

## Shared Decision Making - depression

Next clinical review date March 2018

### Deciding what to do about depression

This short decision aid is to help you decide what treatment, or combination of treatments, to choose if you have mild to moderate depression.

#### **The main treatment options for mild to moderate depression are:**

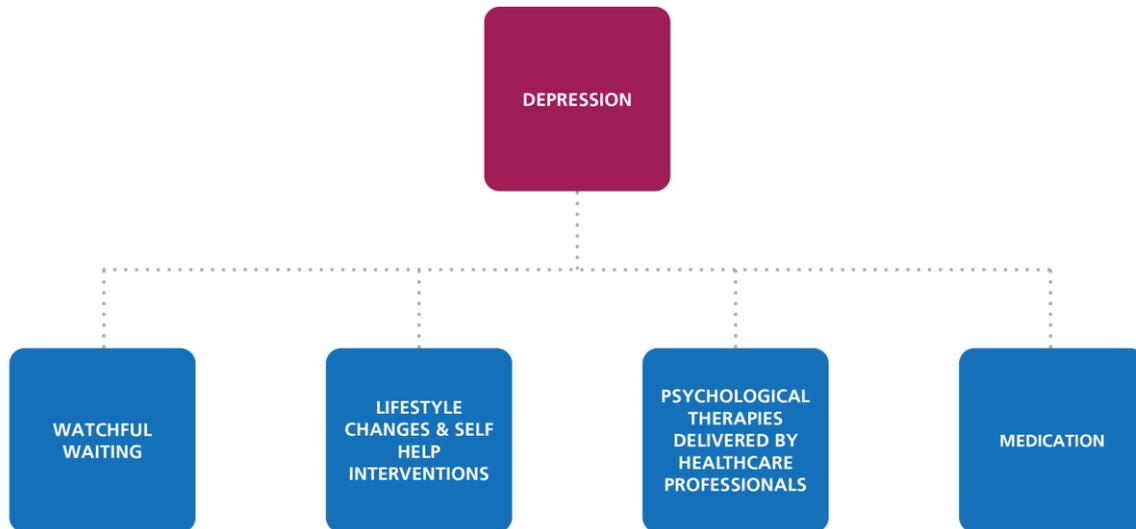
- Watchful waiting: this means waiting to see if symptoms get better or worse on their own
- Lifestyle changes and self-help interventions: this means managing depression on your own, with or without joining a support group, using a self-help manual or talking therapy programmes via the internet, changing dietary, drinking and exercise habits, and using complementary therapies, such as herbal remedies or acupuncture
- Psychological therapies (often called talking therapies) delivered by healthcare professionals: this means seeing a healthcare professional for sessions of a talking therapy, which can be tailored to whether you want to talk about how you think and feel (counselling or cognitive behavioural therapy, CBT), your relationships (interpersonal psychotherapy, IPT), or painful things that have happened in the past (psychodynamic therapy). A healthcare professional may be a doctor, nurse, psychologist, counsellor or therapist
- Medication: this means taking a medicine, such as selective serotonin receptor inhibitors (SSRI) that affects the balance of certain chemicals in the brain.

You may choose to start with one of these options and then move to another, depending how well you respond. Or you may decide to use a combination of these treatment options from the start. Your choices may depend on the severity of your depression and how your thoughts and feelings, family, relationship, social or employment problems may be playing a part in making you feel depressed.

The types of decisions people with depression are making include:

- I've just been diagnosed with depression. Should I wait and see if the symptoms will go away on their own or should I try a treatment?
- I've been having treatment for my depression but the symptoms are not going away. Should I change the way I have this treatment or try a different treatment option?

A person's choice of treatment may change over time. This decision aid aims to help people make the right choice now, and if they decide to change their mind later on.



## What are my options?

|                               | Watchful waiting  | Lifestyle changes and self-help interventions  | Psychological therapies delivered by Healthcare Professionals  | Medication   |
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| <b>What is the treatment?</b> | Waiting to see if symptoms get better or worse on their own, without lifestyle changes and self-help interventions, psychological therapies delivered by healthcare professionals or medication. It usually happens with support from a person's GP to discuss how they are getting on. | Ways of managing depression yourself, including using a self-help manual or 'talking therapy' programme via the internet, joining a support group, changing dietary, drinking and/or exercise habits, and using complementary therapies, such as herbal remedies or acupuncture. | Seeing a healthcare professional for sessions of a talking therapy. This can be tailored to whether a person wants to talk about how they think and feel (counselling or cognitive behavioural therapy, CBT), their relationships (interpersonal psychotherapy, IPT), or painful things that have happened in the past (psychodynamic therapy). A healthcare professional may be a doctor, nurse, psychologist, counsellor or therapist. | Antidepressant drugs, such as selective serotonin reuptake inhibitors (SSRI), which are designed to correct an imbalance of certain chemicals in the brain which may happen in people with depression. |

