapy versus combination therapy for complex depression

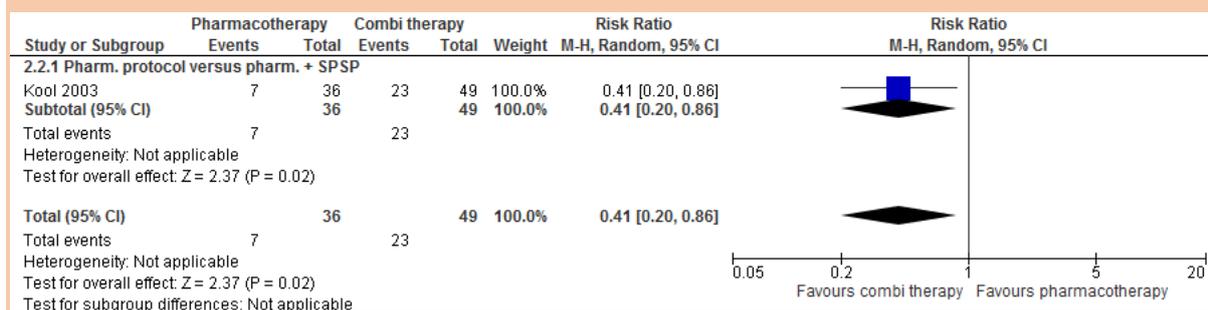
Depression symptomatology at endpoint (HAM-D 17)

Depression in adults: treatment and management

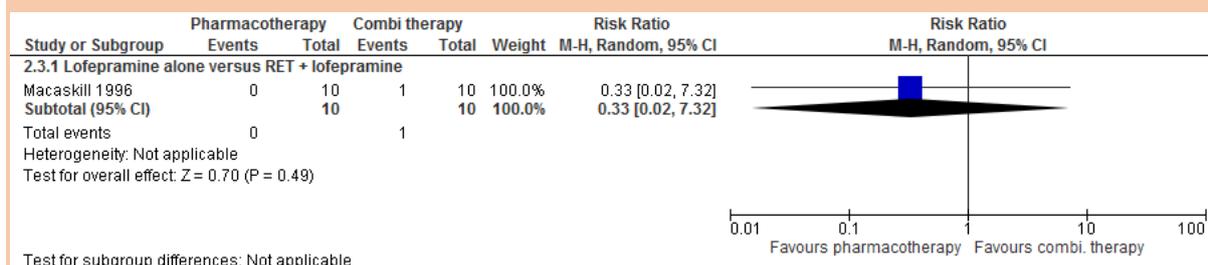
Forest plots



Remission at endpoint (HAM-D 17)



Discontinuations for any reason

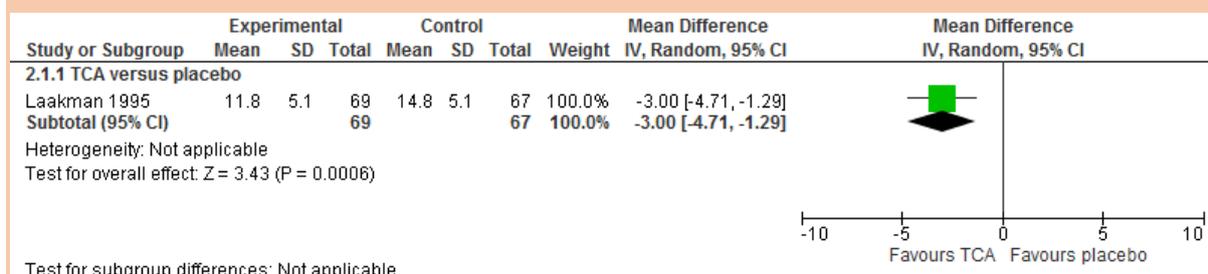


Psychotic depression (chapter 10)

Antidepressants versus other pharmacological interventions

Antidepressant versus placebo

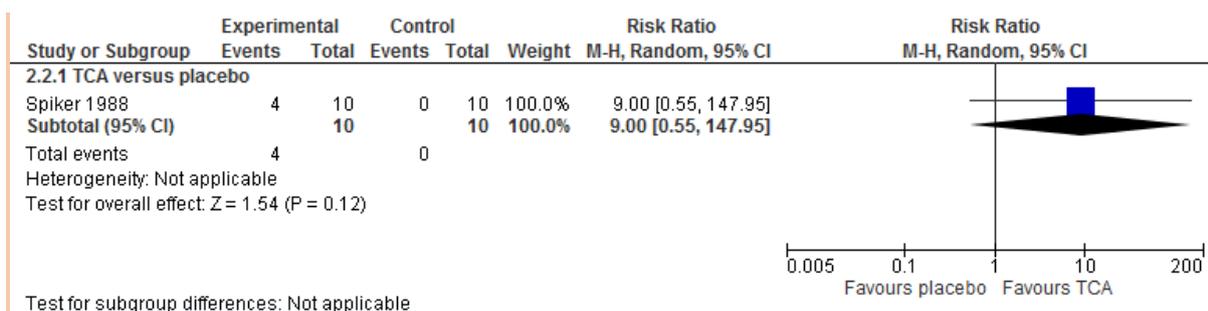
Depressive symptoms at endpoint (HAMD 17)



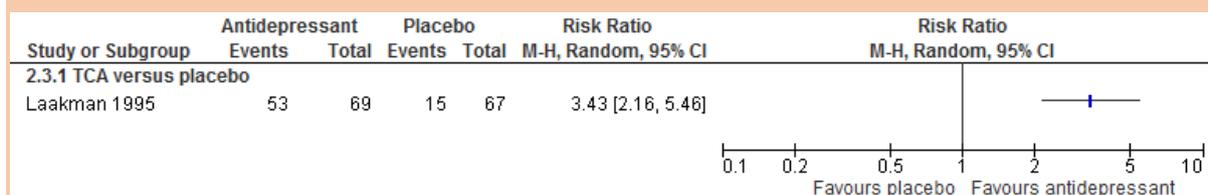
Remission

Depression in adults: treatment and management

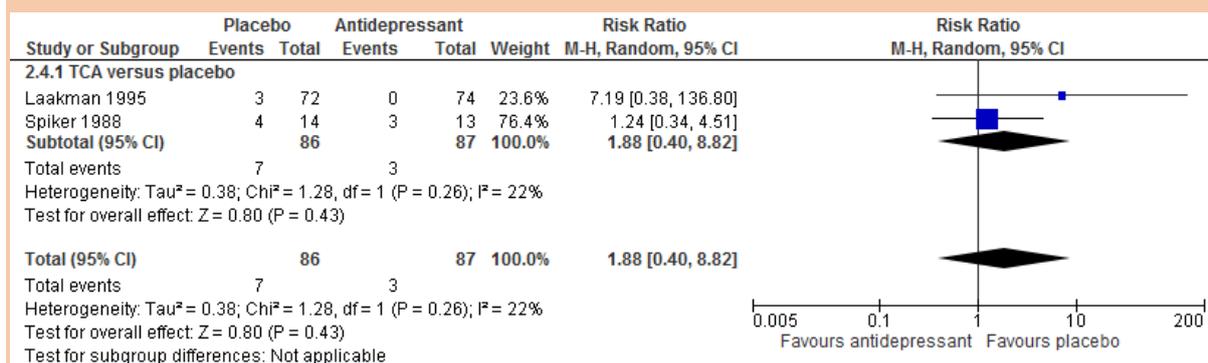
Forest plots



Response

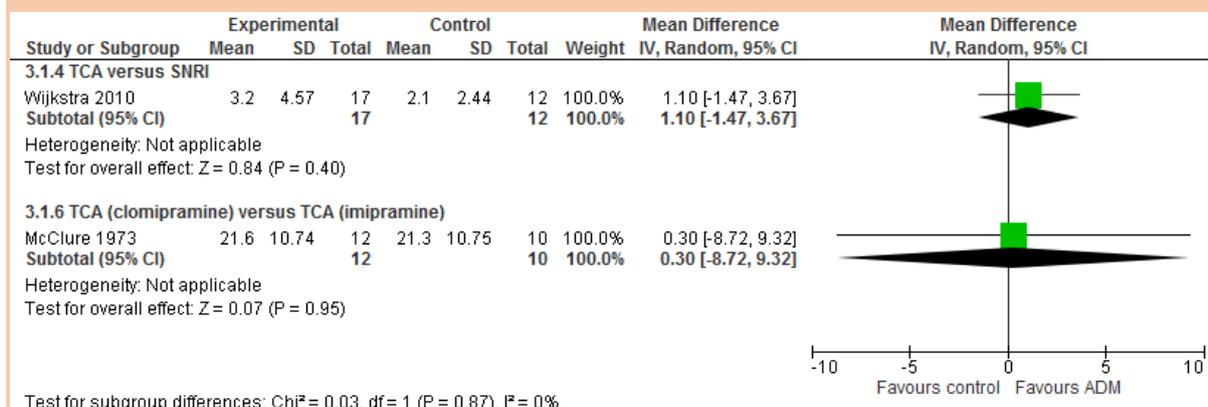


Discontinuation



Antidepressant versus antidepressant

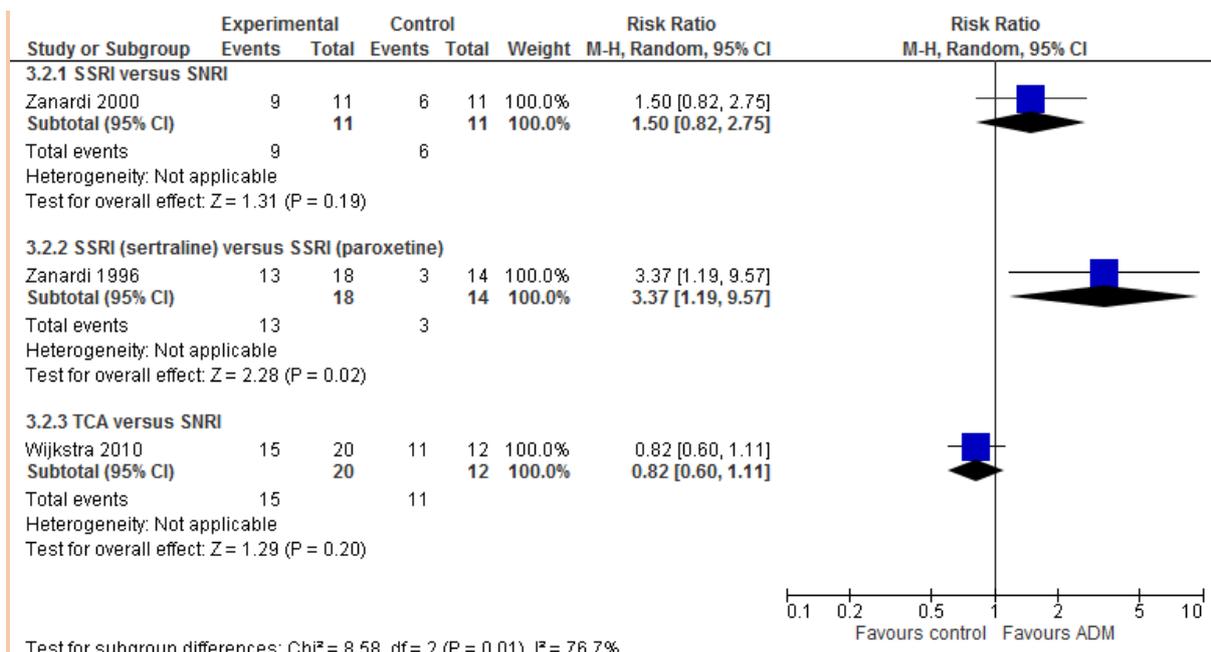
Depressive symptoms at endpoint



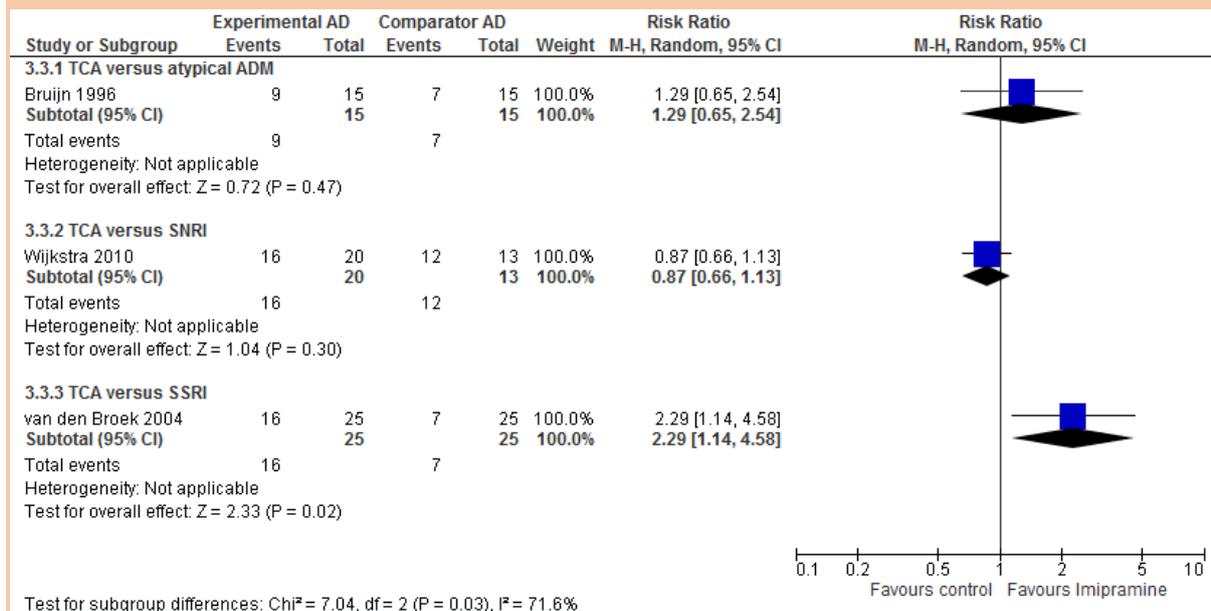
Remission

Depression in adults: treatment and management

Forest plots



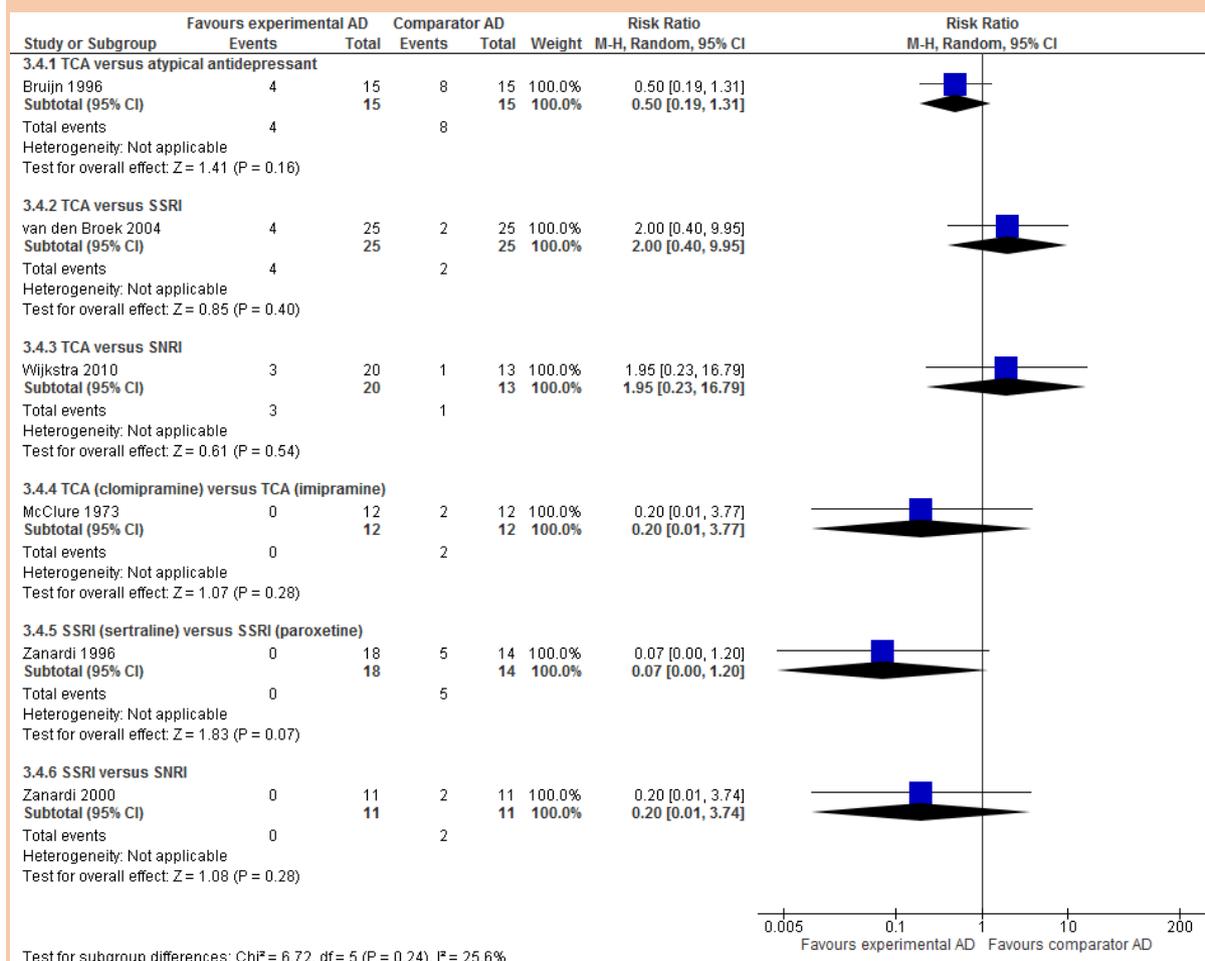
Response



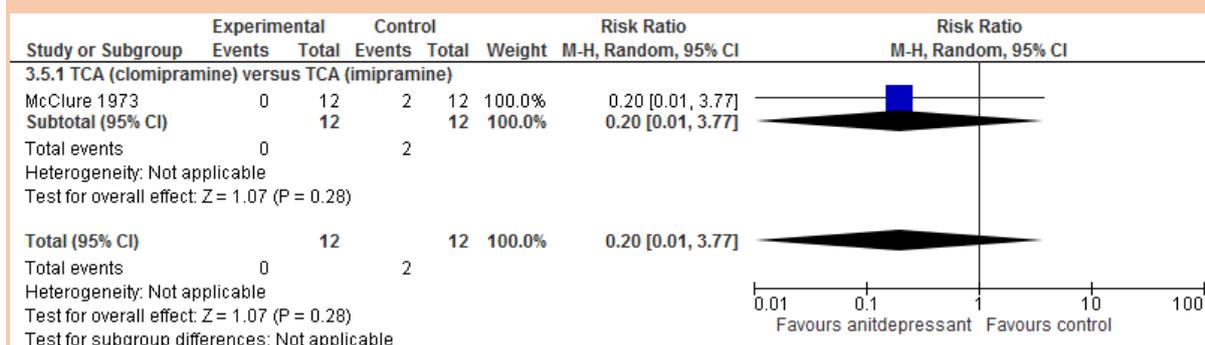
Depression in adults: treatment and management

Forest plots

Discontinuation



Discontinuation due to side effects

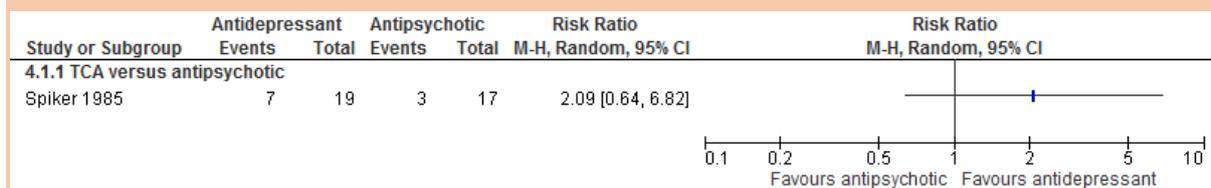


Depression in adults: treatment and management

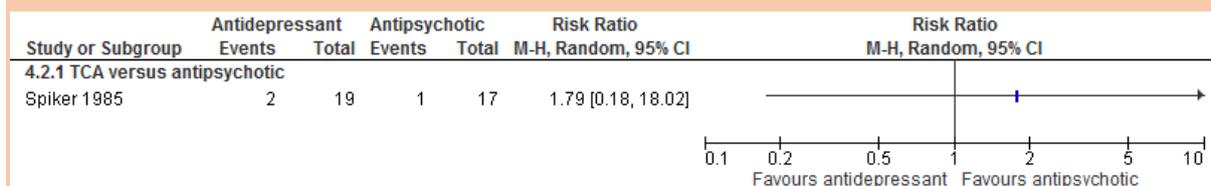
Forest plots

Antidepressant versus antipsychotic

Remission

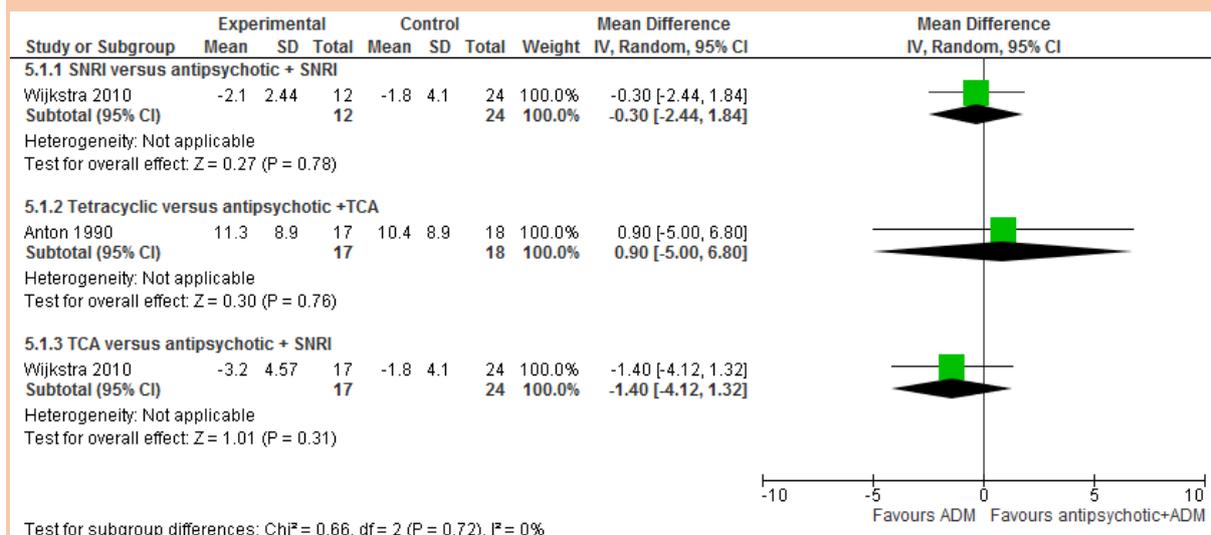


Discontinuation



Antidepressant versus antipsychotic plus antidepressant

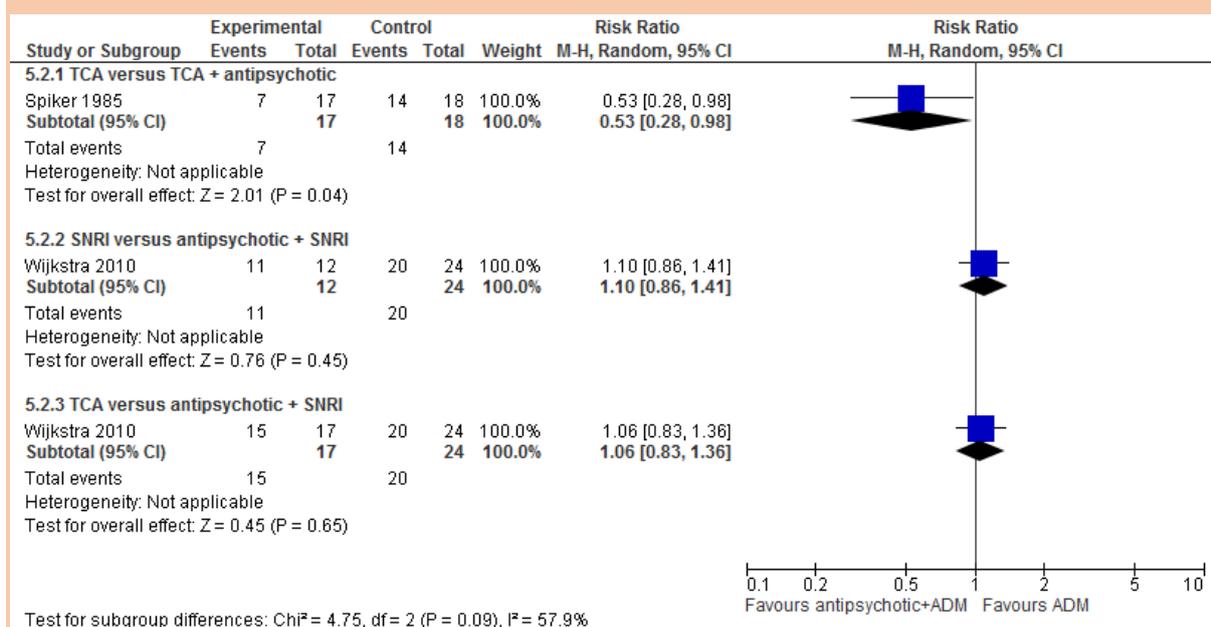
Depression symptomatology at endpoint (HAMD 17)



