

# Depression in adults



GP Guide

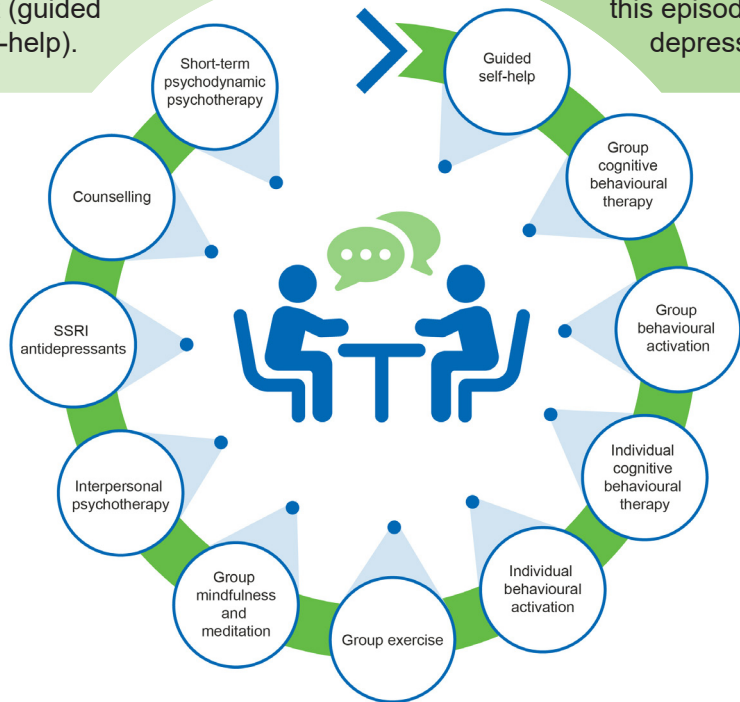


# Depression in adults: discussing first-line treatments for less severe depression

Less severe depression encompasses subthreshold and mild depression, and in this guideline was defined as depression scoring less than 16 on the PHQ-9 scale.

Discuss treatment options and match the choice of treatment to clinical needs and preferences, taking into account that any option can be used as first line, but consider the least intrusive and least resource intensive treatment first (guided self-help).

If the person has a clear preference, or experience from previous treatment to use as a guide: support the person's choice, unless there are concerns about suitability for this episode of depression.



Do not routinely offer antidepressants as a first-line treatment, unless that is the person's preference.

Treatment options are listed in order of recommended use, based on the NICE guideline committee's interpretation of their clinical and cost effectiveness and consideration of implementation factors.

# Treatment options for less severe depression

## • Guided self-help

### How is this delivered?

Printed or digital materials that follow the principles of guided self-help including structured cognitive behavioural therapy (CBT), structured behavioural activation (BA), problem-solving or psychoeducation materials. These can be delivered in person, by telephone, or online.

Support from a trained practitioner who facilitates the self-help intervention, encourages completion and reviews progress and outcomes.

### Key features

Focuses on how thoughts, beliefs, attitudes, feelings and behaviour interact, and teaches coping skills to deal with things in life differently.

### Other things to think about

May suit people who do not like talking about their depression in a group.

Needs self-motivation and willingness to work alone (although regular support is provided).

Need to consider access, and ability to engage with computer programme for digital formats.

Less capacity for individual adaptations than individual psychological treatments.



## • Group cognitive behavioural therapy (CBT)

### How is this delivered?

A group intervention delivered by 2 practitioners, at least 1 of whom has therapy-specific training and competence.

### Key features

Focuses on how thoughts, beliefs, attitudes, feelings and behaviour interact, and teaches coping skills to deal with things in life differently.

### Other things to think about

May be helpful for people who can recognise negative thoughts or unhelpful patterns of behaviour they wish to change.

May allow peer support from others who may be having similar experiences.

## • Group behavioural activation (BA)

### How is this delivered?

A group intervention delivered by 2 practitioners, at least 1 of whom has therapy-specific training and competence.

### Key features

Focuses on identifying the link between an individual's activities and their mood. Helps the person to recognise patterns and plan practical changes that reduce avoidance and focus on behaviours that are linked to improved mood.