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| <b>What is the effect on how depressed a person feels</b> | Talking to a GP every few weeks about the things that are depressing may help a person work out some solutions to the problems that are making them depressed so that they feel better and avoid the need for treatment. [12] | <p>Reading about depression in leaflets or on websites, or joining a self-help group can help to improve symptoms of depression and make people feel better [13].</p> <p>Getting a better understanding of how the way a person thinks affects the way they feel, by using an online, self-help depression programme, such as Beating the Blues, can reduce symptoms [14].</p> <p>Lifestyle changes, such as taking regular exercise, losing weight if a person is overweight, reducing alcohol intake if a person drinks</p> | <p>Talking therapies may improve symptoms of depression and make people feel better. The different types of commonly used talking therapies are equally effective [18].</p> <p>In a group of people with depression, <b>41 in 100</b> of those who had an average six sessions of talking therapies, mainly focused on cognitive behavioural therapy (CBT), in a well organised programme, with a trained therapist recovered from their depression within a year.</p> <p>Another <b>15 in 100</b> people on</p> | <p>Taking antidepressant medicines may improve symptoms of depression and make people feel better. They are more effective in people with severe depression than in those with mild to moderate depression [20].</p> <p>In a group of people with all levels of depression, <b>51 in 100</b> of those who took antidepressants got a reduction in their symptoms, compared to about <b>38 in 100</b> who took a dummy pill (placebo) [21].</p> |

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|  |  | <p>excessively, and stopping use of substances such as cannabis may improve depression [15]. [16] [17] Using St John's Wort may reduce your symptoms of depression. We don't know if other types of self-help treatment can improve depression.</p> | <p>the same programme got a worthwhile improvement in their symptoms. [19].</p> |  |
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|   | Watchful waiting   | Lifestyle changes and self-help interventions  | Psychological therapies delivered by Healthcare Professionals   | Medication  |
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| <p><b>What is the effect of adding another therapy on how depressed a person feels?</b></p> | <p>Adding a treatment to watchful waiting would mean that it was no longer watchful waiting.</p> <p>See other treatment options for effects of switching to lifestyle changes and self-help interventions, psychological</p> | <p>Using self-help CBT and making lifestyle changes, such as taking regular exercise, may be more effective than either of these treatments on their own.</p> <p>All-round lifestyle change – healthier eating and taking more</p> | <p>Taking antidepressant medicines as well as having talking therapy may be more effective in reducing symptoms of depression than having talking therapy on its own [18], especially if a person has moderate rather than mild depression or</p> | <p>Having talking therapy as well as antidepressant treatment may be more effective in reducing symptoms of depression than taking an antidepressant on its own [18] especially if you have moderate rather than mild depression or your symptoms</p> |

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|  | therapies delivered by healthcare professionals, or medication. | exercise – is a little more effective than any individual change on its own [22]. | symptoms have not got better with talking therapies alone. | have not got better with talking therapies alone. |
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| <b>How long does it take to get better?</b> | Symptoms should improve within six to eight weeks. If a person isn't feeling any better they and their GP may agree that treatment should start, such as a course of talking therapy and/or antidepressant drugs. | <p>For most types of self-help treatment, an improvement in symptoms should happen within a few weeks. For self-help CBT, a person should feel much better by the end of the 8-10 week course of treatment.</p> <p>If a person exercises regularly (three times a week for 45- 60 minutes), symptoms should have improved after 8-12 weeks.</p> <p>If symptoms have not improved after</p> | Symptoms should improve within a few weeks of starting treatment, though the full effects may not be clear until the 12-16 week course of treatment has finished. | Symptoms should improve within two to four weeks of starting treatment [24]. |