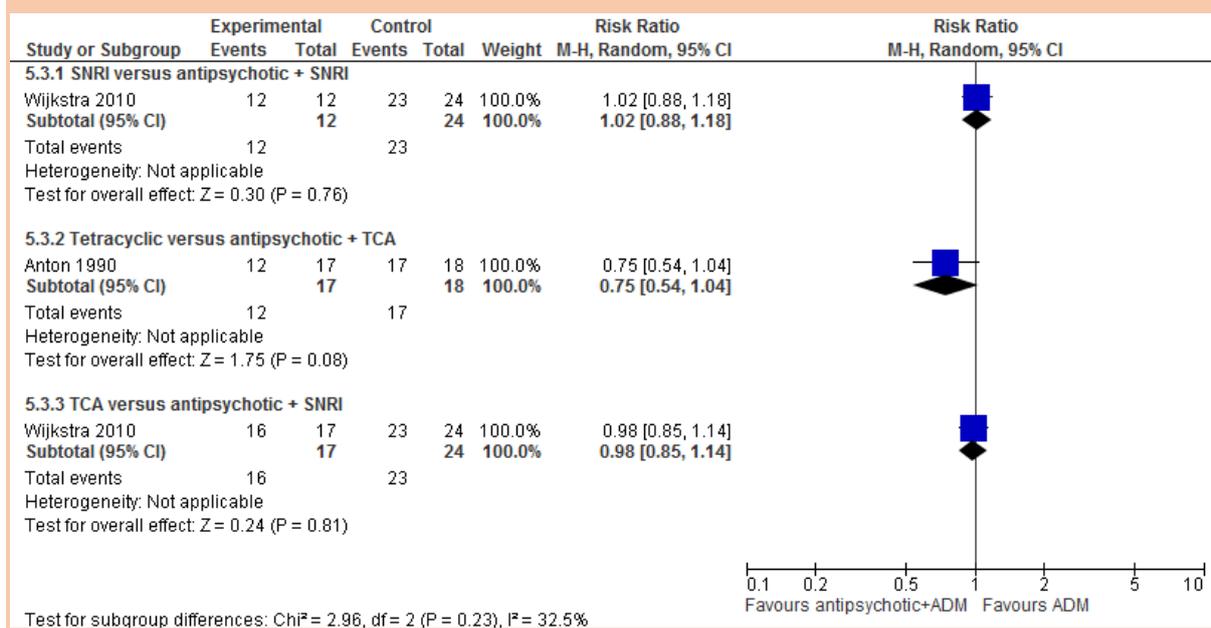
Depression in adults: treatment and management

Forest plots

Remission



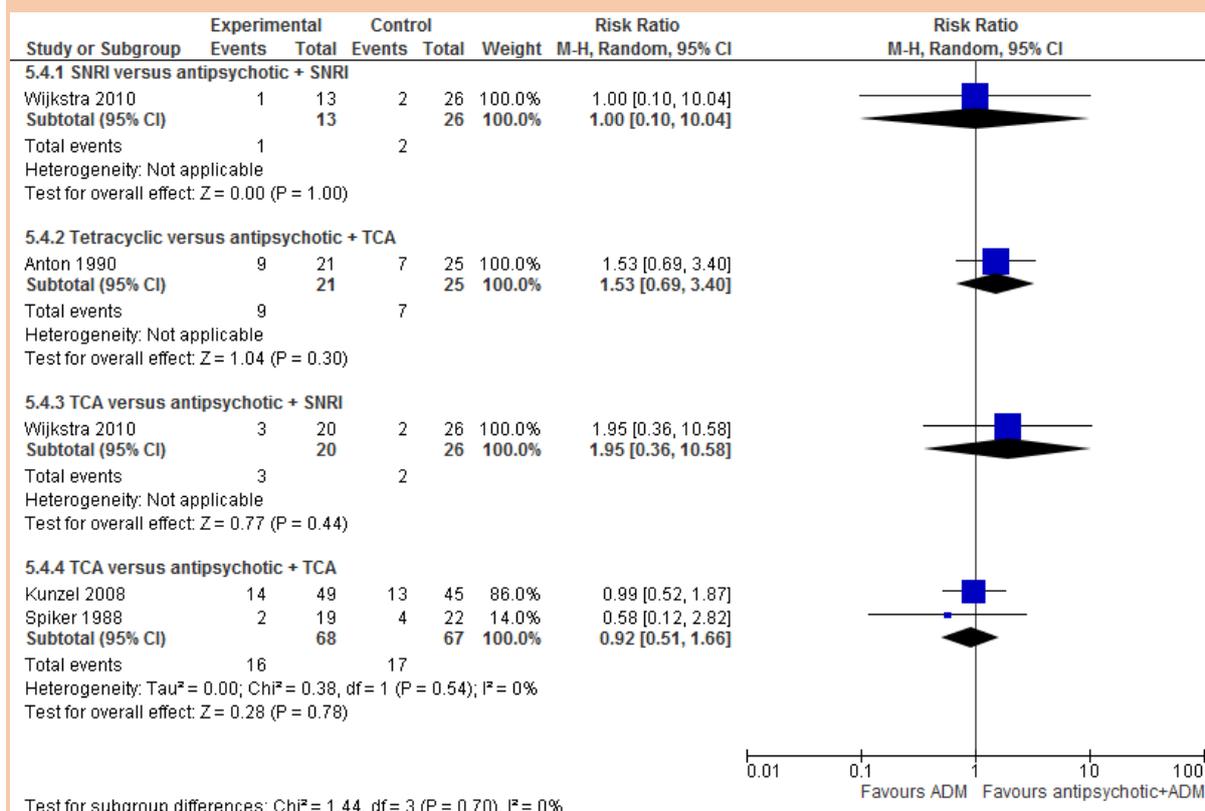
Response



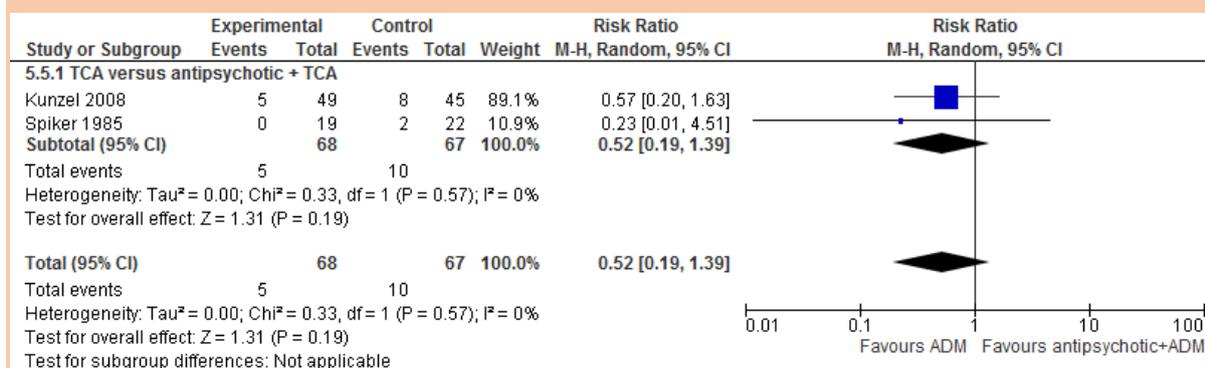
Depression in adults: treatment and management

Forest plots

Discontinuation



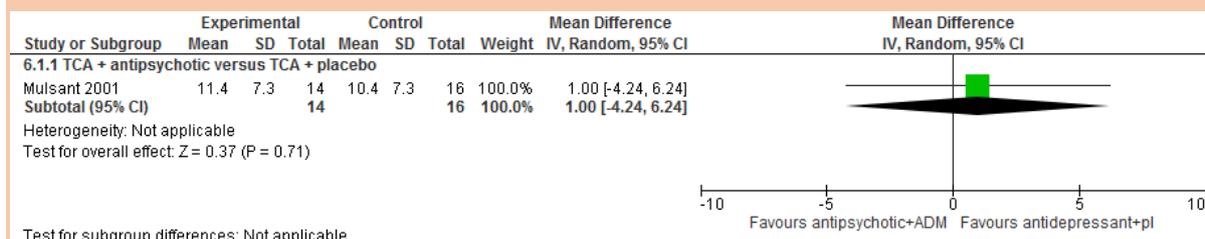
Discontinuation due to side effects



Combined antidepressant and antipsychotic versus other pharmacological interventions

Antidepressant plus antipsychotic versus antidepressant plus placebo

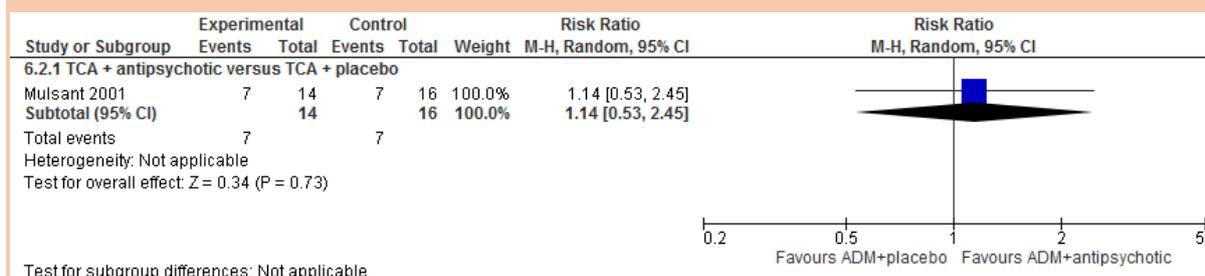
Depression symptomatology at endpoint (HAMD 17)



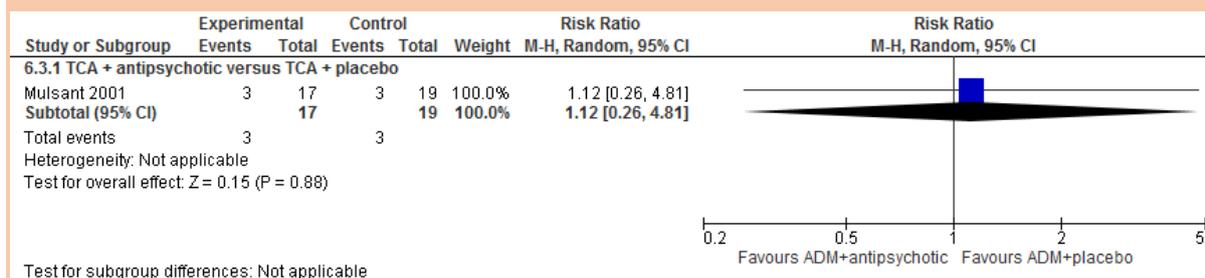
Depression in adults: treatment and management

Forest plots

Remission

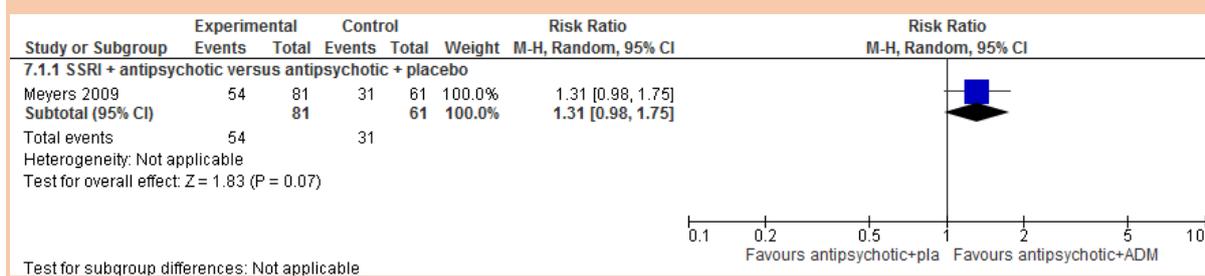


Discontinuation

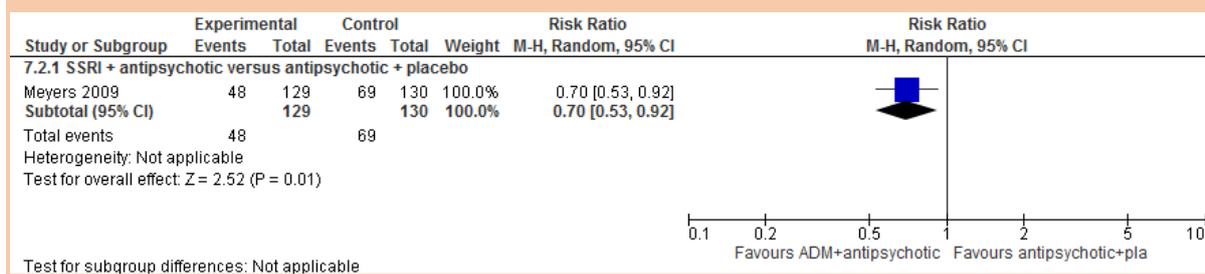


Antidepressant plus antipsychotic versus antipsychotic plus placebo

Remission



Discontinuation



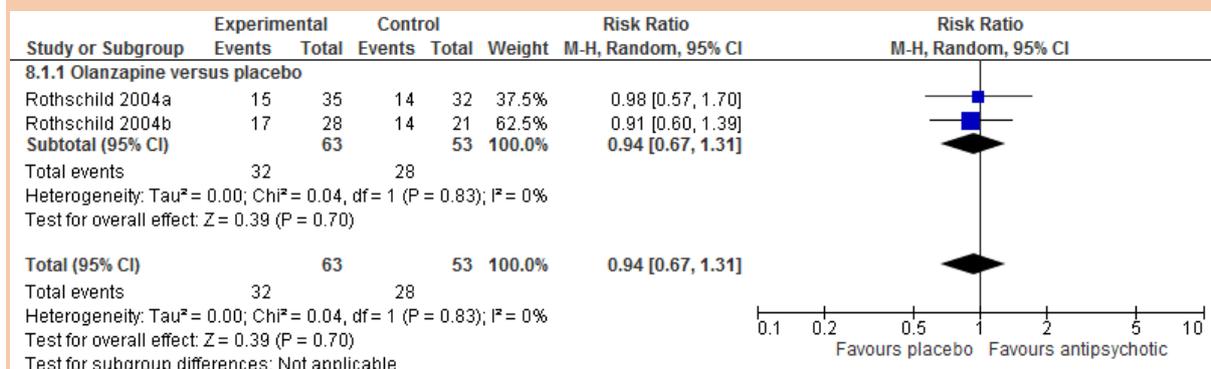
Depression in adults: treatment and management

Forest plots

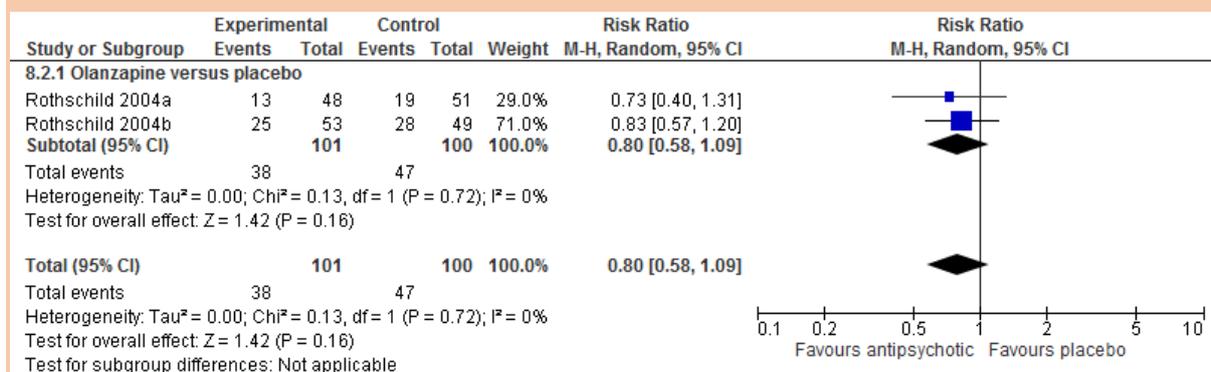
Antipsychotics versus other pharmacological interventions

Antipsychotics versus placebo

Response

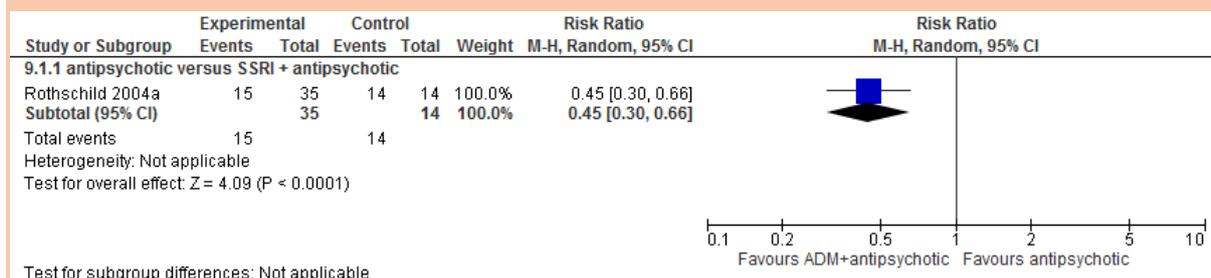


Discontinuation

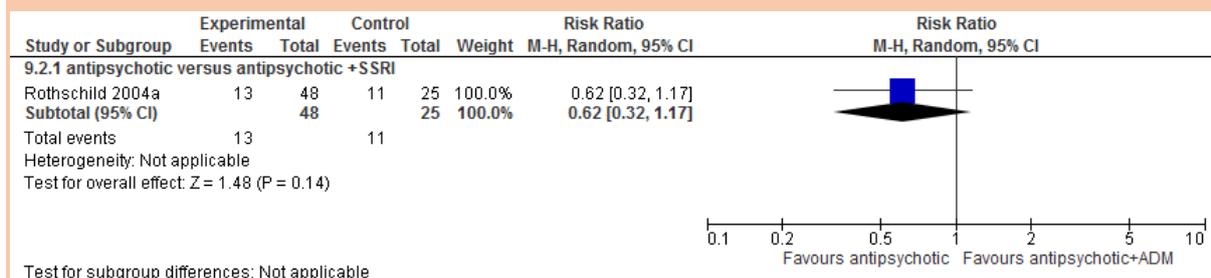


Antipsychotics versus antipsychotics plus antidepressants

Response



Discontinuation

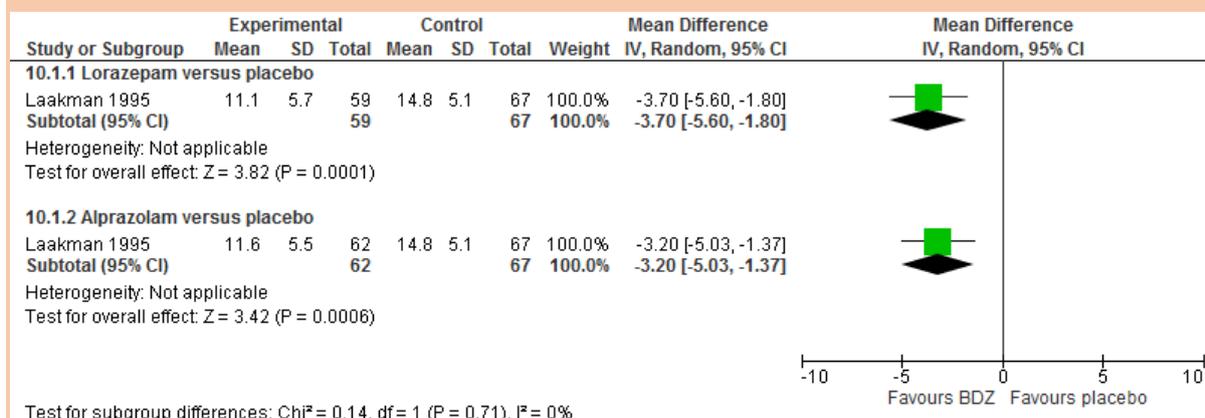


Depression in adults: treatment and management
Forest plots

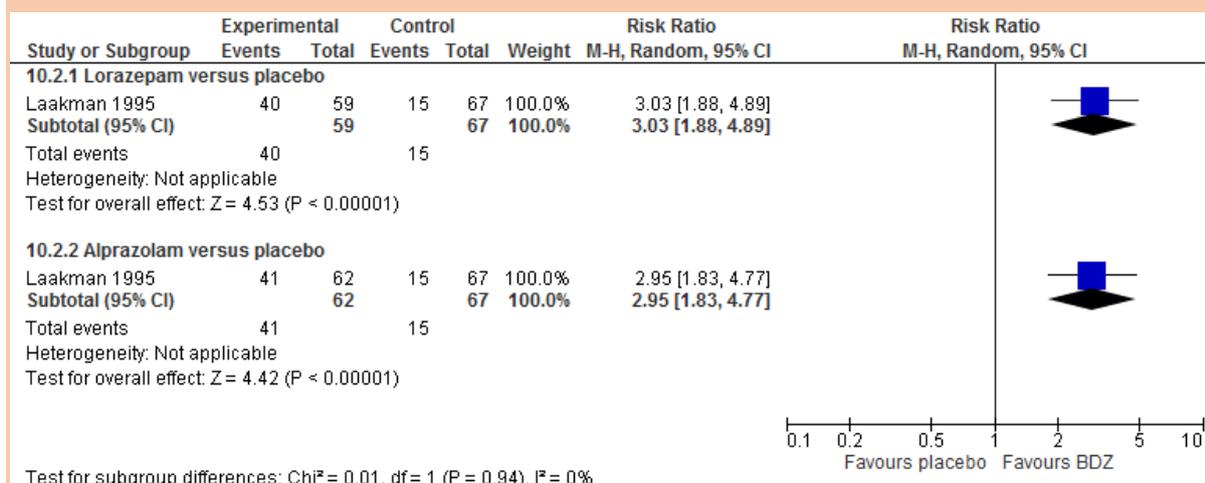
Benzodiazepines versus other pharmacological interventions

Benzodiazepines versus placebo

Depression symptomatology at endpoint (HAMD-17)



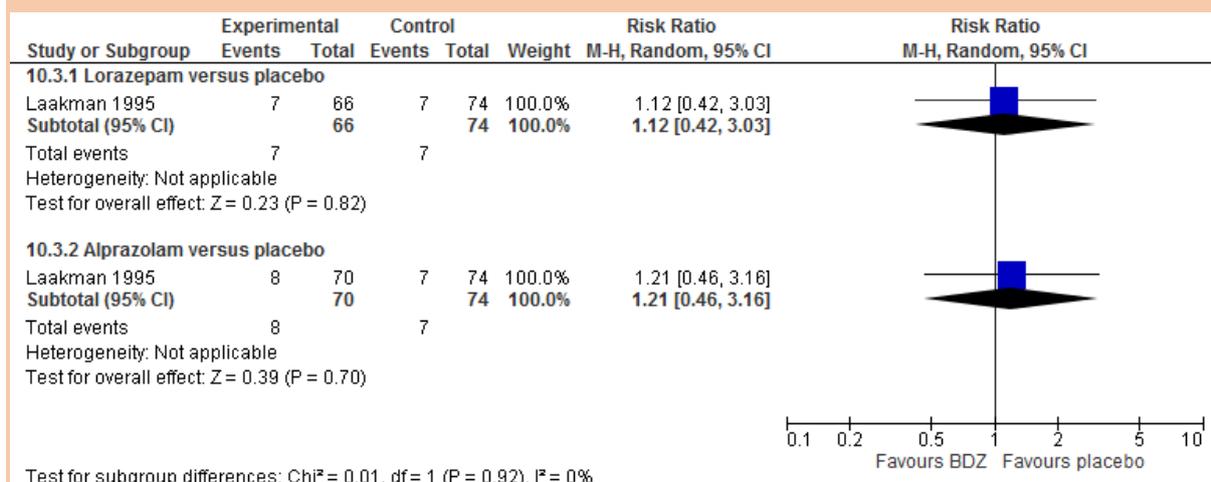
Response



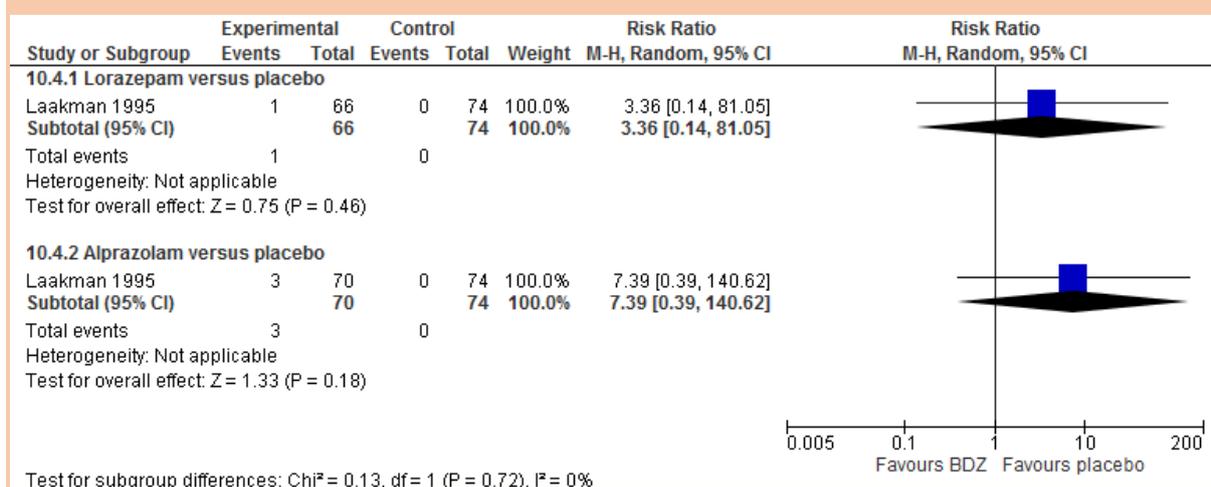
Depression in adults: treatment and management

