Depression in adults: further-line treatment

**No response to treatment after 4 to 6 weeks**

- Consider with the person why treatment is not working
- Make shared decision about how to address problems raised

**Factors that might reduce response include:**
- personal, social or environmental factors
- physical or other mental health conditions
- problems adhering to treatment plan

**If no response at all after addressing any problems:**
- review the diagnosis, and consider alternative or comorbid conditions
- provide reassurance and hope
- discuss further treatment options, including any treatments that have been helpful in the past

**Which acute treatment showed no or limited response?**

**Antidepressants alone**

- Consider switching to another psychological therapy
- Consider adding an SSRI to psychological therapy
- Consider switching to SSRI alone
- Consider adding group exercise
- Consider switching to drug in same or different class
- Consider adding a psychological therapy (e.g. CBT, IPT, or STPP)

**Psychological therapy alone**

- Consider switching to another psychological therapy
- Consider adding an SSRI to psychological therapy
- Consider switching to SSRI alone
- Consider adding group exercise
- Consider switching to drug in same or different class
- Consider adding a psychological therapy (e.g. CBT, IPT, or STPP)

**Combination treatment**

- Consider switching to another psychological therapy
- Consider adding an SSRI to psychological therapy
- Consider switching to SSRI alone
- Consider adding group exercise
- Consider switching to drug in same or different class
- Consider adding a psychological therapy (e.g. CBT, IPT, or STPP)
- Consider adding in another medication

**If, after no response to antidepressants, the person does not want to try or add psychological therapy but instead wants to try a combination of medications:**
- explain the possible increase in side effect burden
- consider referral to a specialist mental health setting, or consulting a specialist

**Combination treatments include:**
- adding an antidepressant from a different class
- adding a second generation antipsychotic or lithium
- augmenting with ECT, lamotrigine, or triiodothyronine

**See treatment options for more severe depression.**

Be aware higher doses may not be more effective. Frequently check side effects and monitor symptom change.

Cross-tapering may be needed: check with specialist mental health services.