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|  |  | taking St John's Wort for up to six weeks, it is advisable to see a GP [23]. |  |  |
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| <b>What is the time spent having treatment?</b> | <p>A person will probably have an appointment with their GP every two weeks. How long they spend talking at each appointment will depend on what they have agreed with their GP.</p> <p>Watchful waiting may continue until symptoms are better or it becomes clear that a person needs treatment, such as having a course of talking therapy and/or antidepressant medication.</p> | <p>This will vary depending on what type of self-help treatment someone is using. With self-help CBT, it will take about an hour a week for 8-10 weeks to do the online exercises, and some more time for further reading and possibly discussions with the GP or trained therapist if they are providing support.</p> <p>If someone exercises in a group, they will probably have three sessions a week, for 45-60 minutes, for</p> | <p>A course of one-to-one CBT usually consists of 16-20 sessions, each lasting 50-60 minutes, over a period of three to four months. A course of group therapy has slightly fewer sessions (10-12) over a similar period of time. Someone with moderate depression rather than mild depression may have two sessions per week for the first two to three weeks of treatment. [24].</p> <p>A person may be asked to do further reading and practical</p> | <p>When someone starts antidepressant treatment, their GP will ask to see them after two weeks to see how they are getting on. After that, they may see their GP every two to four weeks in the first three months. If they respond well to treatment, they may see their GP at longer intervals for the rest of their treatment.</p> <p>Specialists recommend to continue taking antidepressants for at least six months after a person recovers as this reduces</p> |

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|  |  | <p>about 12 weeks. [24]. In one group of people with depression, exercising like this for eight weeks improved their symptoms [24].</p> <p>If depression improves with St John's Wort, it is advisable to continue treatment for at least six months to maintain the effect [25].</p> | <p>exercises on their own, between sessions.</p> <p>When a person has completed a course of talking therapy, they may have a further three to four sessions to see if they are continuing to feel better over the following three to six months [24].</p> <p>Counselling usually consists of six to 10 sessions, each lasting about 50-60 minutes over eight to 12 weeks.</p> | <p>the likelihood that depression could come back. [24]</p> |
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| <b>How likely is the treatment to cause unwanted effects?</b> | Watchful waiting is unlikely to cause any unwanted effects in people with mild to | <p>Most self-help treatments don't have side effects.</p> <p>Reading inaccurate information</p> | <p>Most talking therapies don't have unwanted effects.</p> <p>At first, a person may find it difficult to talk</p> | All types of antidepressants cause side effects. They are usually mild and many of them wear off after a few |

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|  | <p>moderate depression.</p> <p>If it is used by people with more severe depression who need depression medication or talking therapies, it may delay them getting effective treatment.</p> | <p>about depression, in leaflets or on websites, may worry a person unnecessarily.</p> <p>Making lifestyle changes, such as losing weight and exercise, without checking that the methods are safe could lead to physical health problems and injuries.</p> <p>Using any complementary therapies, such as herbal remedies and acupuncture, without checking what is in them, or that the person giving them is fully trained could also result in physical health problems and injuries.</p> <p>St John's Wort (<i>Hypericum perforatum</i>) may cause allergic skin reactions,</p> | <p>about their feelings and the problems that may be making them depressed. This may get easier as they get to know their therapist.</p> <p>A person may not find it easy to make changes to the way they think and feel. A therapist is trained to give support as a person makes changes that can improve their symptoms of depression.</p> | <p>weeks and the body gets used to them [27].</p> <p>SSRIs tend to have fewer side effects than tricyclics, and they are not so dangerous if people take too many of them [27].</p> <p>Antidepressants are not addictive like tranquillisers, alcohol and nicotine.</p> <p>People don't need to keep increasing the dose to get the same effect, or get cravings if they stop taking them. People may have withdrawal effects when they stop taking them [27].</p> |
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|  |  | <p>stomach upset, nerve pain and make people sensitive to sunlight so they get sunburned, especially if they are fair skinned. It also interacts with many commonly used medicines. [26].</p> |  |  |
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## What are the pros and cons of each option?

People with depression have different experiences about the health problem and views on treatment. Choosing the treatment option or combination of treatment options that are best for the patient means considering how the consequences of each treatment option will affect their life.

Here are some questions people may want to consider about treatment for depression:

- Am I feeling depressed nearly every day and getting little pleasure from things I used to enjoy?
- As my depression affecting my ability to work, care for my family and/or socialise with friends?
- Do I want treatment that will help me feel better quickly?
- Do I want someone to listen to me and help me to make sense of my depression?
- How do I feel about treatment that will take up a lot of my time?
- How do I feel about the side effects of some treatments?
- Which treatments would help to prevent of my depression from coming back?

## How do I get support to help me make a decision that is right for me?

People using this type of information say they understand the health problem and treatment choices more clearly, and why one treatment is better for them than another. They also say they can talk more confidently about their reasons for liking or not liking an option with health professionals, friends and family.

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