Forest plots

Discontinuation

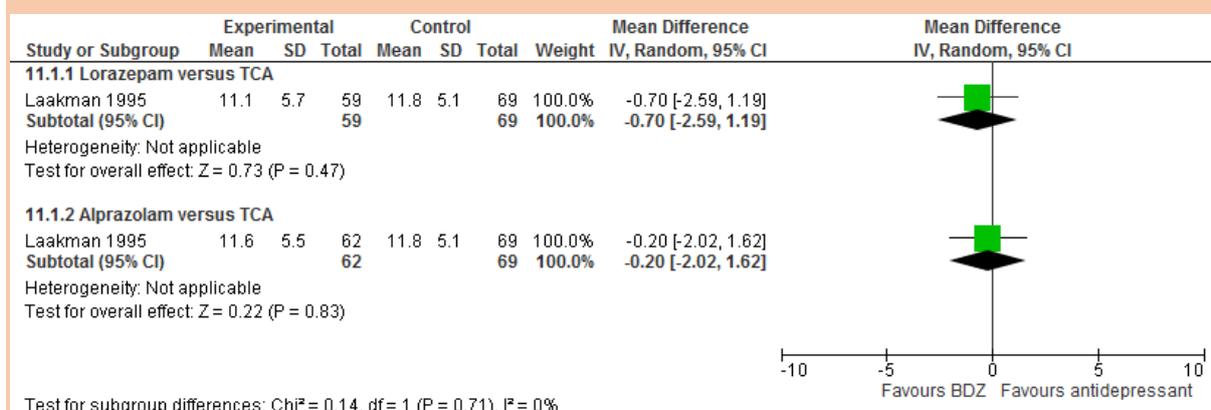


Discontinuation due to side effects



Benzodiazepines versus antidepressants

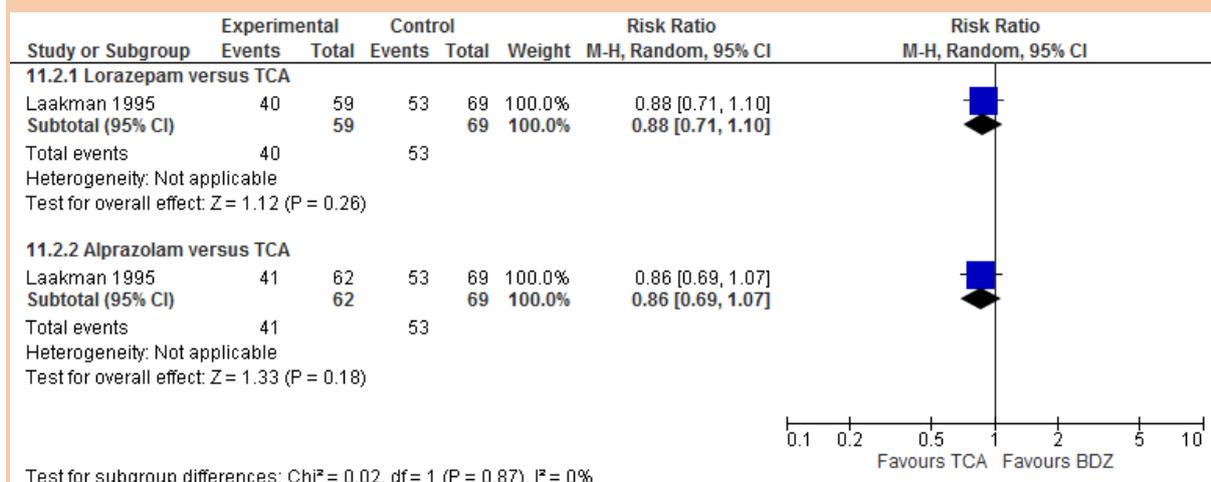
Depression symptomatology at endpoint (HAMD 17)



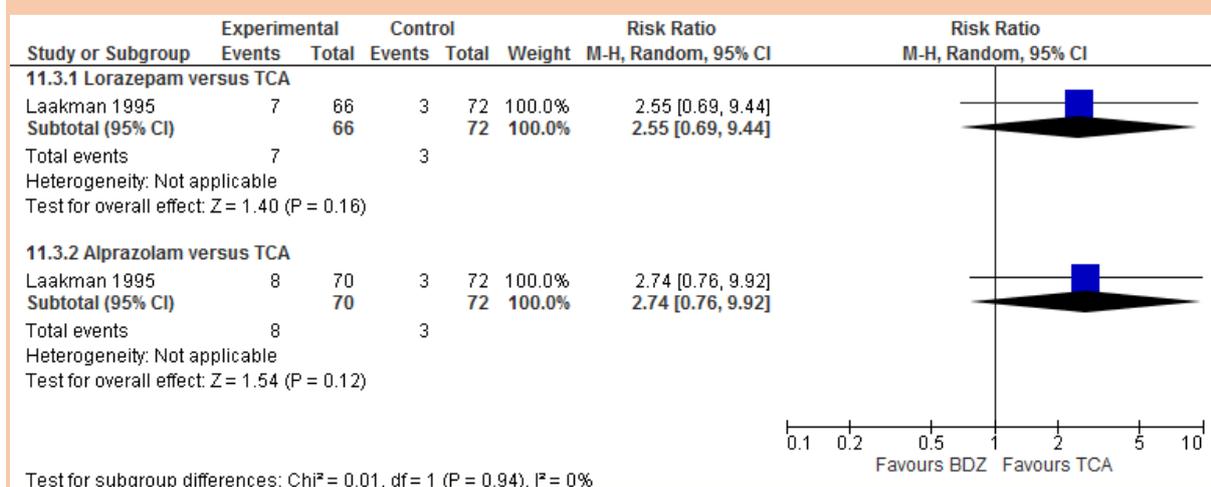
Depression in adults: treatment and management

Forest plots

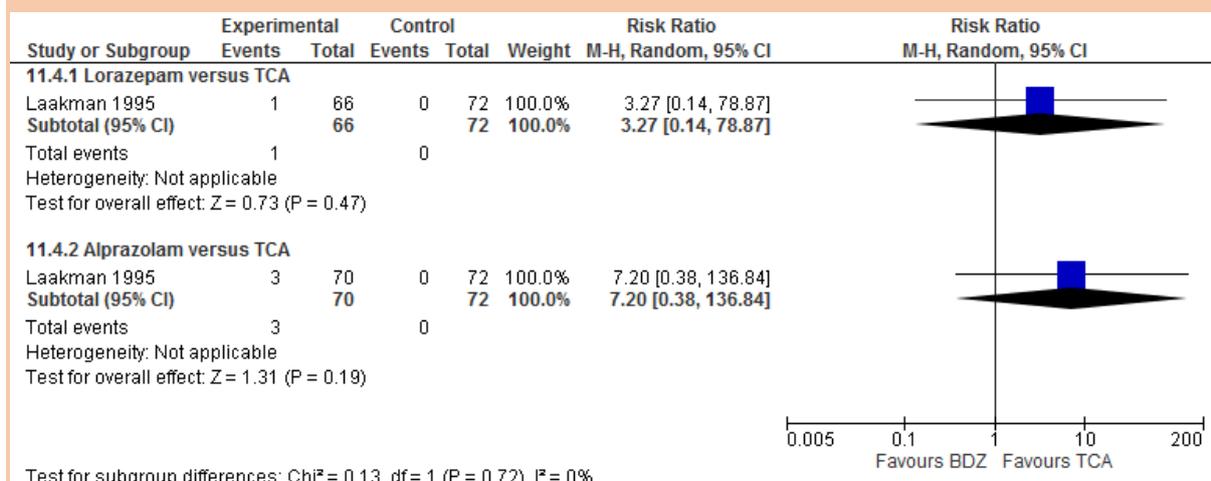
Response



Discontinuation



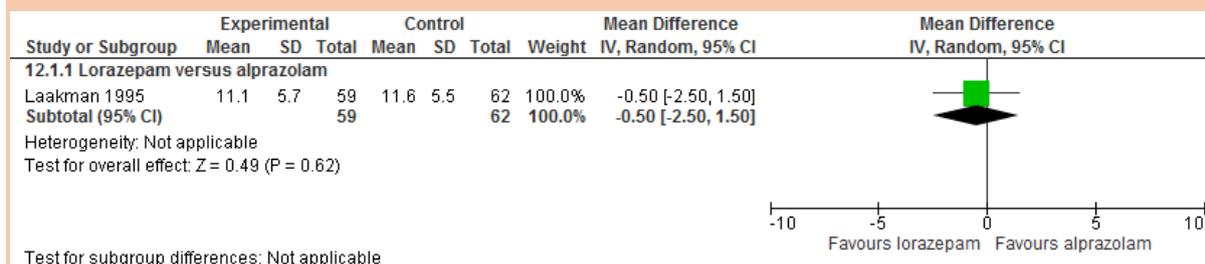
Discontinuation due to side effects



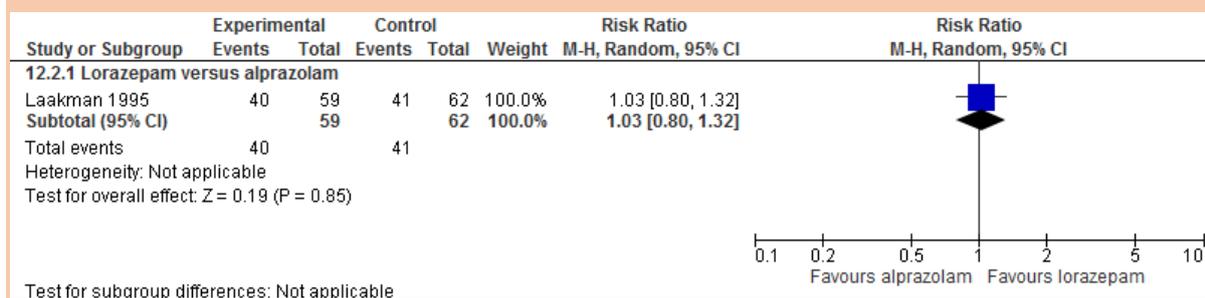
Depression in adults: treatment and management
Forest plots

Benzodiazepines versus benzodiazepines

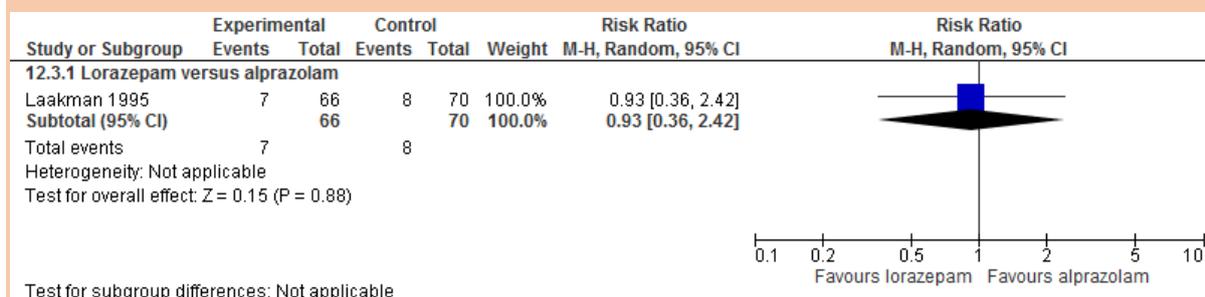
Depression symptomatology at endpoint (HAMD 17)



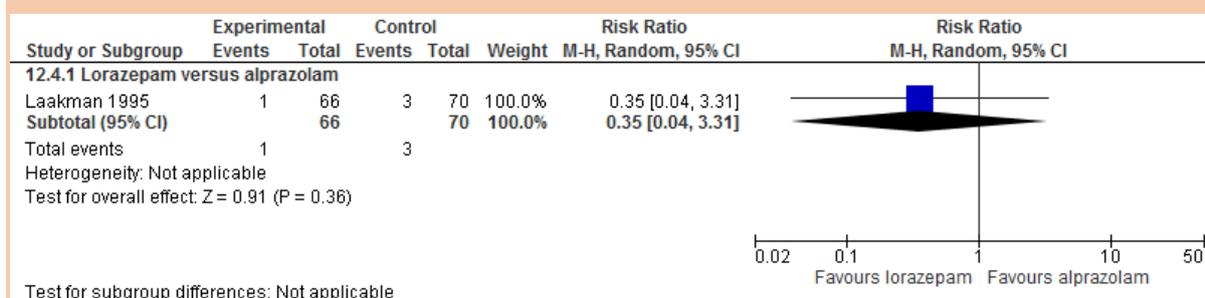
Response



Discontinuation



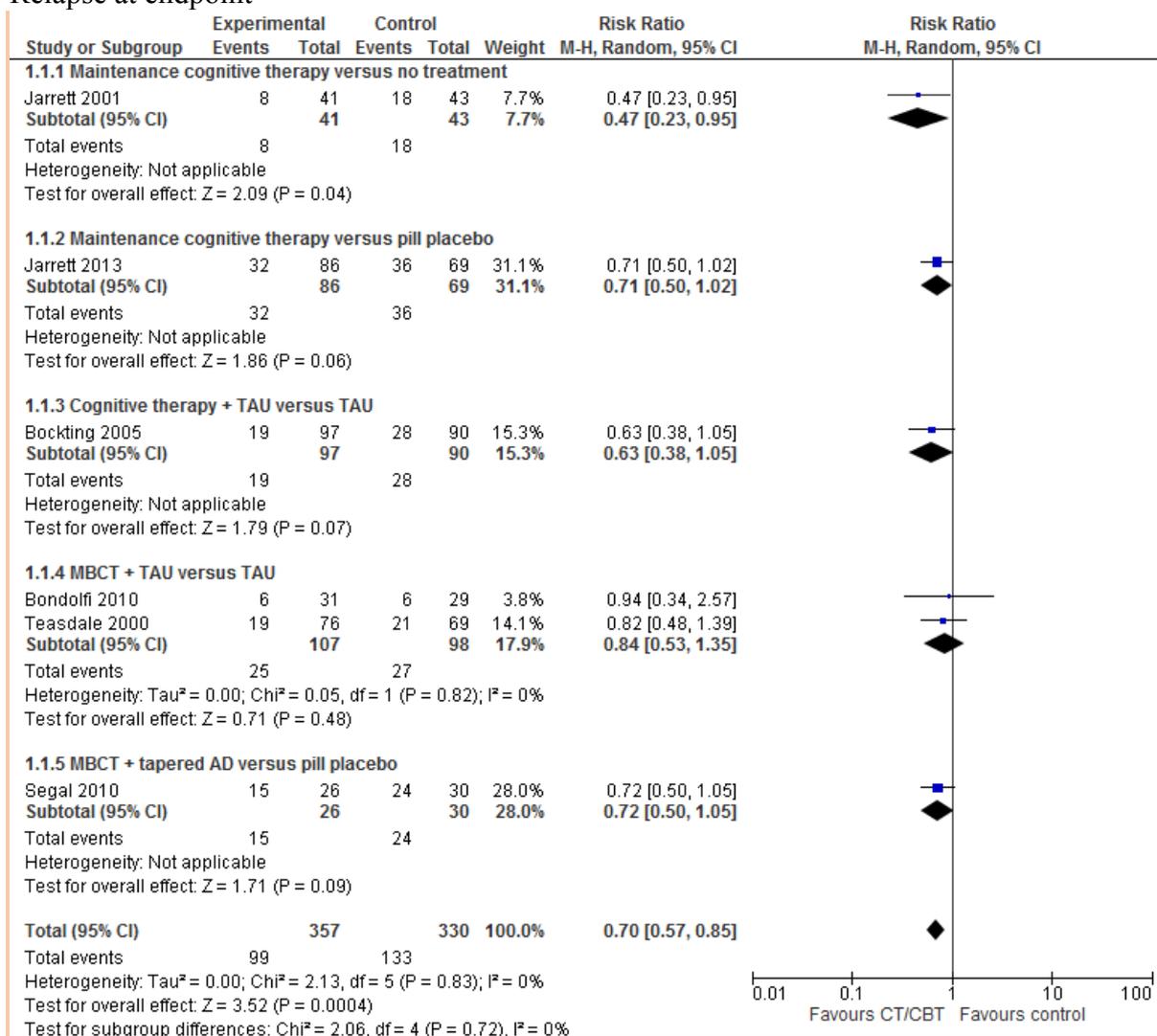
Discontinuation due to side effects



Relapse prevention (chapter 11)

