

Evidence Update

Mental Health Series

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Which drug should be used for treating mild to moderate chronic depression?

It is not known which are the safest and most effective drugs for treating mild to moderate chronic depression.

Inclusion criteria

Studies:

Randomized and quasi-randomized controlled trials.

Participants:

People with a primary diagnosis of dysthymia (mild to moderate depression lasting two years or more), or with an alternative non-major depression diagnosis where the illness was of at least two years' duration.

Intervention:

Drugs used for treating depression.

Outcomes:

Improvement in symptoms; resolution of symptoms; treatment acceptability (number of drop outs and exclusions post-randomization); side effects; relapse; quality of life.

Results

- Fourteen trials with a total of 1659 participants were included; allocation was adequately concealed in three trials.
- Trials examining the effectiveness of different antidepressants in head-to-head comparisons were limited; there is insufficient evidence to decide which drugs are most effective for improving or resolving the symptoms of mild depression.
- Although some small trials examined side effects and acceptability of treatment, these were also limited and there is insufficient evidence to clearly identify differences between drug classes.

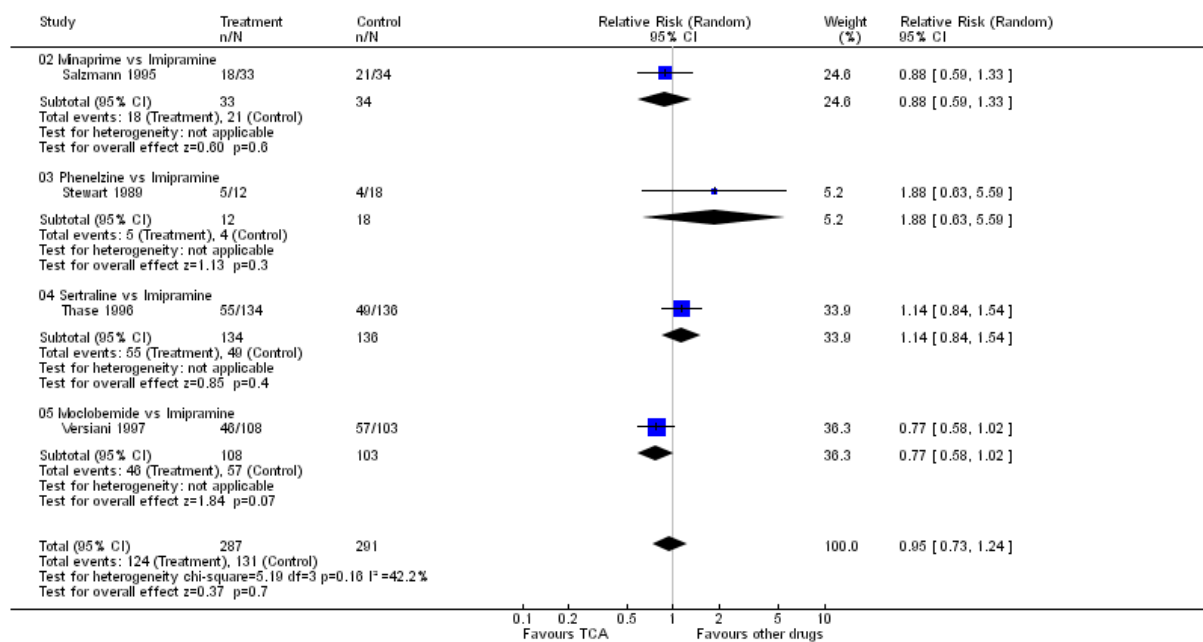


DFID Department for International Development

Adapted from Lima MS, Hotopf M. Pharmacotherapy for dysthymia. *Cochrane Database of Systematic Reviews* 2003, Issue 3. Art. No.: CD004047. DOI: 10.1002/14651858. CD004047.

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Non-response to treatment: tricyclic antidepressant (TCA) versus other antidepressants



Authors' conclusions

Implications for practice:

Trials comparing different antidepressant drugs were too small to detect clinically important differences in treating dysthymia.

Implications for research:

Well-designed trials that examine the comparative effectiveness and safety of drugs for dysthymia are needed.