Cognitive or cognitive behavioural therapies versus control

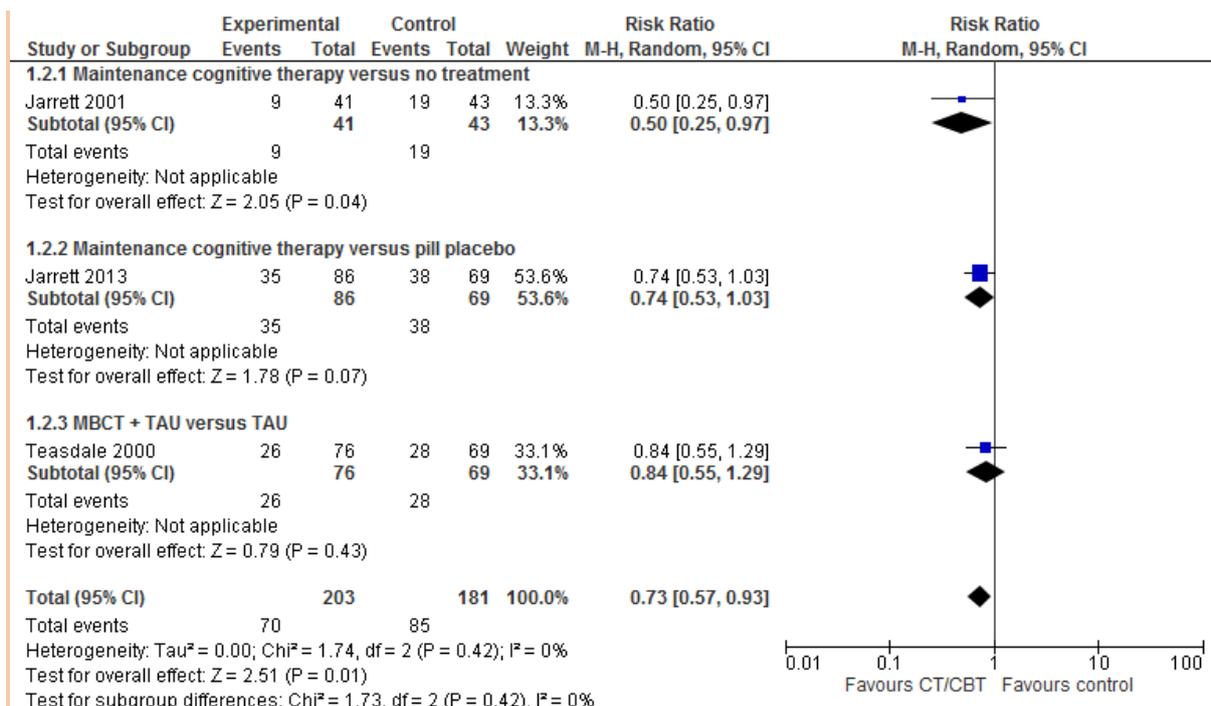
Relapse at endpoint



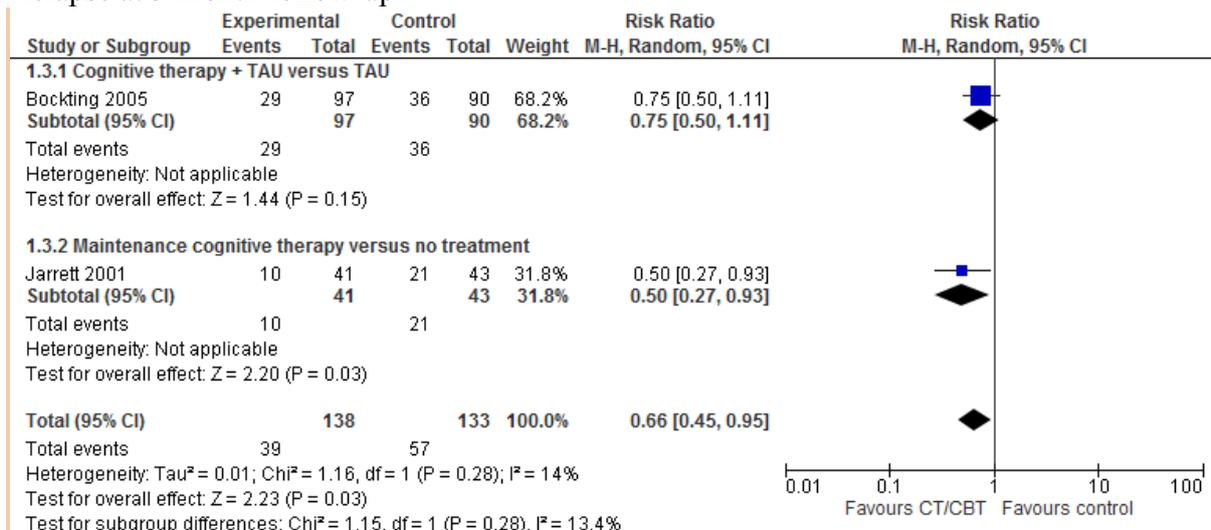
Relapse at 1-2 month follow-up

Depression in adults: treatment and management

Forest plots



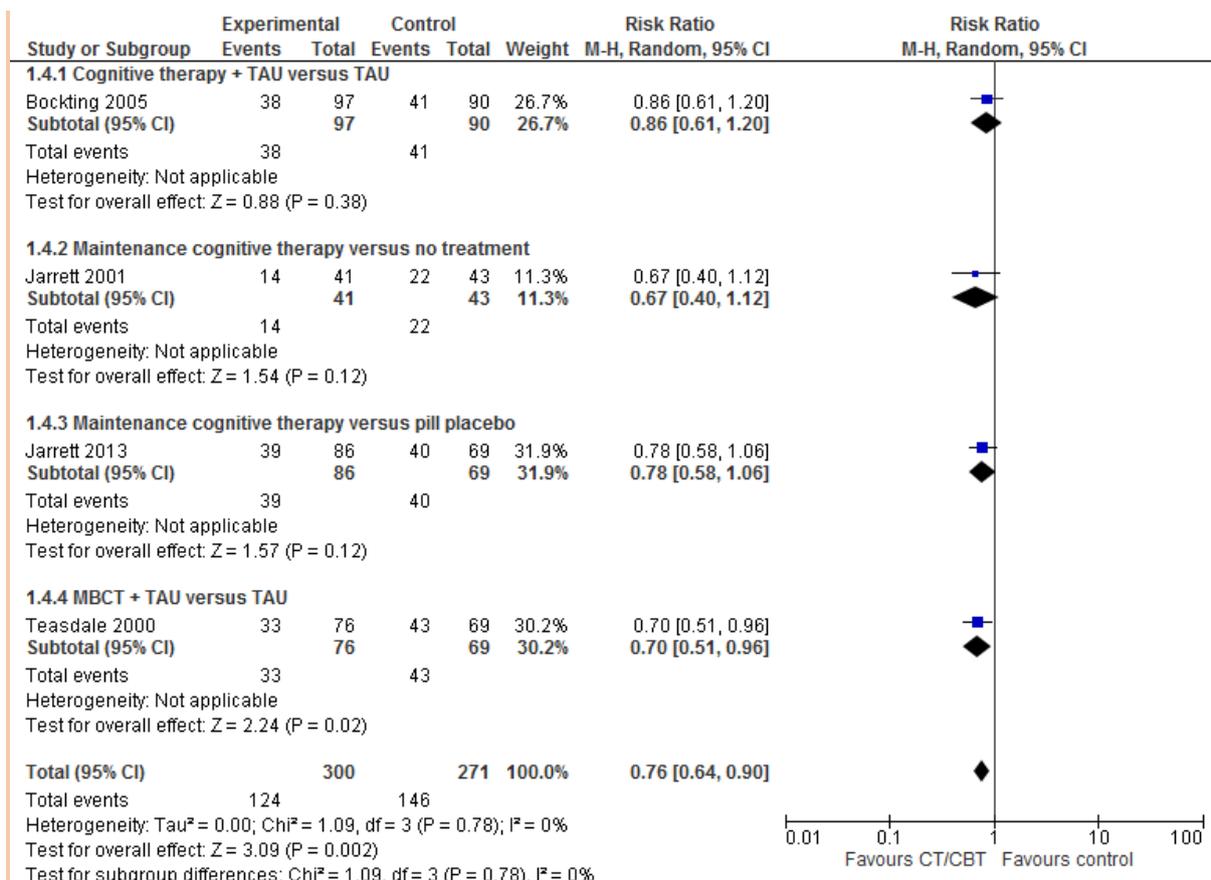
Relapse at 3-month follow-up



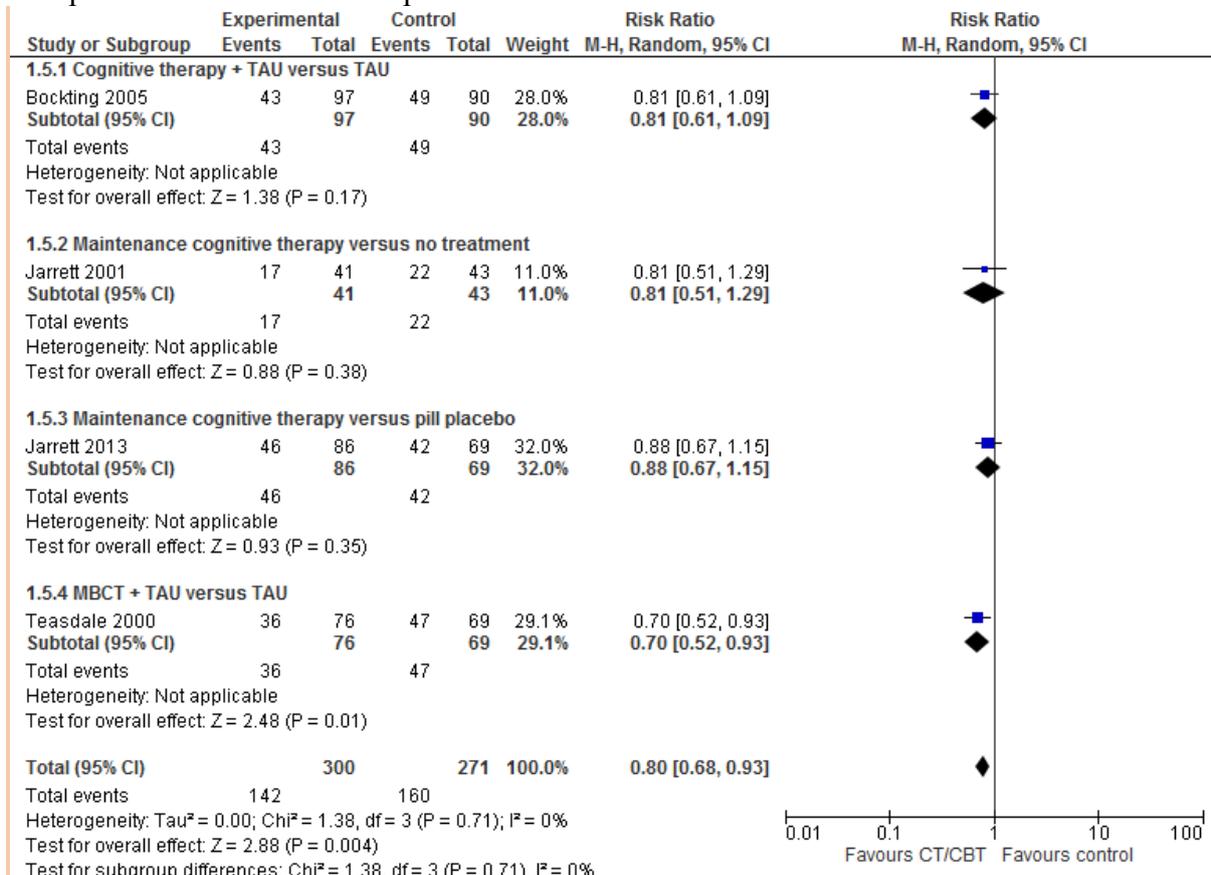
Relapse at 5-7 month follow-up

Depression in adults: treatment and management

Forest plots

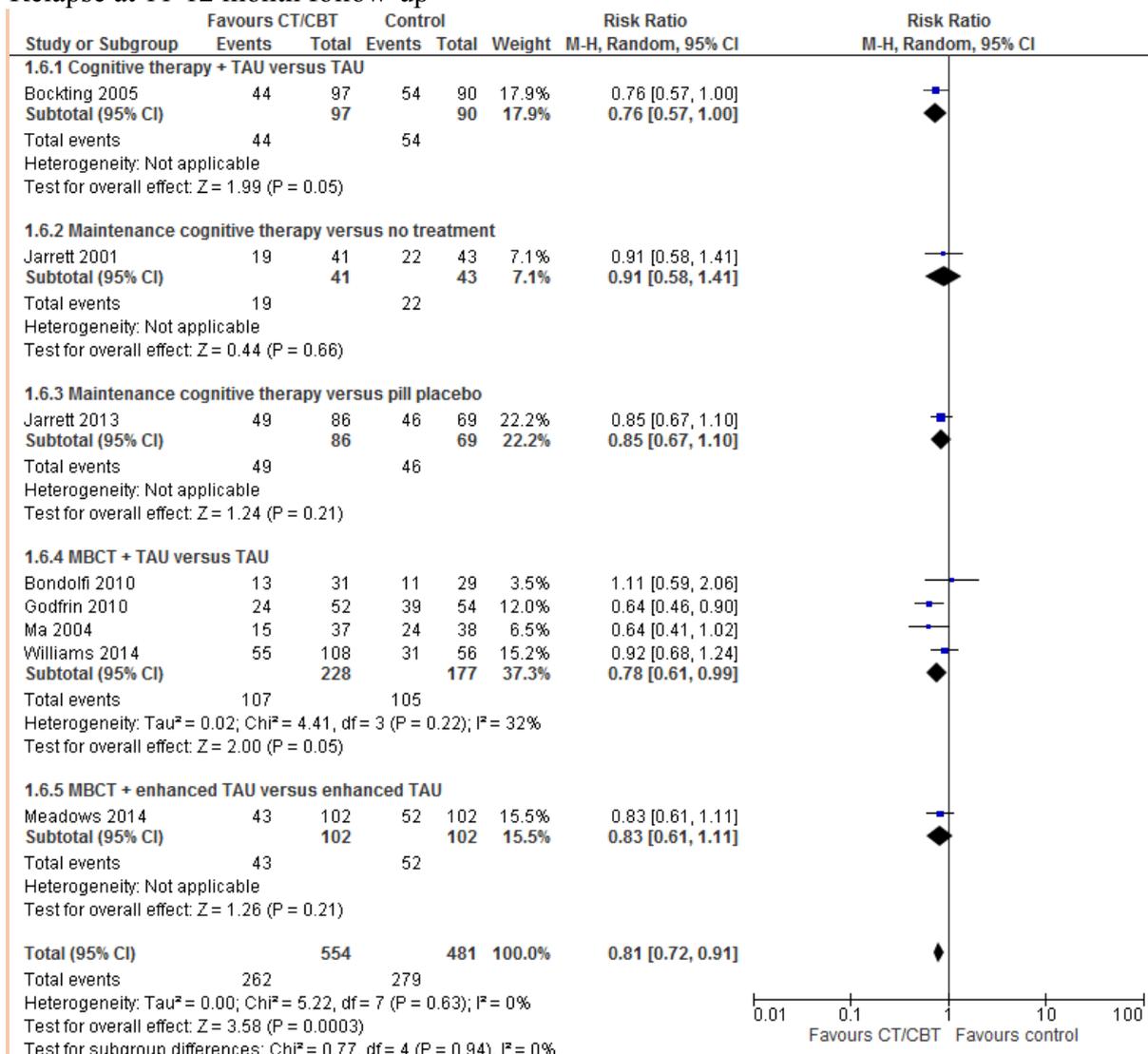


Relapse at 8-9 month follow-up



Depression in adults: treatment and management
Forest plots

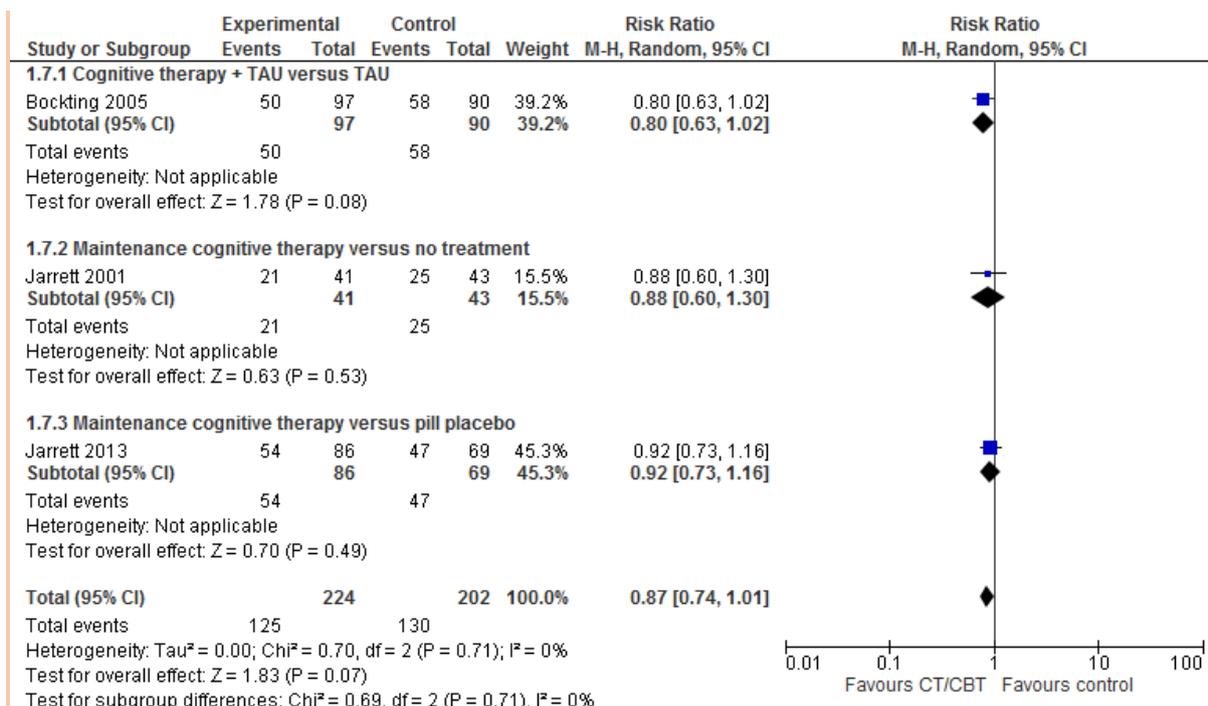
Relapse at 11-12 month follow-up



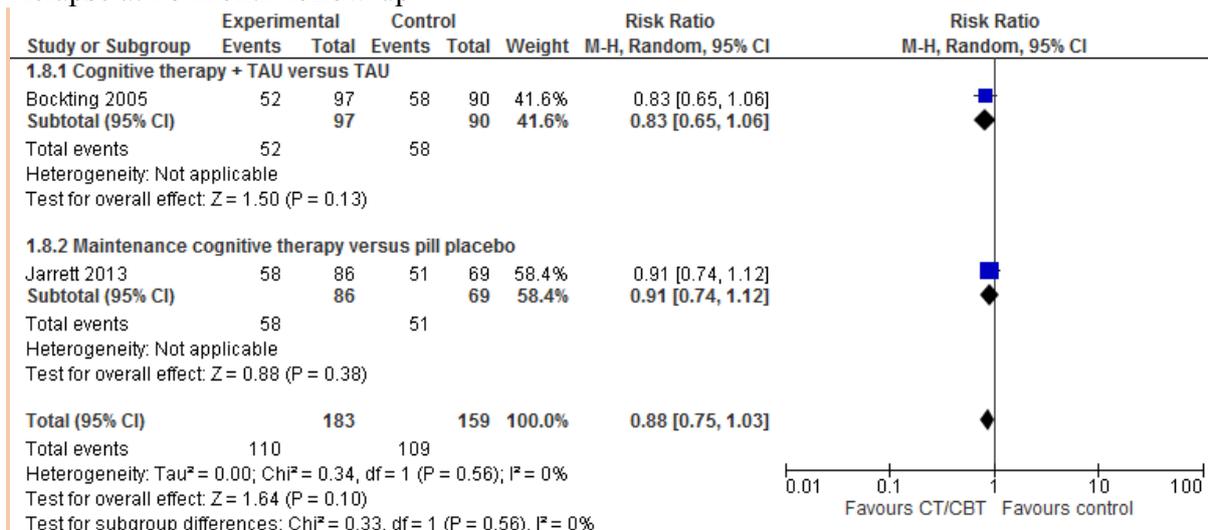
Relapse at 15-16 month follow-up

Depression in adults: treatment and management

Forest plots



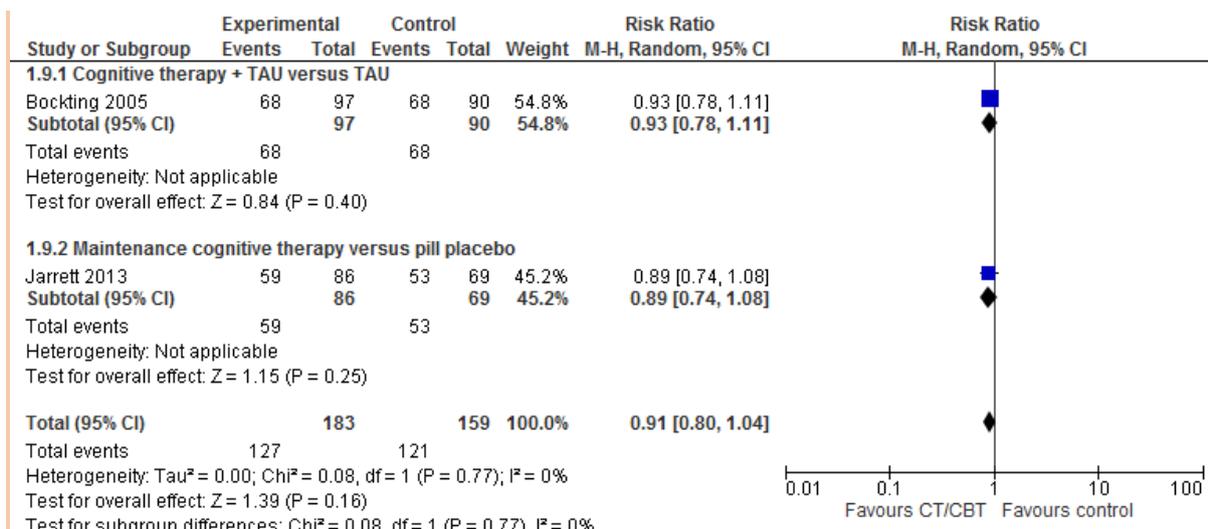
Relapse at 18-month follow-up



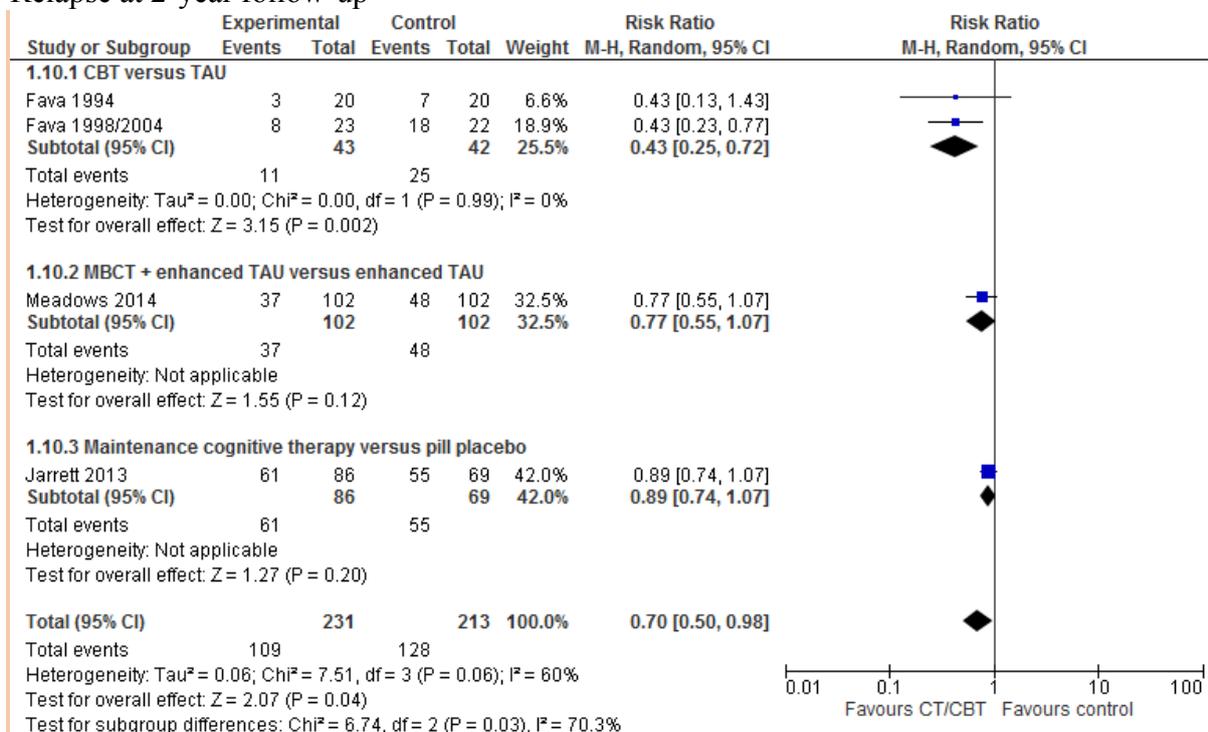
Relapse at 21-month follow-up

Depression in adults: treatment and management

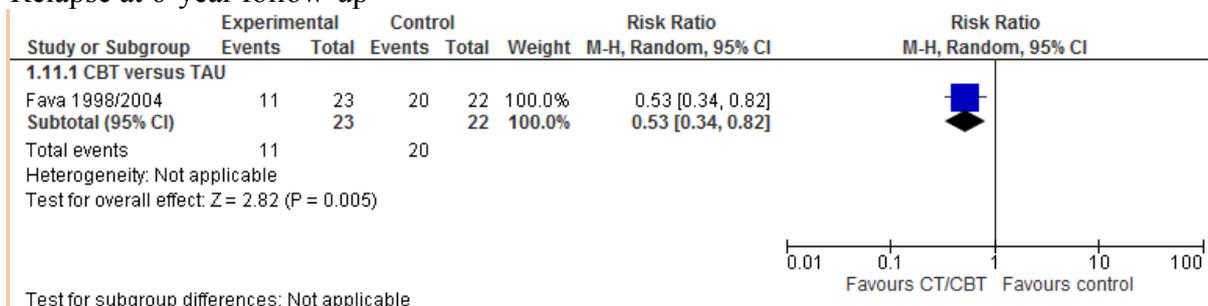
Forest plots



Relapse at 2-year follow-up



Relapse at 6-year follow-up

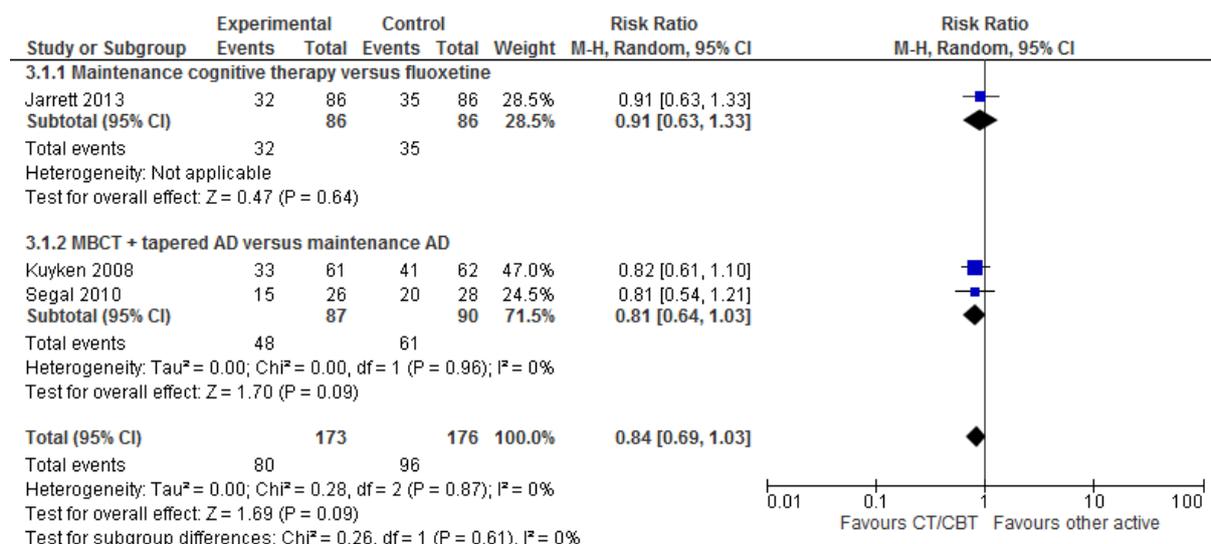


Cognitive or cognitive behavioural therapies versus active intervention

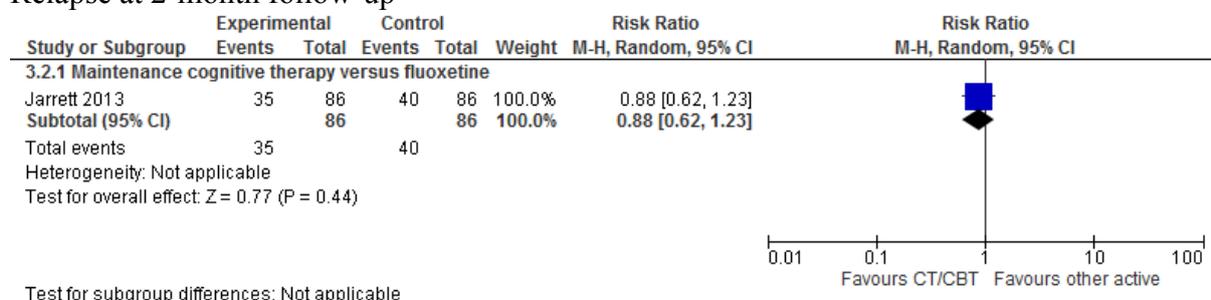
Relapse at endpoint

Depression in adults: treatment and management

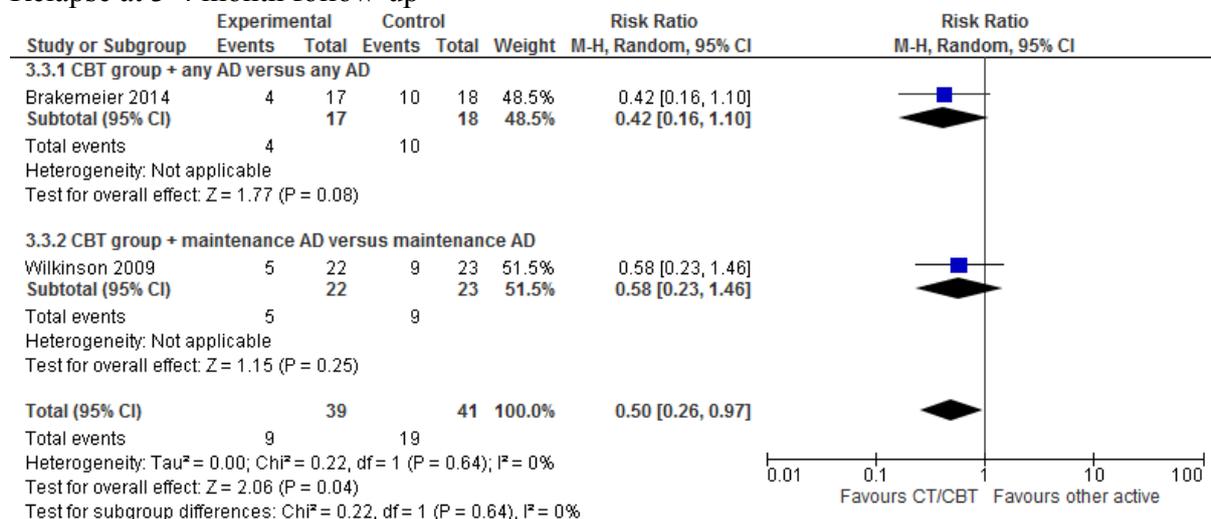
Forest plots



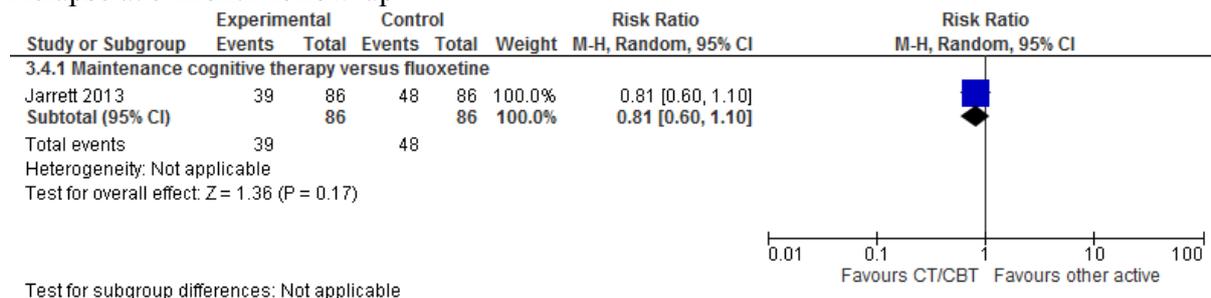
Relapse at 2-month follow-up



Relapse at 3-4 month follow-up

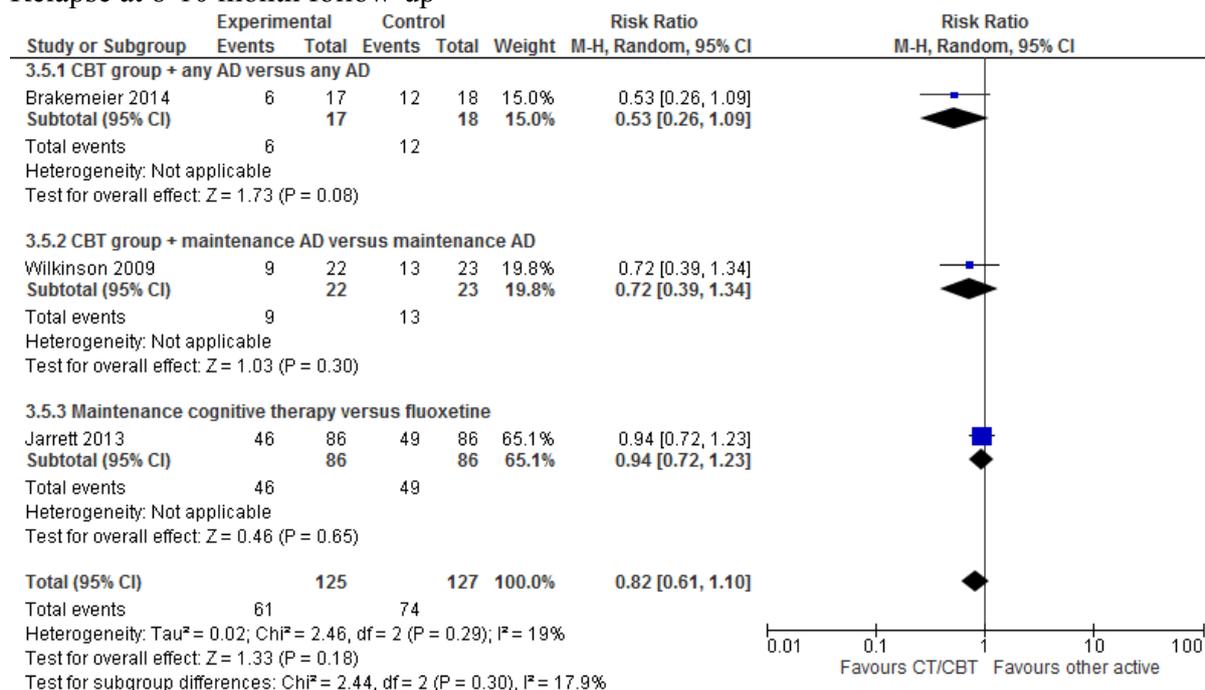


Relapse at 5-month follow-up

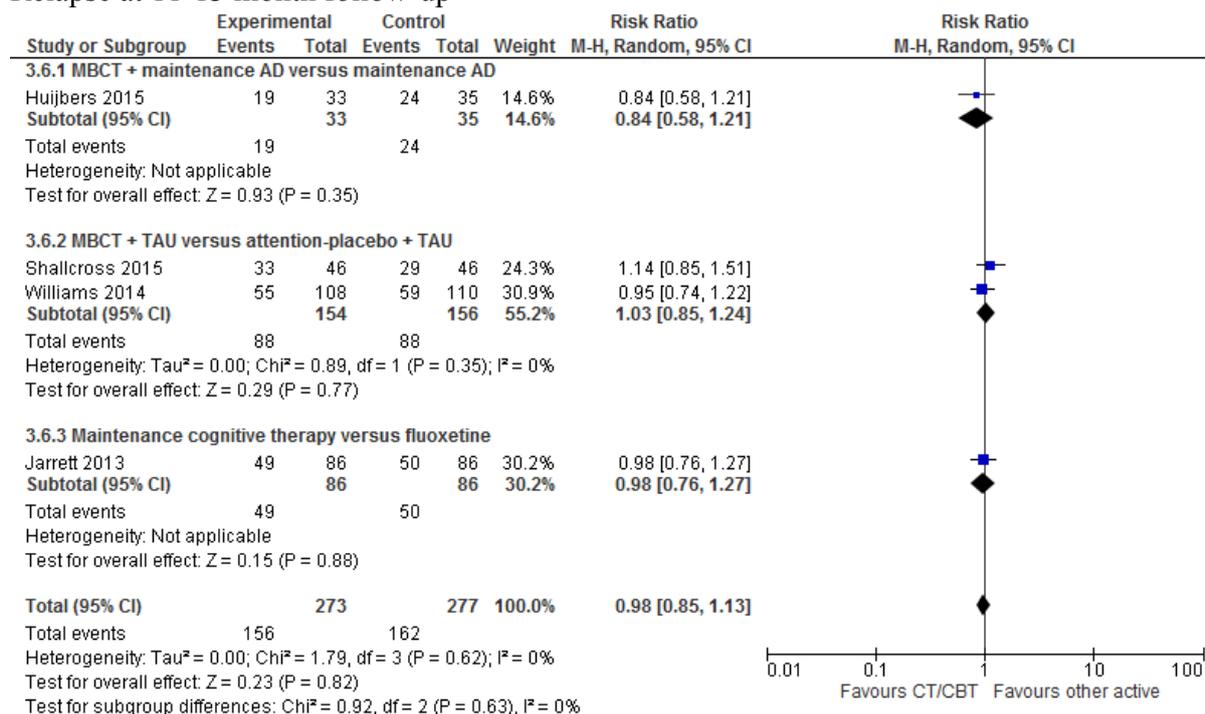


Depression in adults: treatment and management
Forest plots

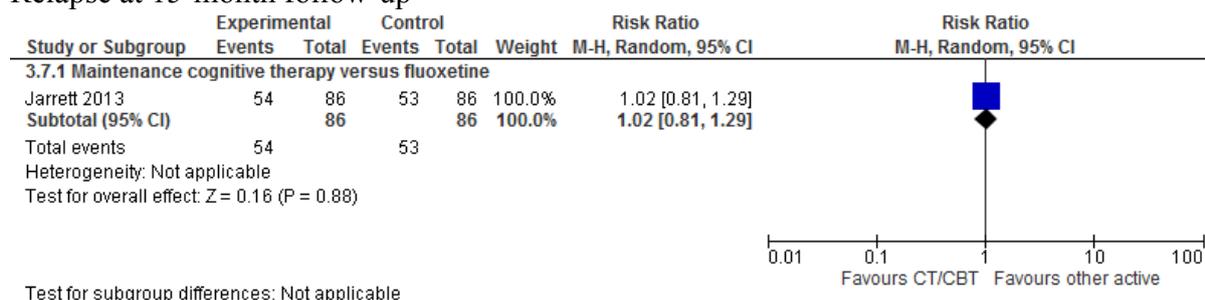
Relapse at 8-10 month follow-up



Relapse at 11-13 month follow-up



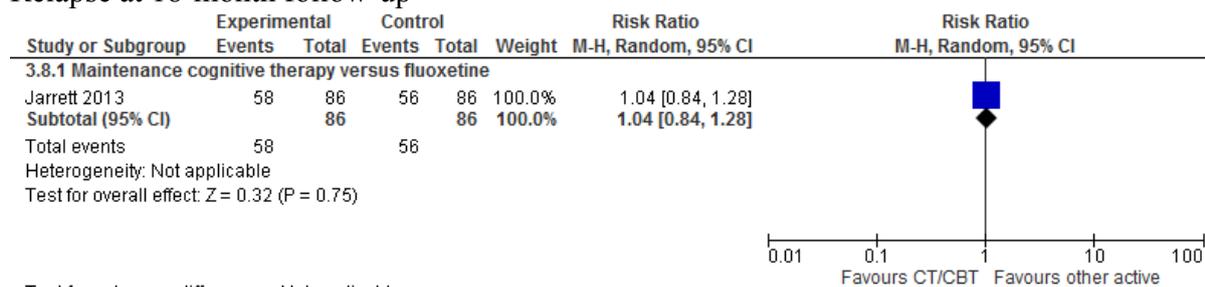
Relapse at 15-month follow-up



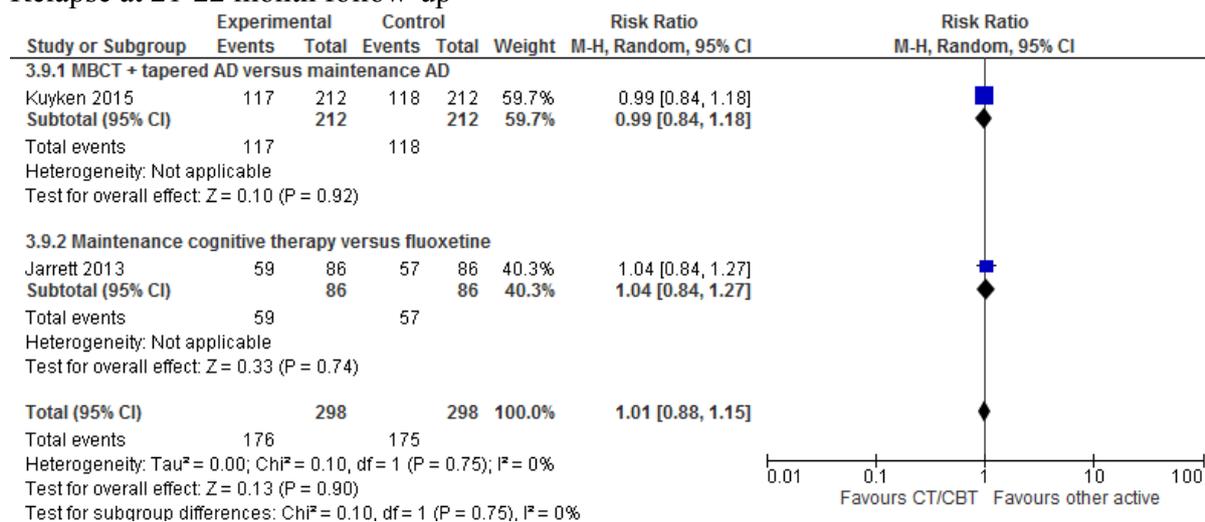
Depression in adults: treatment and management

Forest plots

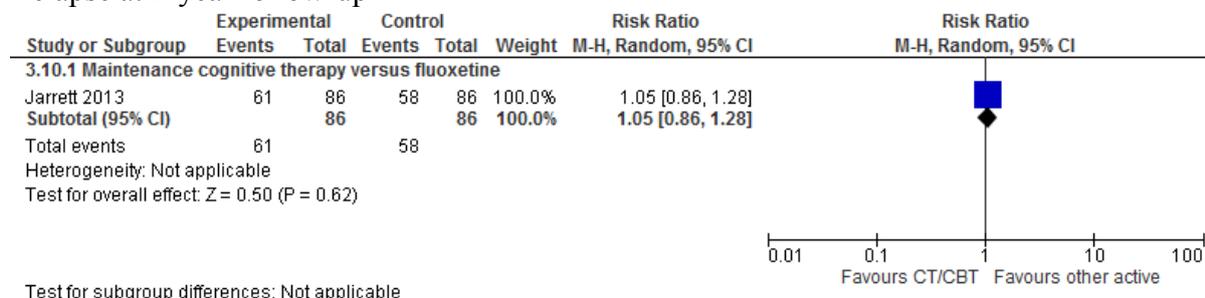
Relapse at 18-month follow-up



Relapse at 21-22 month follow-up

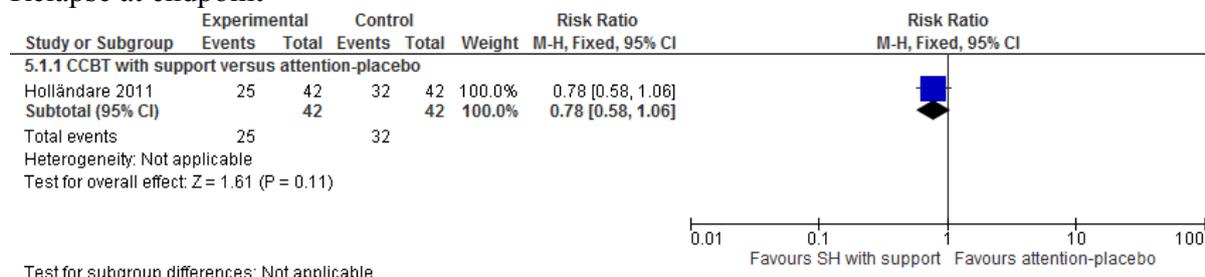


Relapse at 2-year follow-up



Self-help with support versus attention-placebo

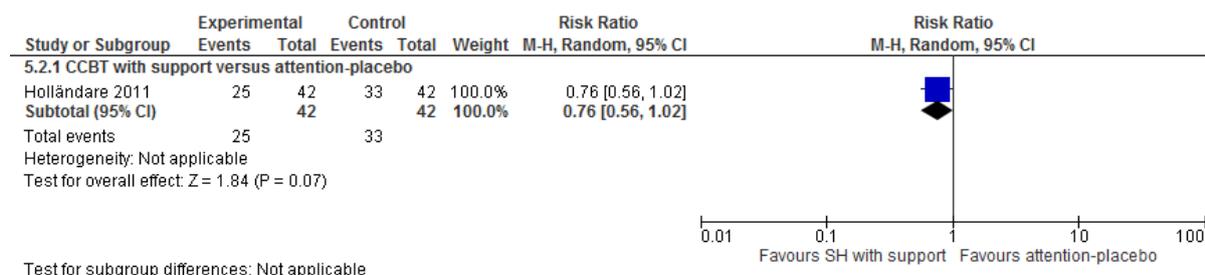
Relapse at endpoint



Relapse at 6-month follow-up

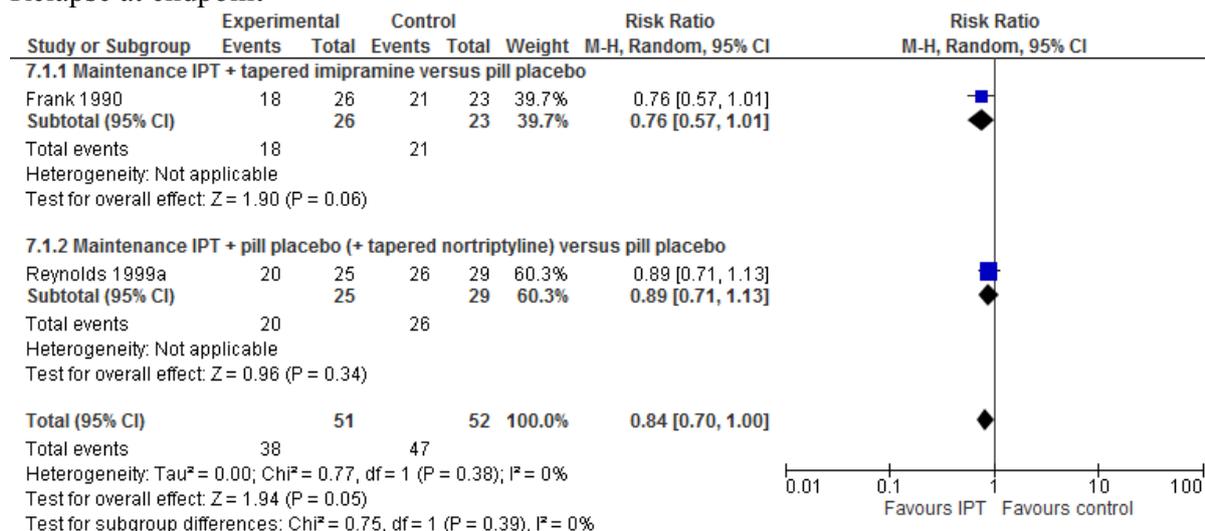
Depression in adults: treatment and management

Forest plots



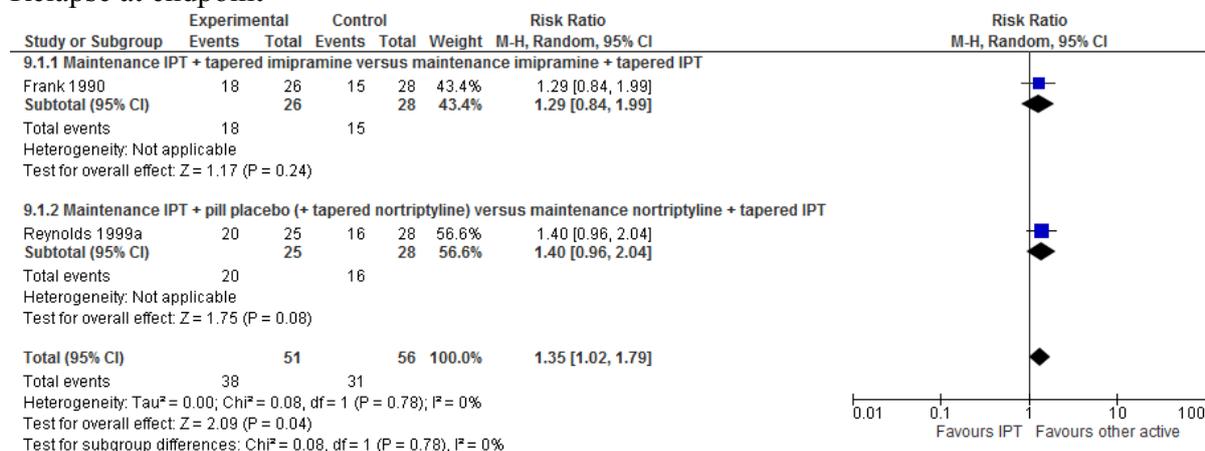
IPT versus control

Relapse at endpoint



IPT versus active intervention

Relapse at endpoint

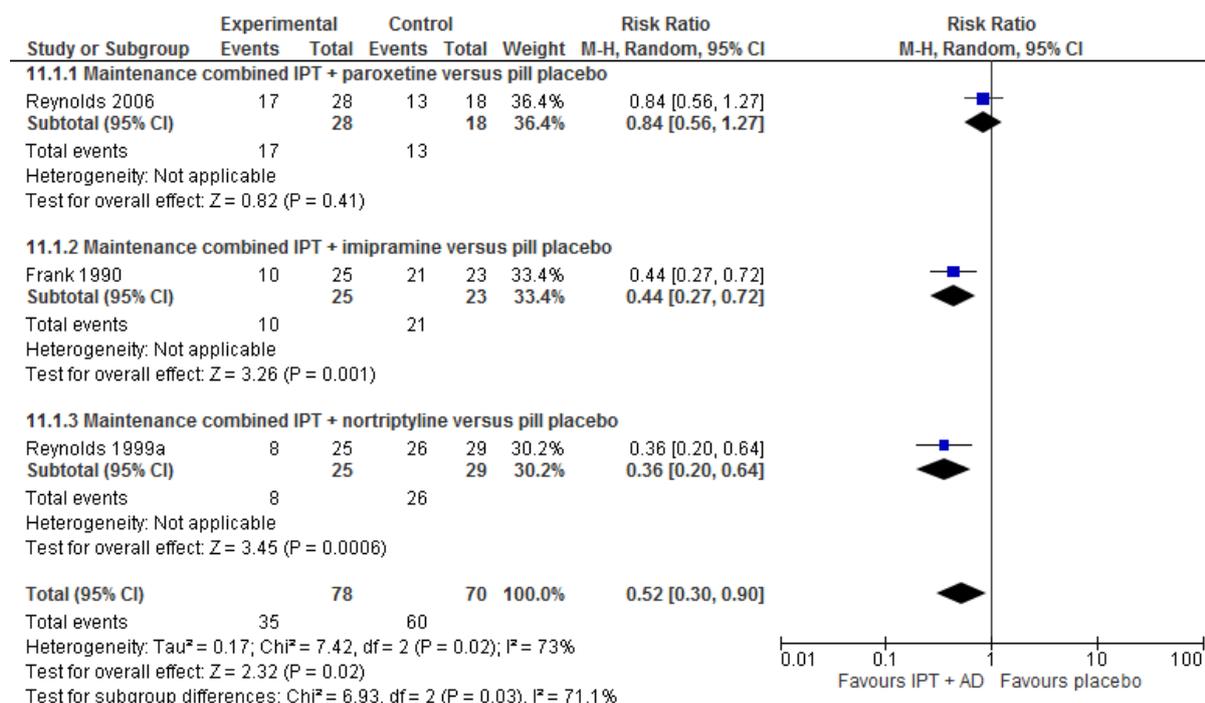


Combined IPT + AD versus pill placebo

Relapse at endpoint

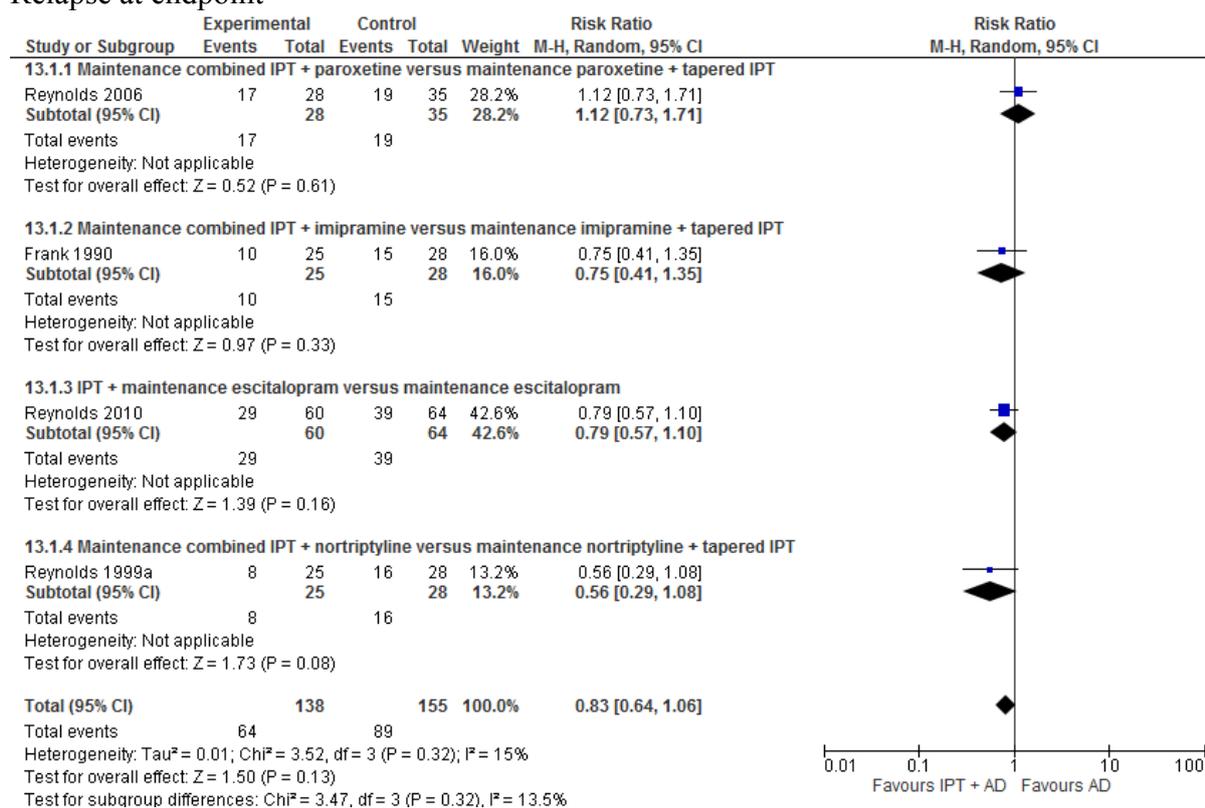
Depression in adults: treatment and management

Forest plots



Combined IPT + AD versus AD

Relapse at endpoint

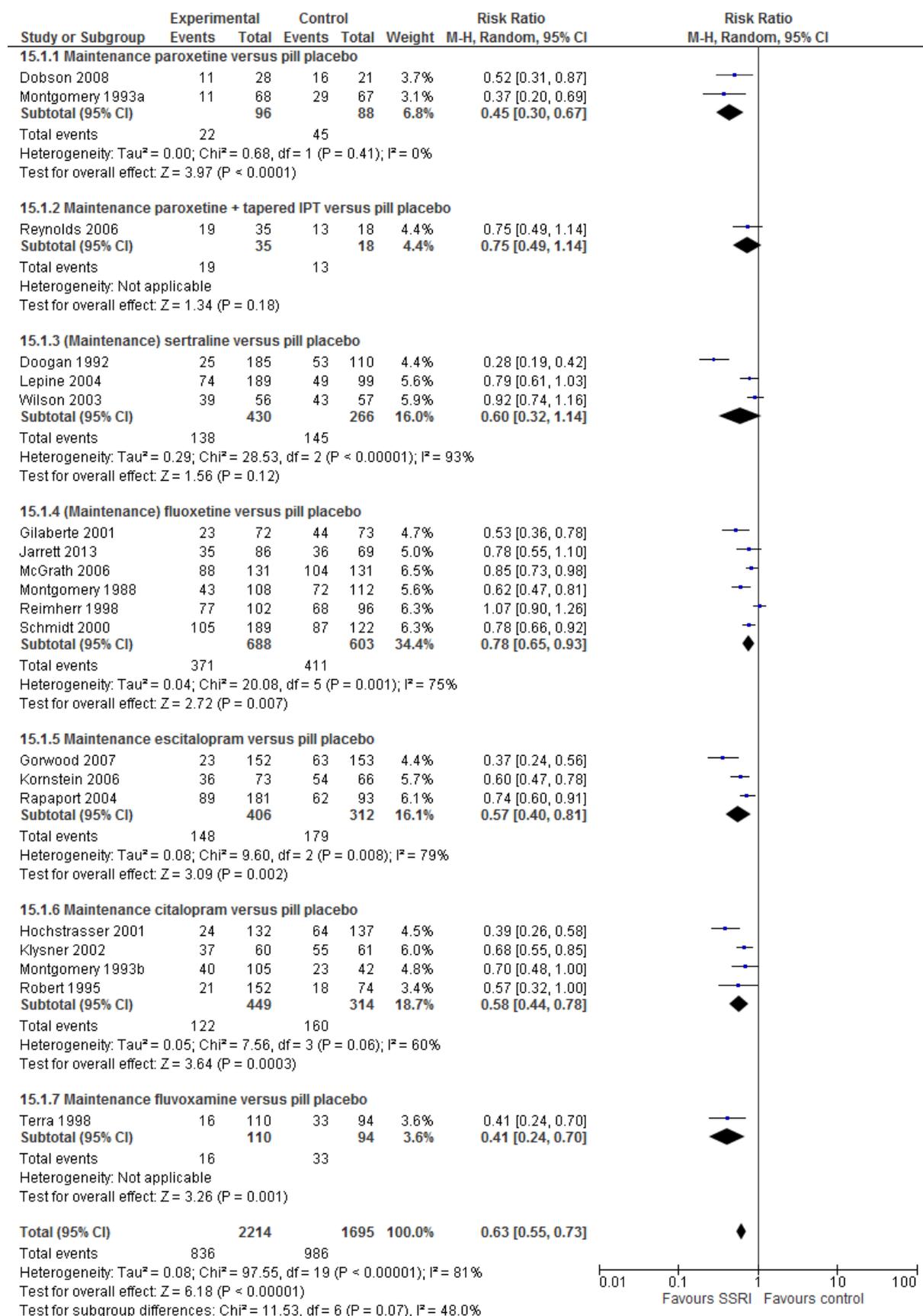


SSRIs versus control

Relapse at endpoint

Depression in adults: treatment and management

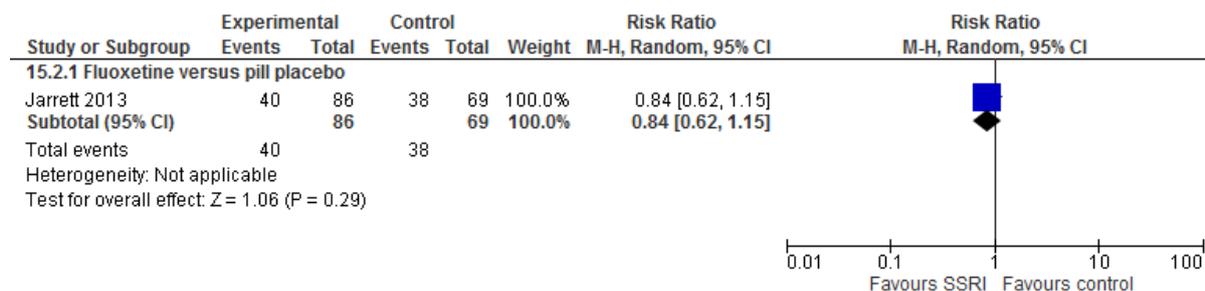
Forest plots



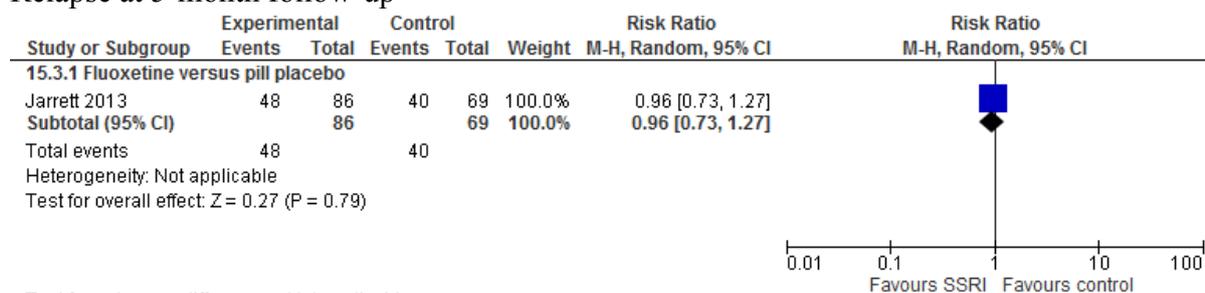
Relapse at 2-month follow-up

Depression in adults: treatment and management

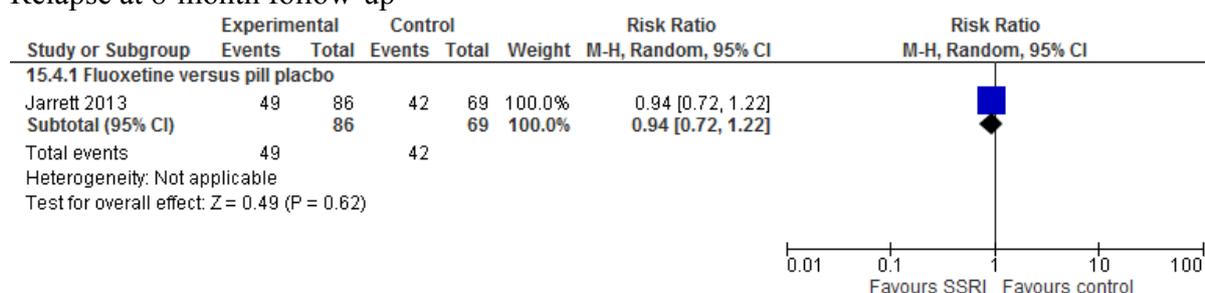
Forest plots



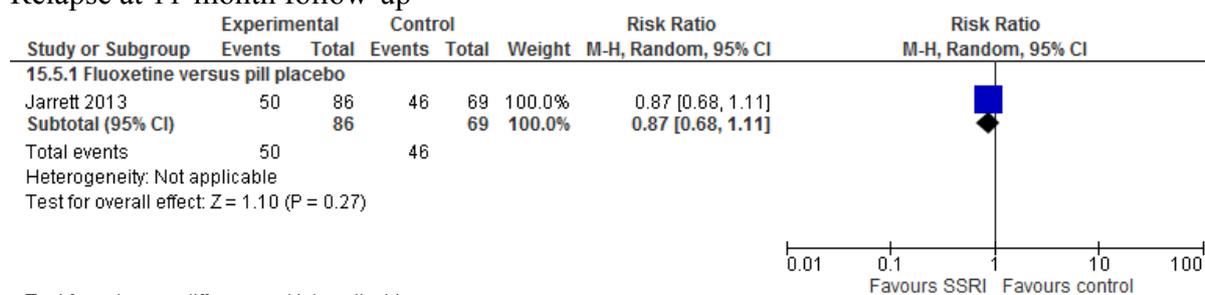
Relapse at 5-month follow-up



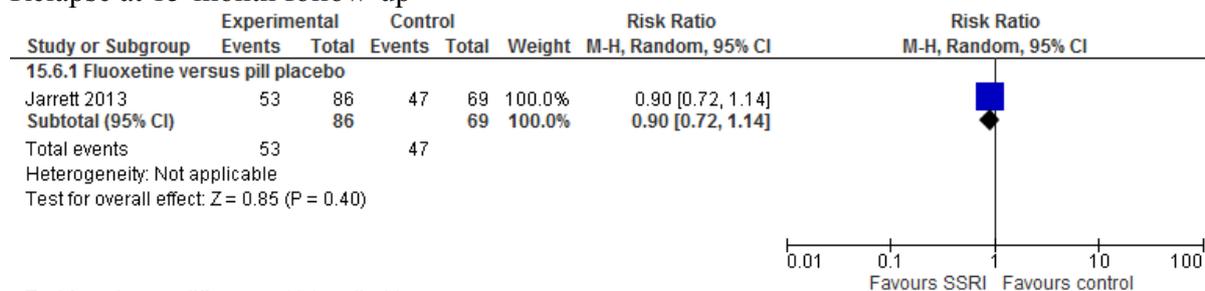
Relapse at 8-month follow-up



Relapse at 11-month follow-up



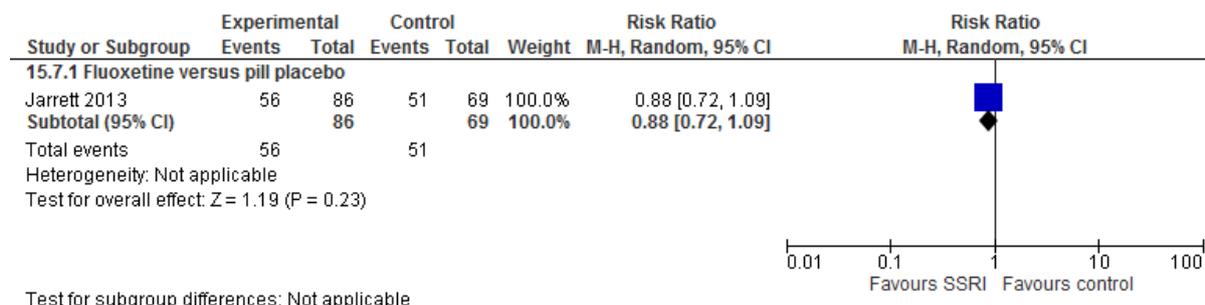
Relapse at 15-month follow-up



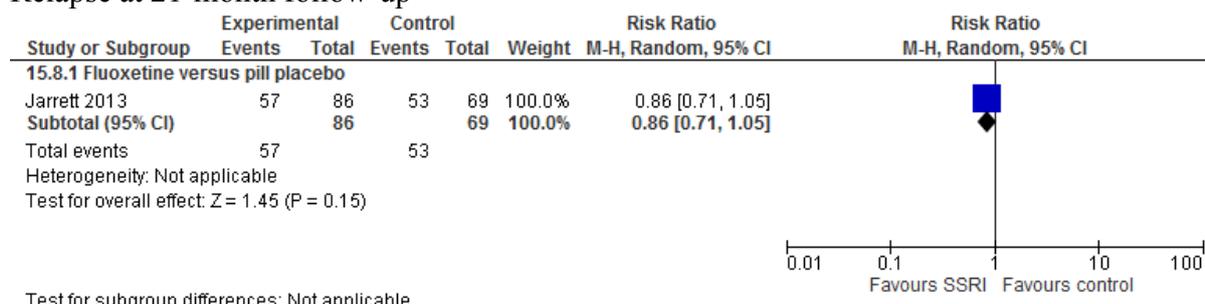
Relapse at 18-month follow-up

Depression in adults: treatment and management

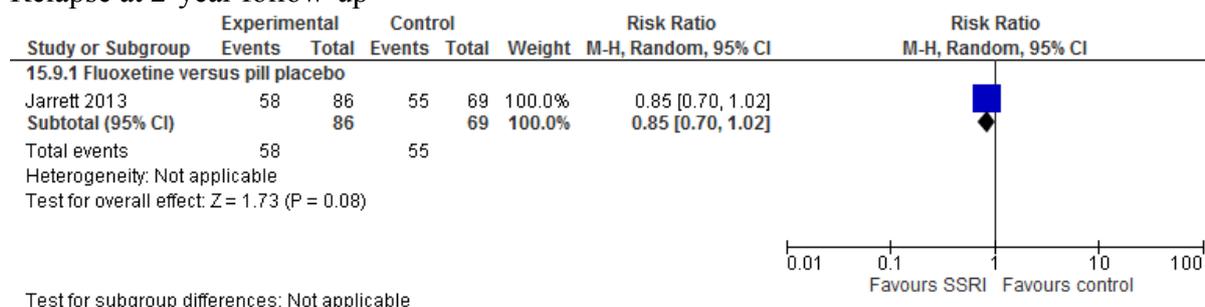
Forest plots



Relapse at 21-month follow-up

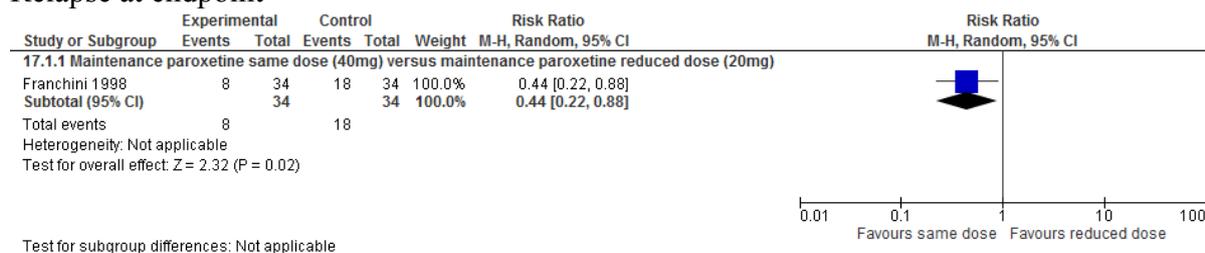


Relapse at 2-year follow-up



SSRI maintenance same dose versus SSRI maintenance reduced dose

Relapse at endpoint

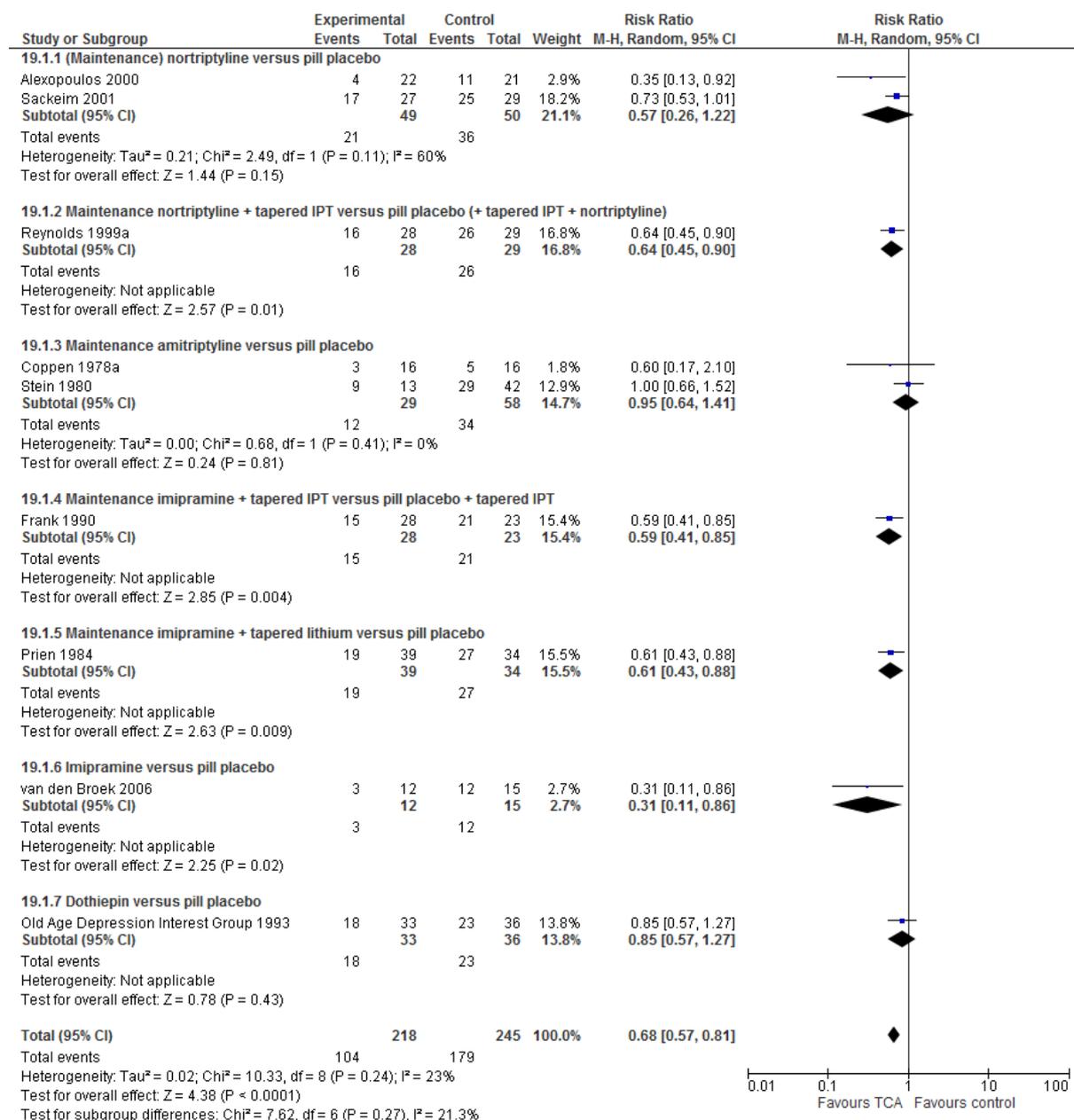


TCA versus control

Relapse at endpoint

Depression in adults: treatment and management

Forest plots

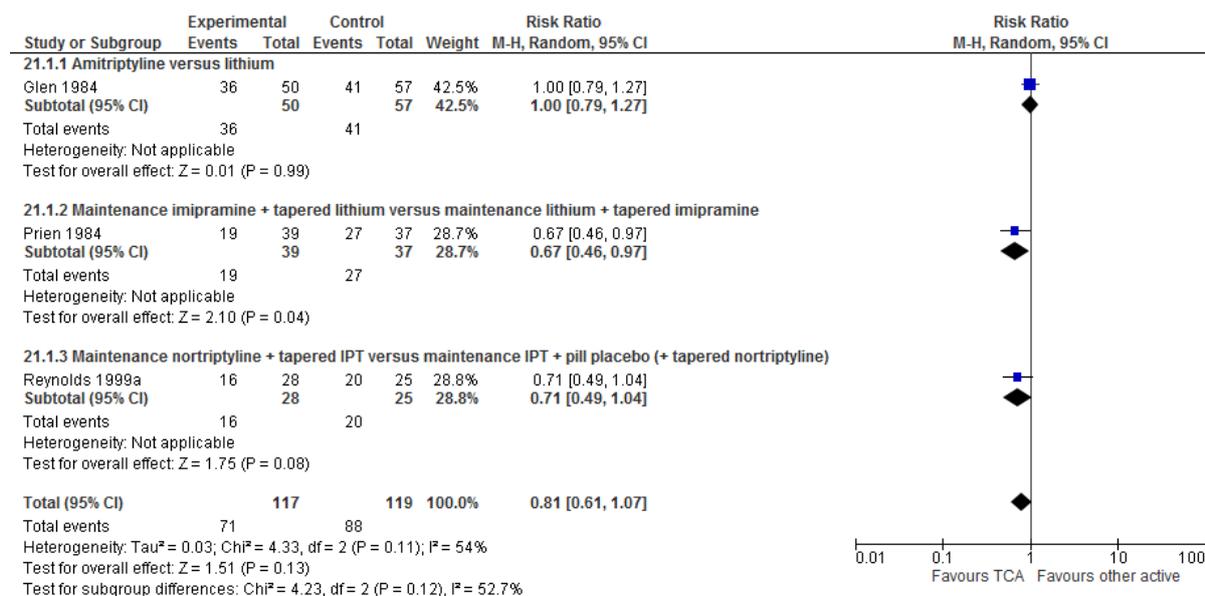


TCAs versus active intervention

Relapse at endpoint

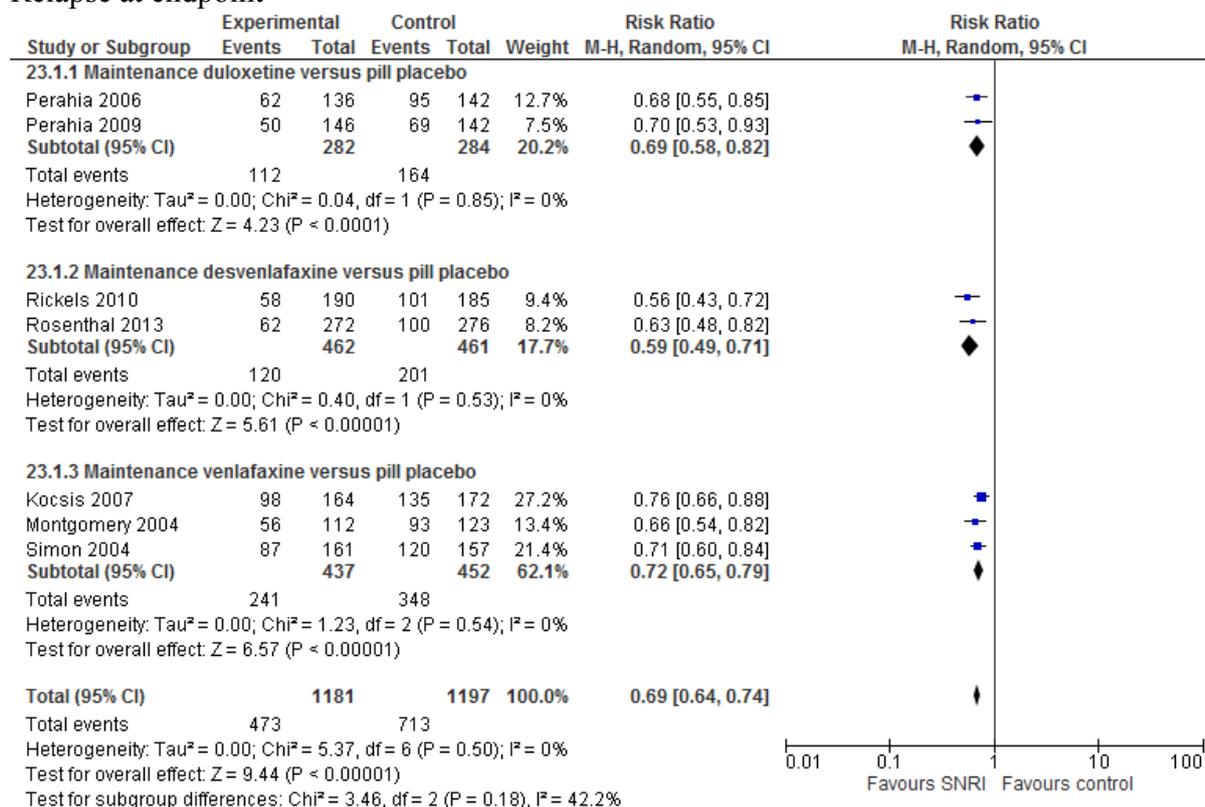
Depression in adults: treatment and management

Forest plots



SNRIs versus control

Relapse at endpoint

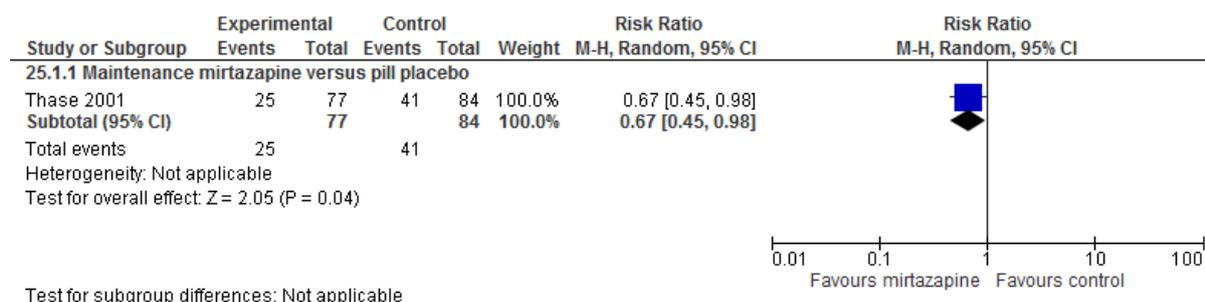


Mirtazapine versus control

Relapse at endpoint

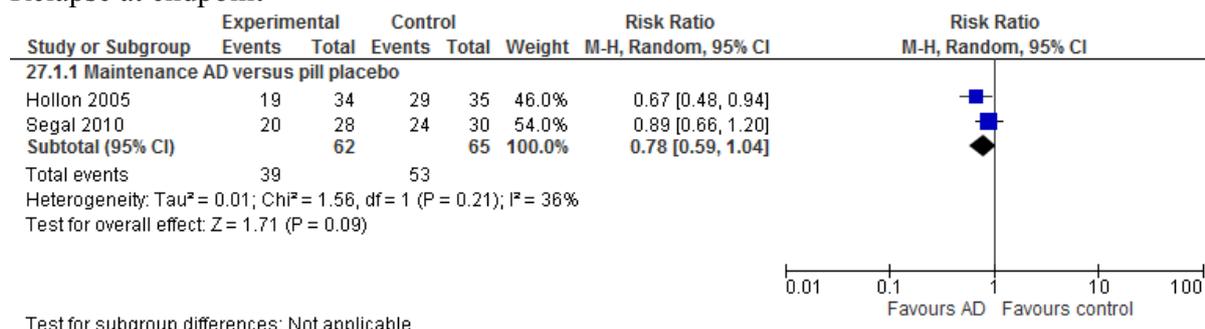
Depression in adults: treatment and management

Forest plots



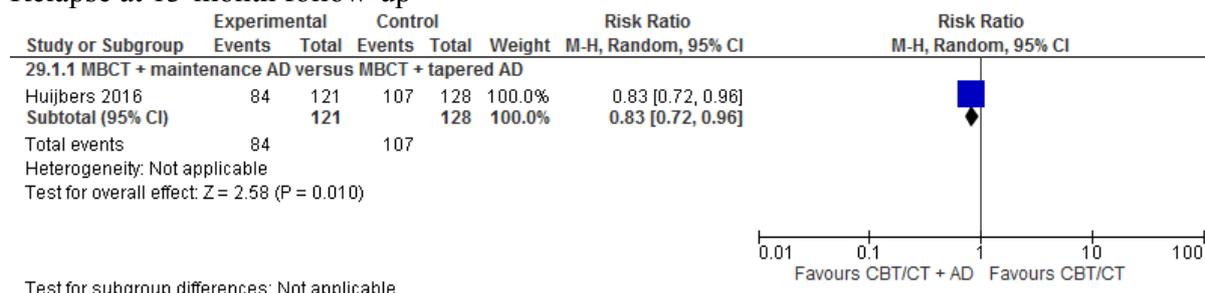
Any AD versus control

Relapse at endpoint



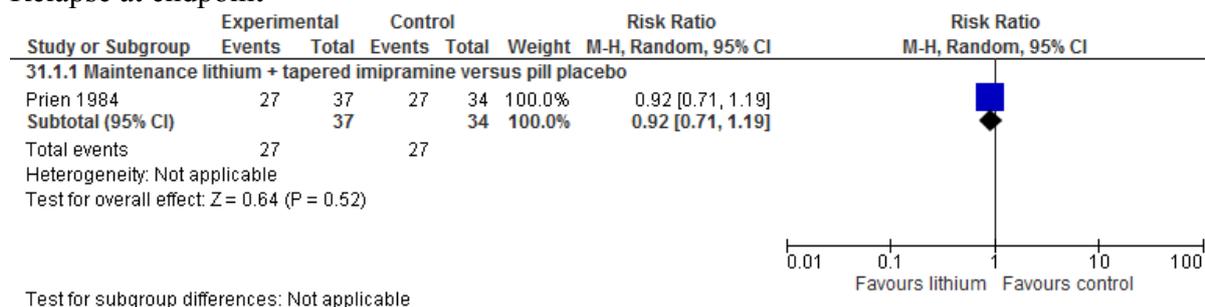
Combined CT/CBT + AD versus CT/CBT

Relapse at 13-month follow-up



Lithium versus control

Relapse at endpoint

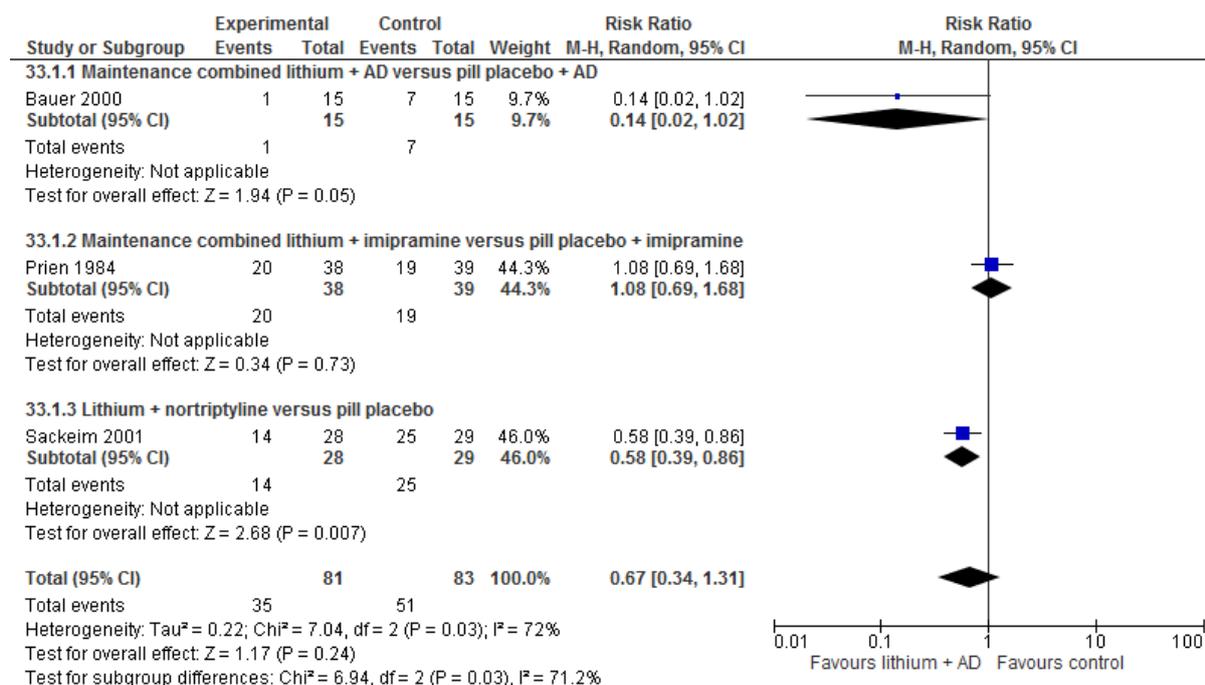


Lithium augmentation versus control

Relapse at endpoint

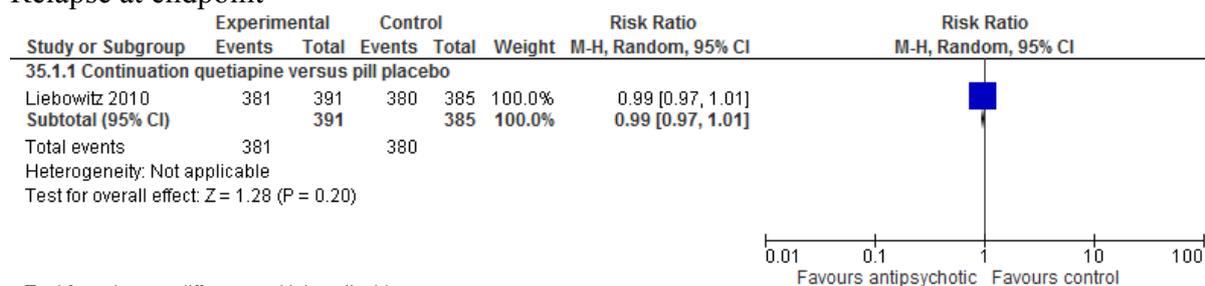
Depression in adults: treatment and management

Forest plots



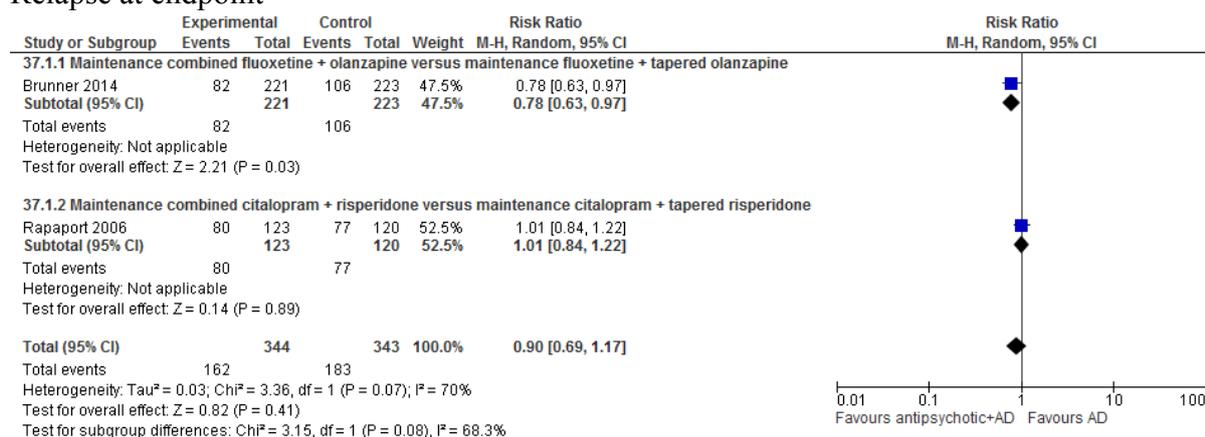
Antipsychotic versus control

Relapse at endpoint



Antipsychotic augmentation versus AD monotherapy

Relapse at endpoint

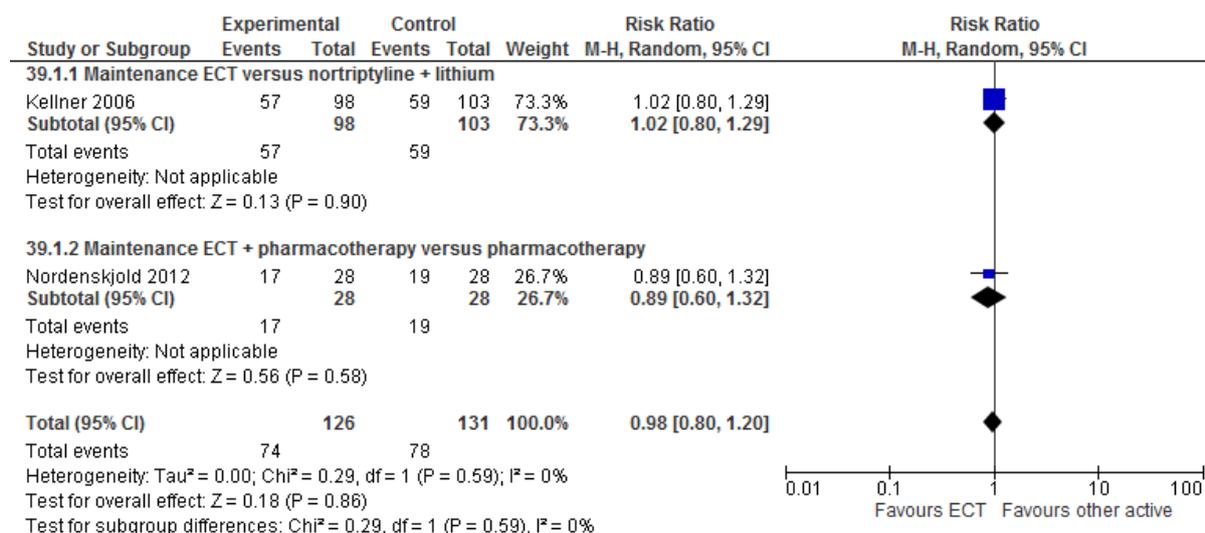


ECT versus active intervention

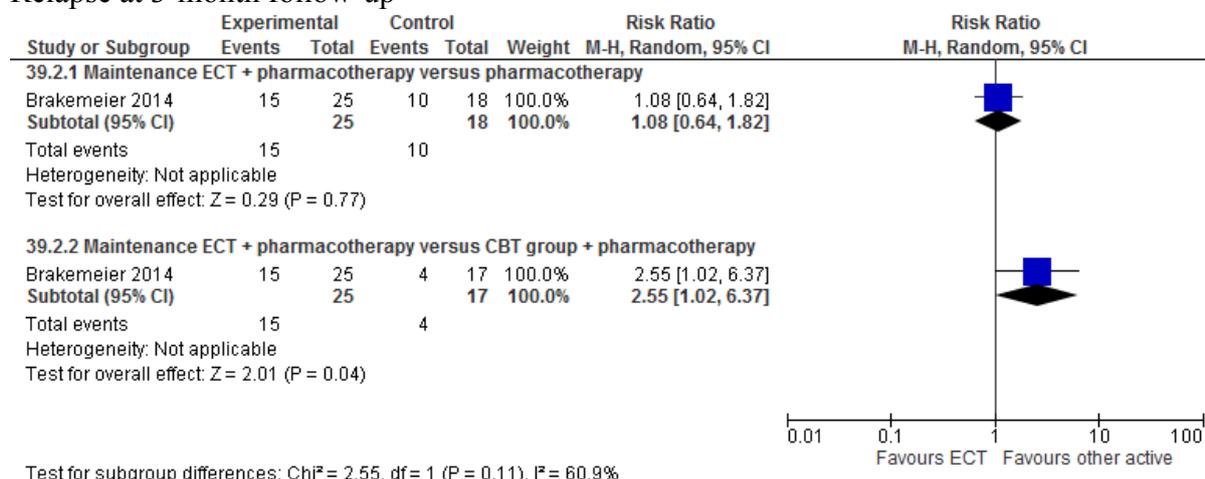
Relapse at endpoint

Depression in adults: treatment and management

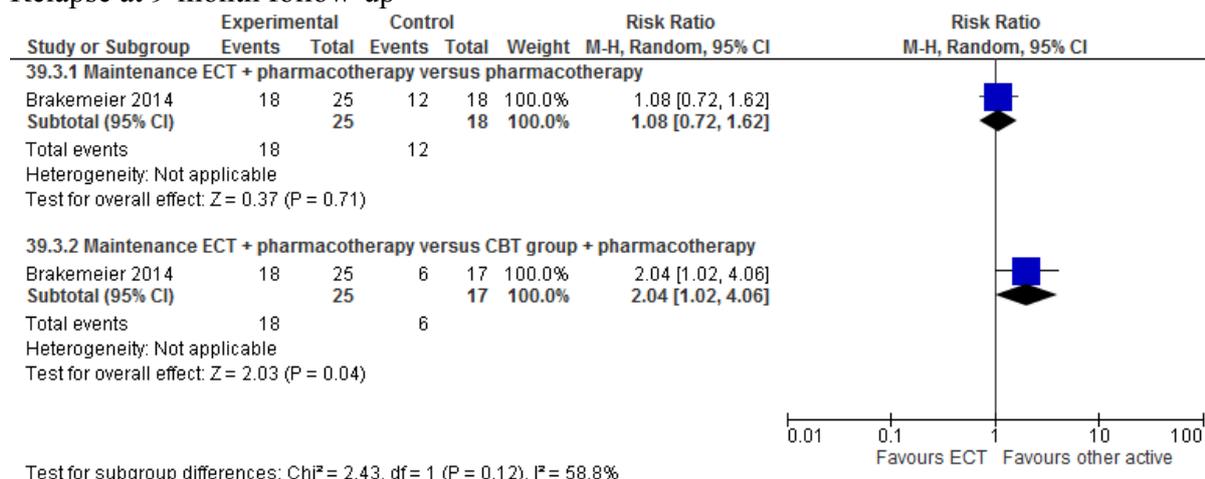
Forest plots



Relapse at 3-month follow-up



Relapse at 9-month follow-up

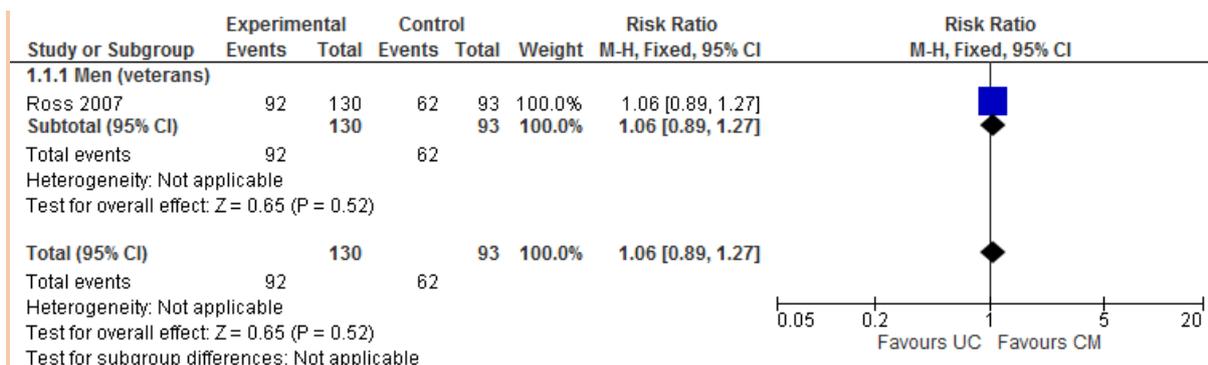


Access to services (chapter 12)

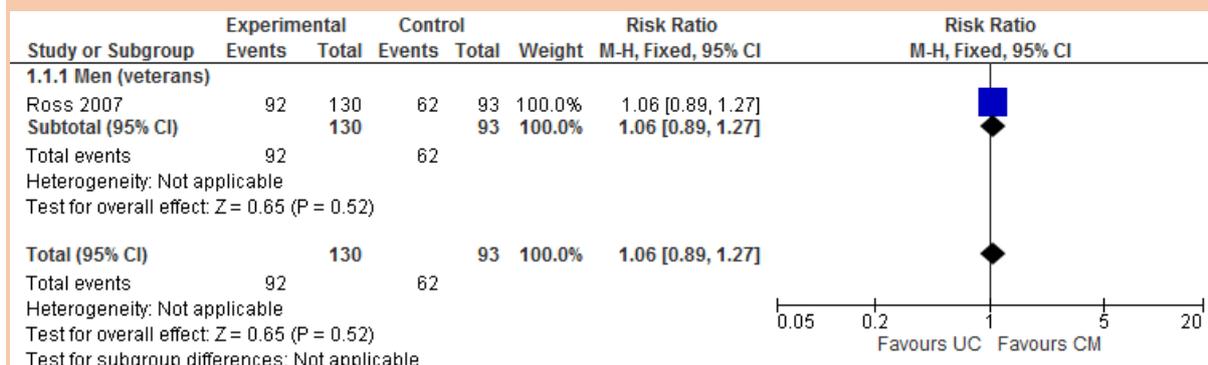
Close monitoring versus usual care (men [veterans])

Number attending primary care visits during study period (case review)

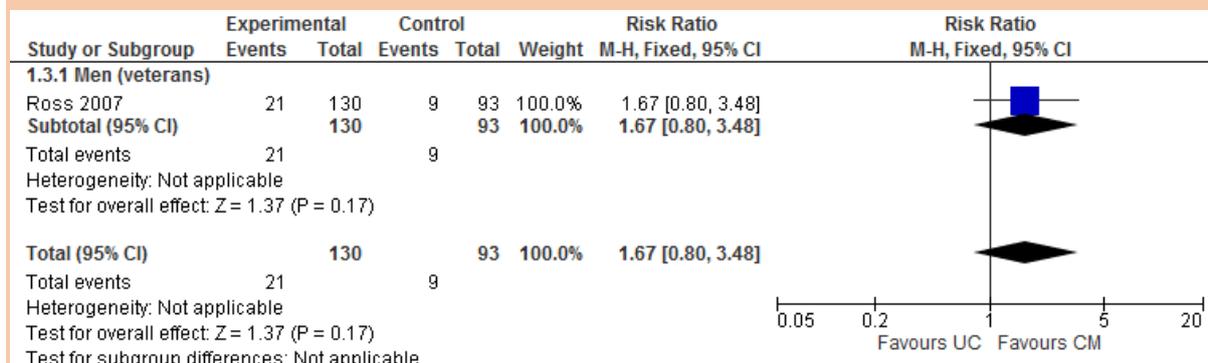
Depression in adults: treatment and management
Forest plots



Number who had any MH care [including behavioural health specialist] during the study period (case review)

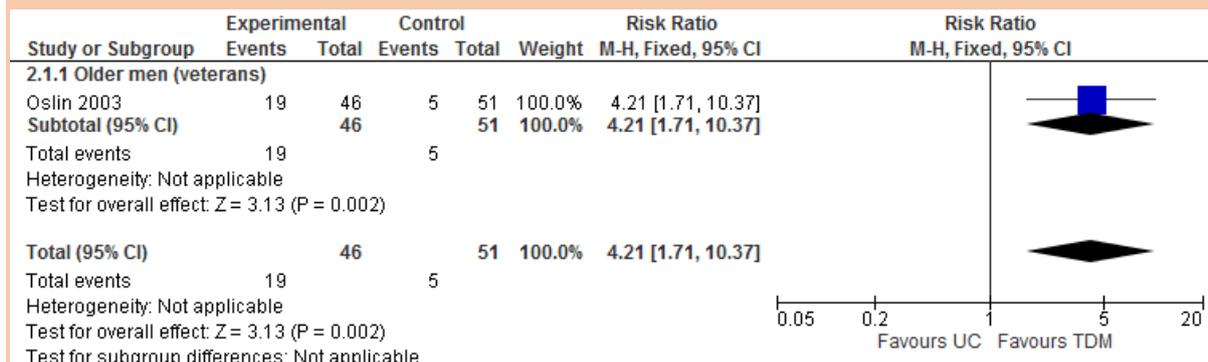


Number who started an antidepressant during the study period (case review)



Telephone disease management versus usual care (older men [veterans])

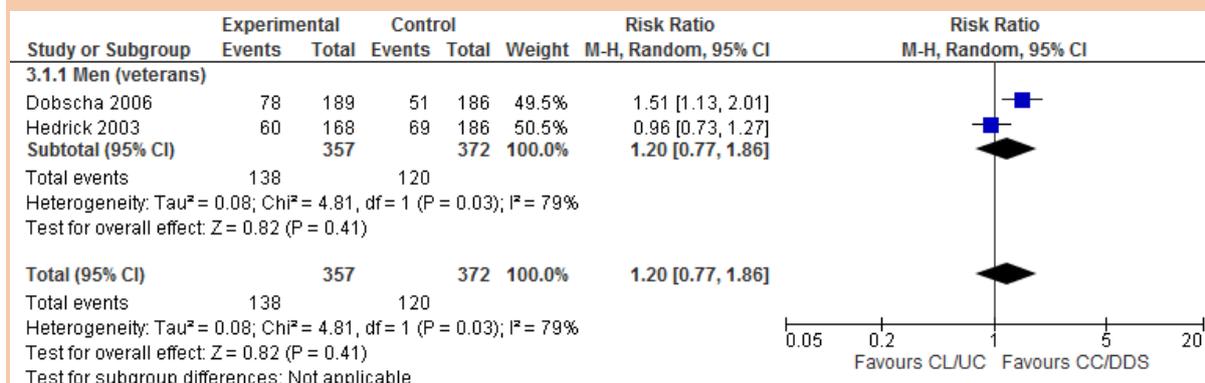
Number completing at least one mental health/substance abuse appointment (assessed by self-report)



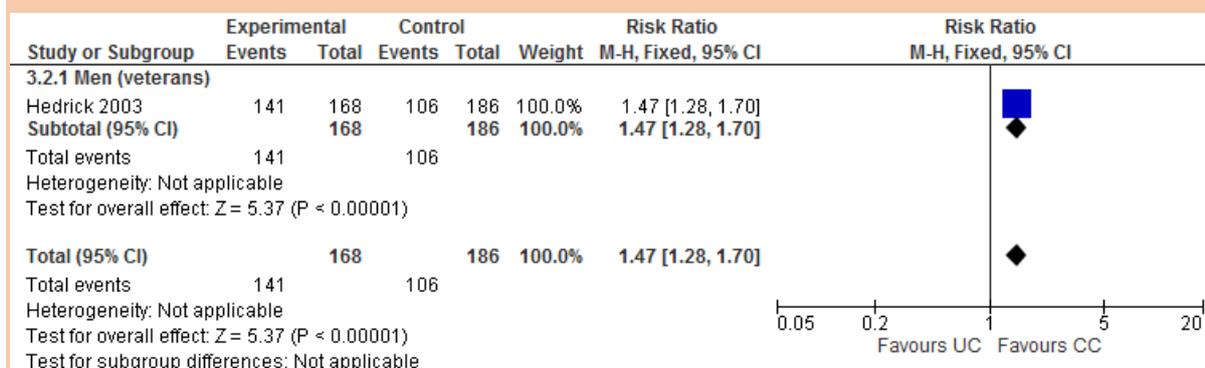
Depression in adults: treatment and management
Forest plots

Simple collaborative care versus usual care (men [veterans] and older adults)

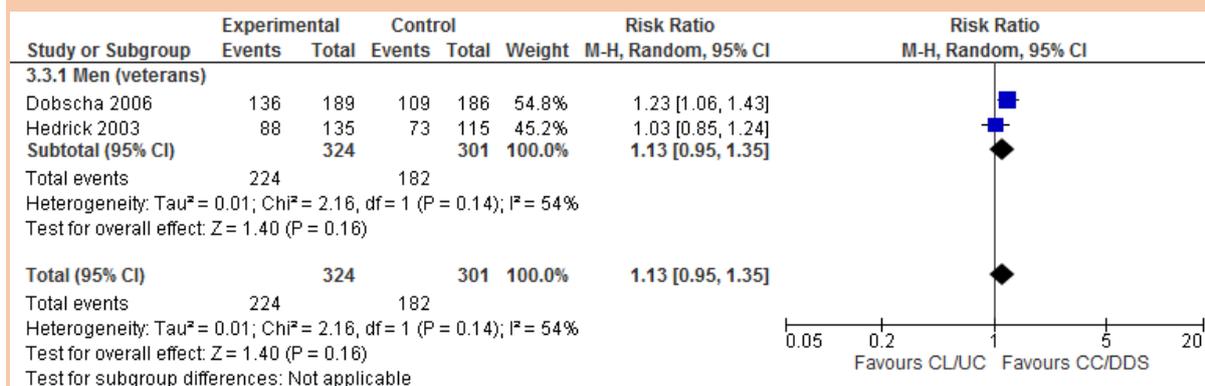
Number who attended ≥ 1 appointment with mental health specialist



Number who have had a depression-related primary care visit



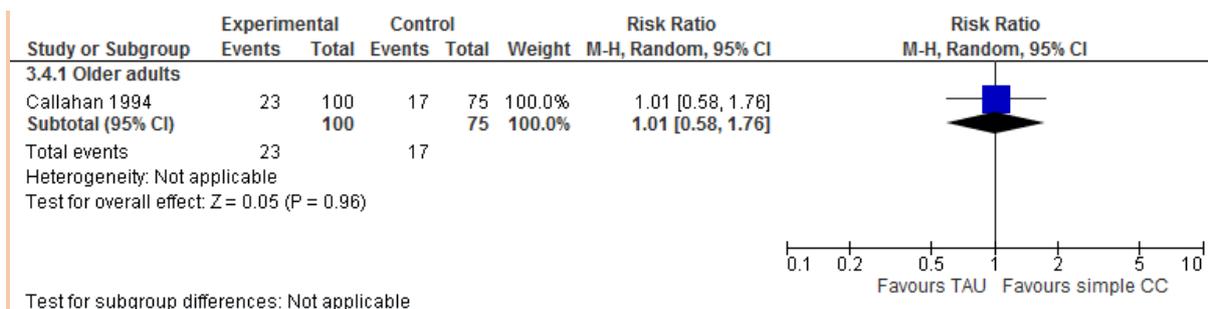
Received ≥ 90 days of therapy with a minimally therapeutic dosage of antidepressant



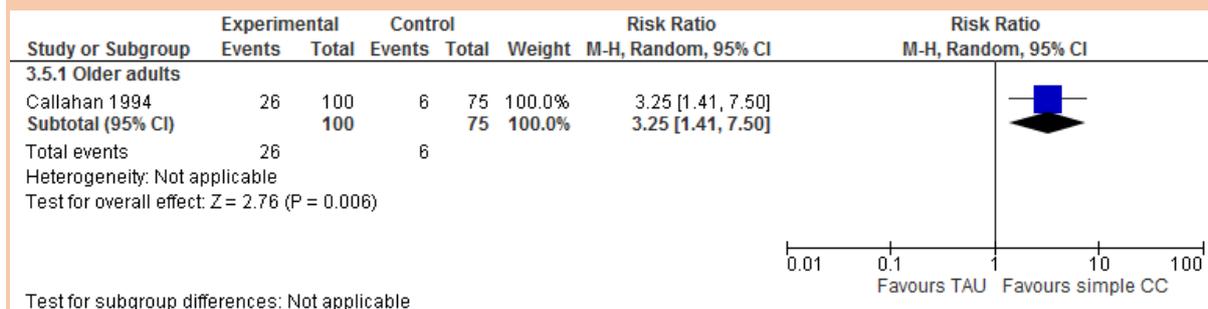
Number of patients whose unhelpful medications (those potentially exacerbating depression) were terminated

Depression in adults: treatment and management

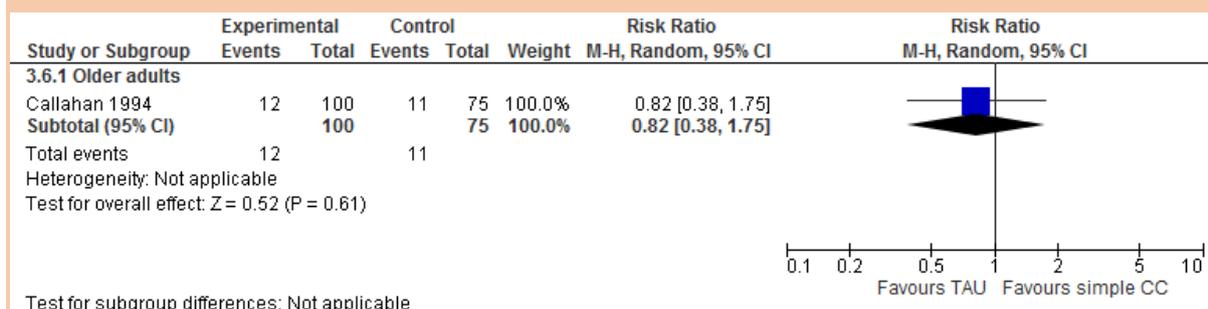
Forest plots



Number of people starting an antidepressant

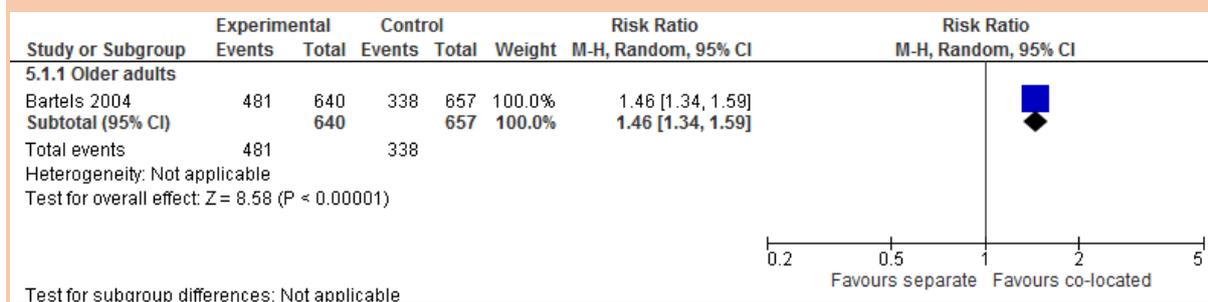


Number of patients for whom a psychiatric consultation was sought



Co-located services versus geographically separate services (older adults)

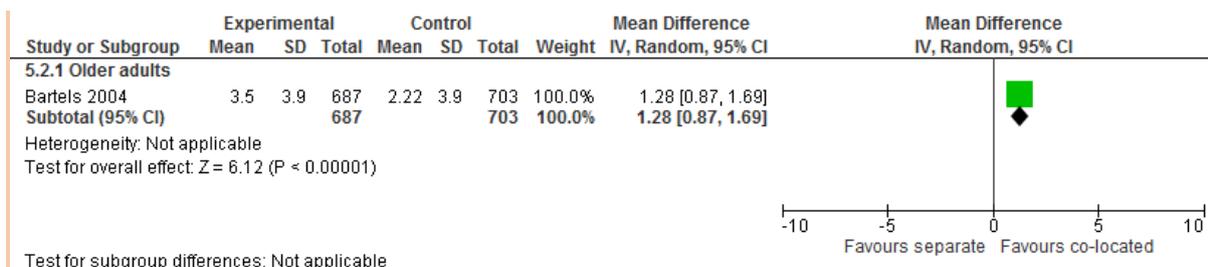
Mean number of patients who engaged with treatment



Number of treatment visits

Depression in adults: treatment and management

Forest plots

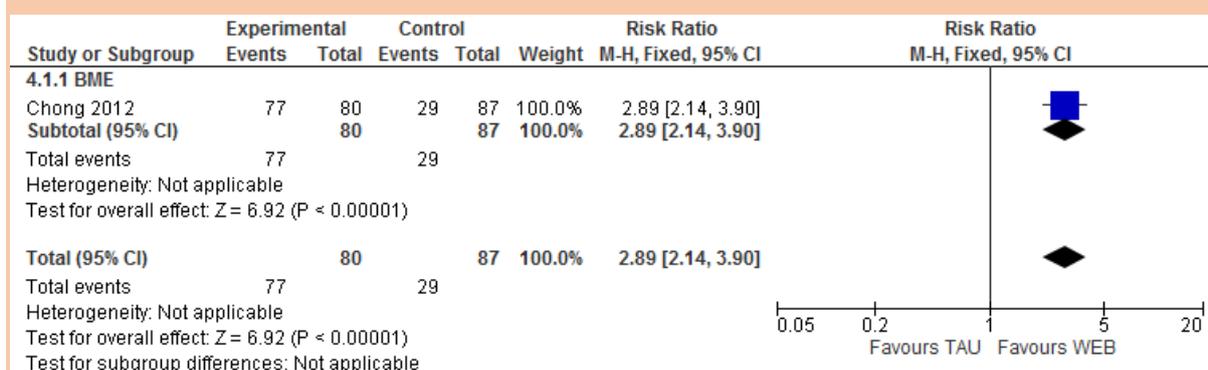


Proportion of patients who had at least one mental health visit

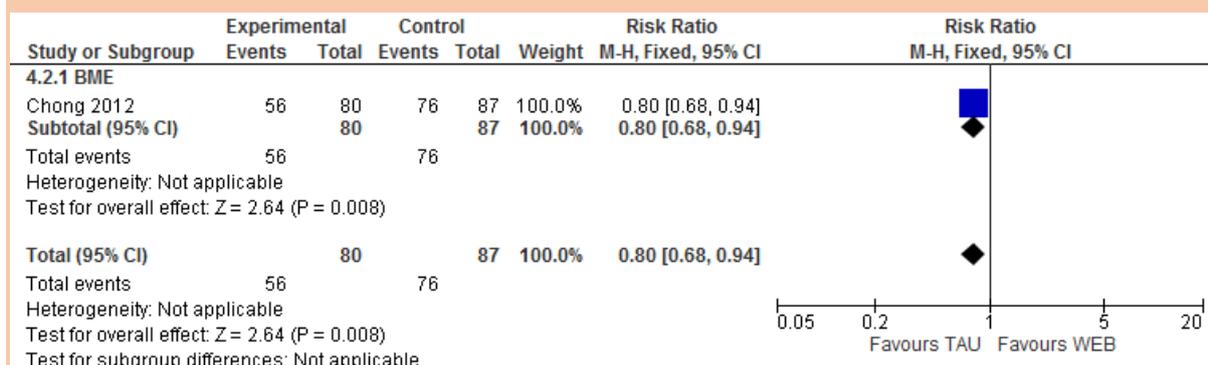


Clinic-based tele-psychiatry (using a webcam) versus TAU (BAME)

Number of subjects who made a mental health appointment

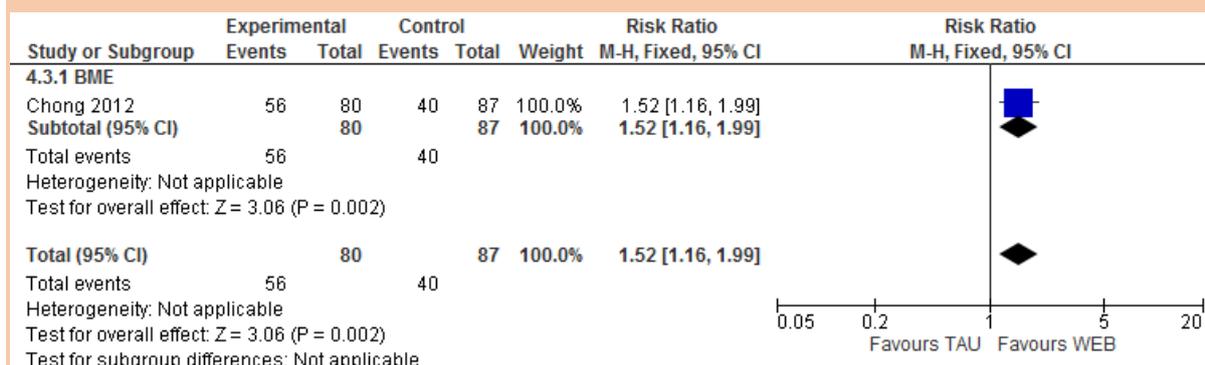


Number of subjects who made a primary care appointment

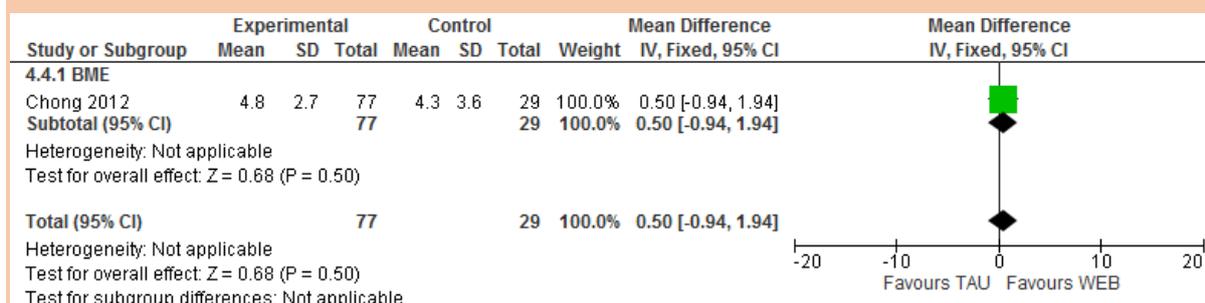


Depression in adults: treatment and management
Forest plots

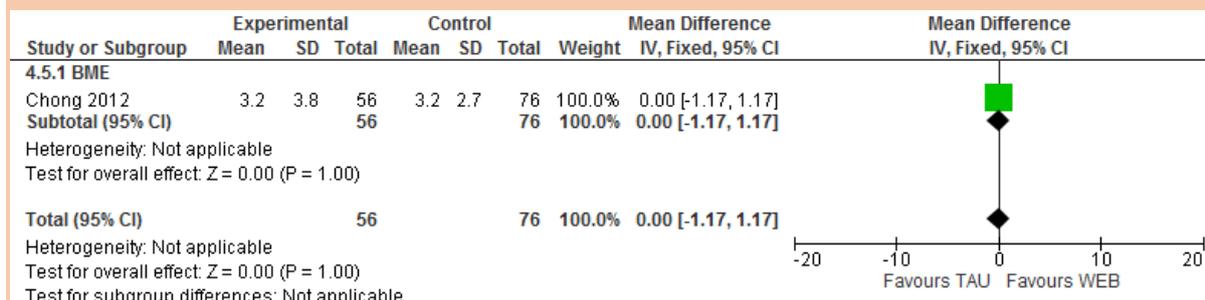
Number used antidepressants



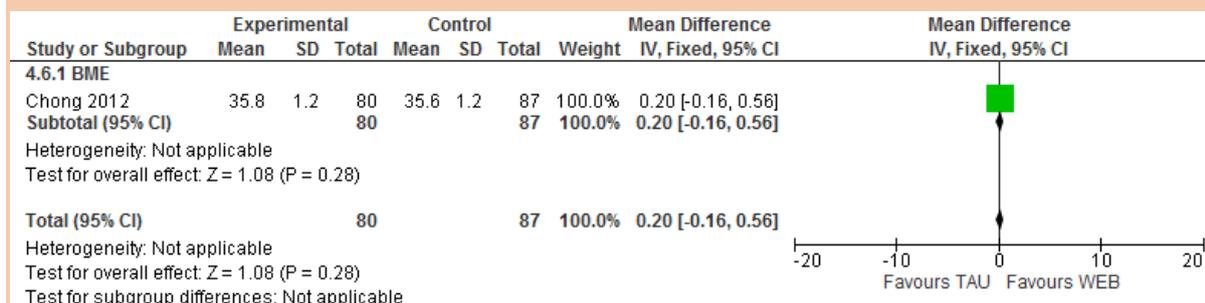
Mean number of completed mental health appointments



Mean number of completed primary care appointments



Satisfaction (visit specific satisfaction questionnaire [VSQ-9] range 0-36, higher better)

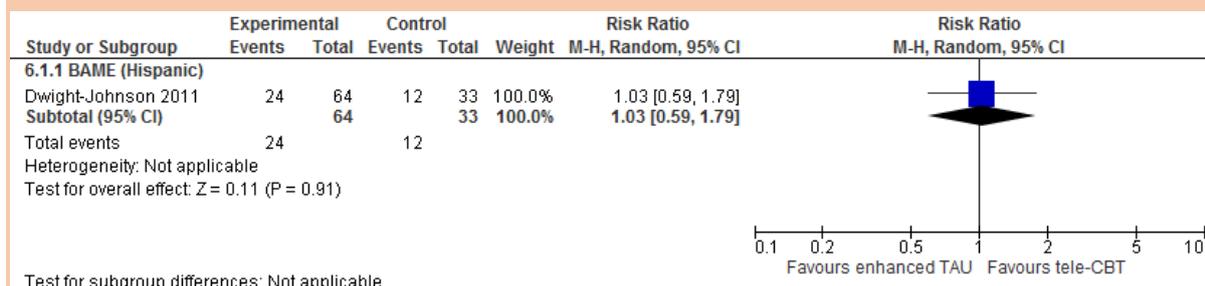


Depression in adults: treatment and management

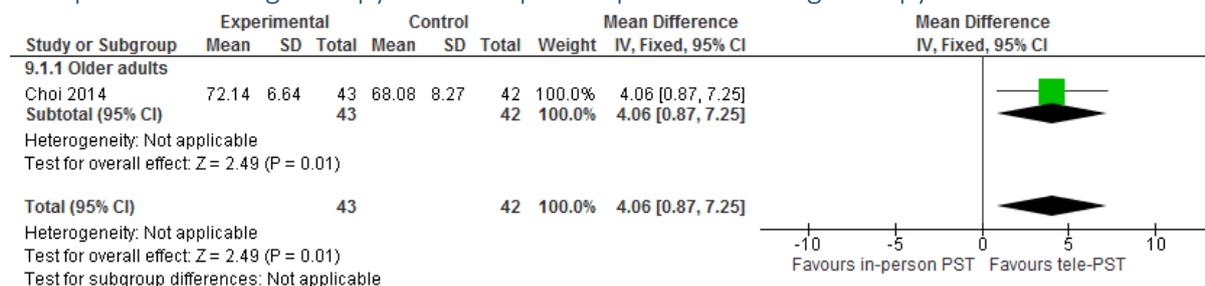
Forest plots

Telephone CBT versus enhanced usual care (BAME)

Number reporting they were satisfied with the treatment provided

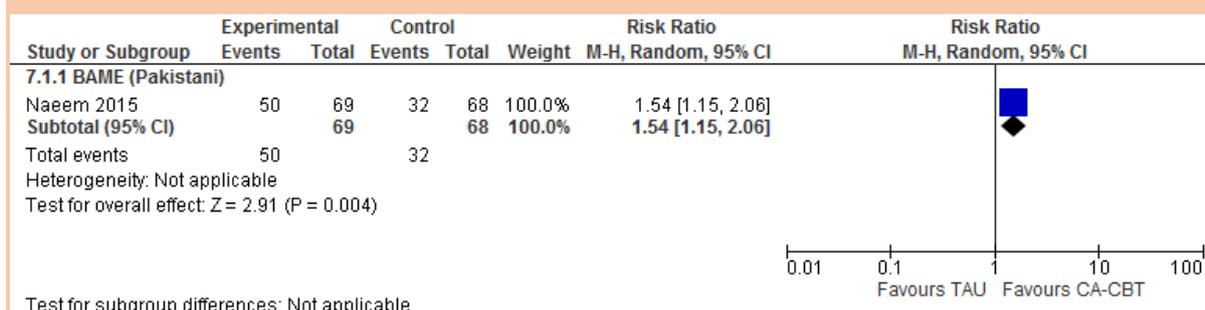


Tele-problem solving therapy versus in-person problem solving therapy



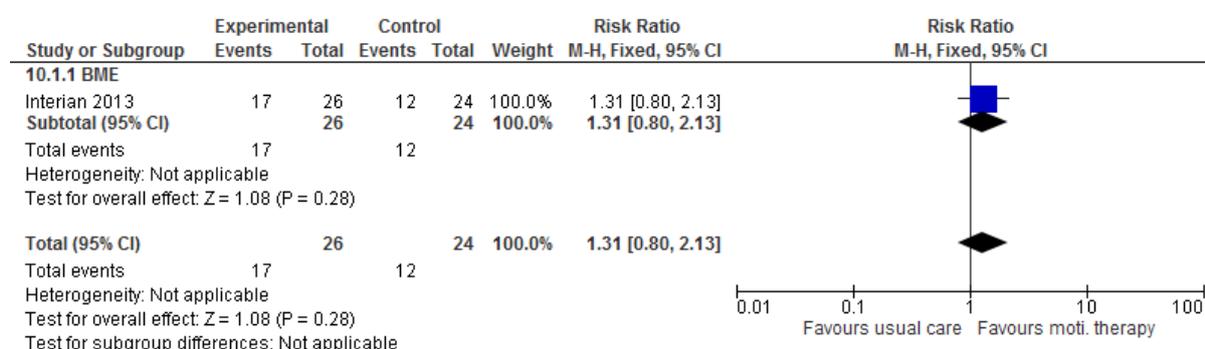
Culturally-adapted CBT versus TAU (BAME)

Number of participants stating they were 'very satisfied' with the treatment



Culturally adapted motivational therapy versus usual care (BAME)

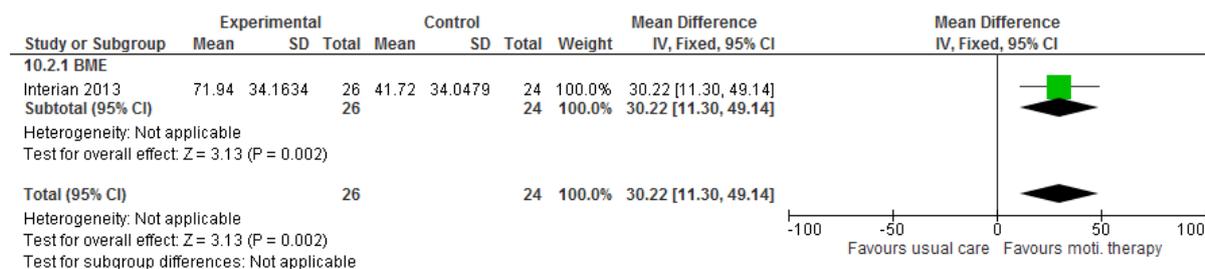
Number of patients who attended at least one psychotherapy session



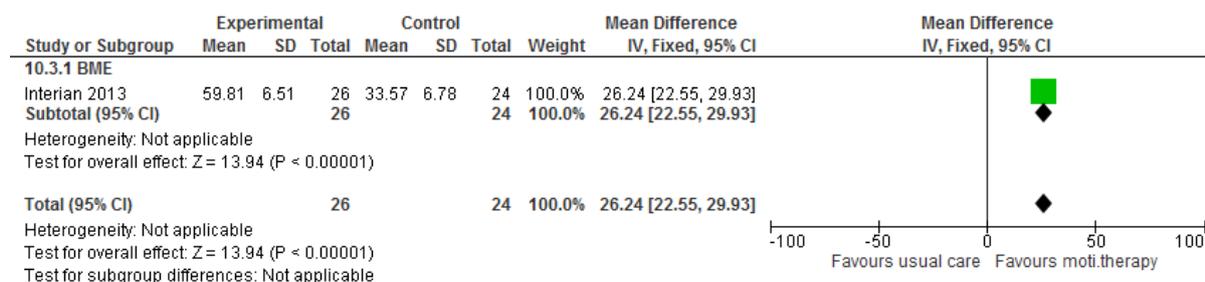
[Time 2] adherence score as measured by the Medication Event Monitoring System (MEMS)

Depression in adults: treatment and management

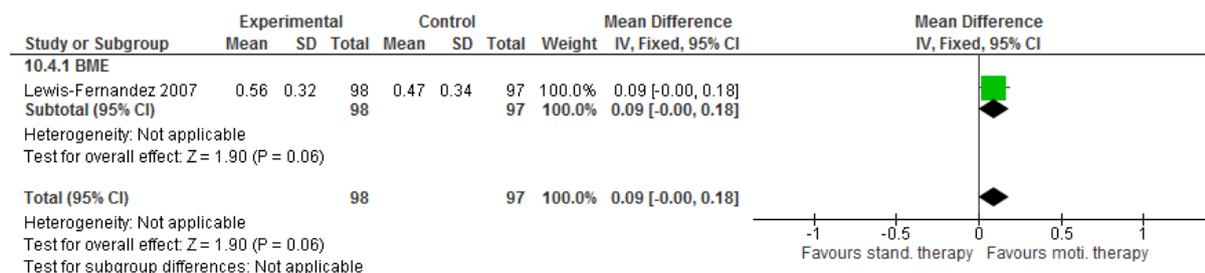
Forest plots



[Time 3] adherence score as measured by the Medication Event Monitoring System (MEMS)



Proportion of fully attended days as measured by the Composite Adherence Score (CAS)



Patient satisfaction as assessed by the Client Satisfaction Questionnaire (CSQ)