Does not directly target thoughts and feelings.

### Other things to think about

May be helpful for people whose depression has led to social withdrawal, doing fewer things, inactivity, or has followed a change of circumstances or routine.

May allow peer support from others who may be having similar experiences.

## • Individual CBT

### How is this delivered?

Individual intervention delivered by a practitioner with therapy-specific training and competence.

### Key features

Focuses on how thoughts, beliefs, attitudes, feelings and behaviour interact, and teaches coping skills to deal with things in life differently.

### Other things to think about

May be helpful for people who can recognise negative thoughts or unhelpful patterns of behaviour they wish to change.

No opportunity to receive peer support from others who may be having similar experiences.

## • Individual BA

### How is this delivered?

Individual intervention delivered by a practitioner with therapy-specific training and competence.

### Key features

Focuses on identifying the link between an individual's activities and their mood. Helps the person to recognise patterns and plan practical changes that reduce avoidance and focus on behaviours that are linked to improved mood.

Does not directly target thoughts and feelings.

### Other things to think about

May be helpful for people whose depression has led to social withdrawal, doing fewer things, inactivity, or has followed a change of circumstances or routine.

No opportunity to receive peer support from others who may be having similar experiences.

## • Group exercise

### How is this delivered?

A group physical activity intervention provided by a trained practitioner.

Uses a physical activity programme specifically designed for people with depression.

### Key features

Includes moderate intensity aerobic exercise.

Does not directly target thoughts and feelings.

### Other things to think about

May allow peer support from others who may be having similar experiences.

May need to be adapted if the person has physical health problems that make it difficult to exercise.

May need to be adapted to accommodate psychological aspects, for example anxiety or shame which may act as barriers to engagement.



## • Group mindfulness and meditation

### How is this delivered?

A group intervention provided preferably by 2 practitioners, at least 1 of whom has therapy-specific training and competence.

Uses a programme such as mindfulness-based cognitive therapy specifically designed for people with depression.

### Key features

Focus is on concentrating on the present, observing and sitting with thoughts and feelings and bodily sensations, and breathing exercises.

Involves increasing awareness and recognition of thoughts and feelings, rather than on changing them.

Does not directly help with relationship, employment or other stressors that may contribute to depression.

### Other things to think about

May be helpful for people who want to develop a different perspective on negative thoughts, feelings or bodily sensations.

May be difficult for people experiencing intense or highly distressing thoughts, or who find focusing on the body difficult.

## • Interpersonal psychotherapy (IPT)

### How is this delivered?

Individual intervention delivered by a practitioner with therapy-specific training and competence.

### Key features

Focus is on identifying how interpersonal relationships or circumstances are related to feelings of depression, exploring emotions and changing interpersonal responses.

The goal is to change relationship patterns rather than directly targeting associated depressive thoughts.

### Other things to think about

May be helpful for people with depression associated with interpersonal difficulties, especially adjusting to transitions in relationships, loss, or changing interpersonal roles.

Needs a willingness to examine interpersonal relationships.

## • Selective serotonin reuptake inhibitors (SSRIs)

### How is this delivered?

A course of antidepressant medication.

### Key features

Modify neuronal transmission in the brain.

### Other things to think about

Minimal time commitment although regular reviews needed (especially when starting and stopping treatment).

There may be side effects from the medication, and some people may find it difficult to later stop antidepressant medication.



## • Counselling

### How is this delivered?

Individual intervention delivered by a practitioner with therapy-specific training and competence.

Uses an empirically validated protocol developed specifically for depression.

### Key features

Focus is on emotional processing and finding emotional meaning, to help people find their own solutions and develop coping mechanisms.

Provides empathic listening, facilitated emotional exploration and encouragement.

Collaborative use of emotion focused activities to increase self-awareness, to help people gain greater understanding of themselves, their relationships, and their responses to others, but not specific advice to change behaviour.

### Other things to think about

May be useful for people with psychosocial, relationship or employment problems contributing to their depression.

May suit people who do not like talking about their depression in a group.



## • Short-term psychodynamic psychotherapy (STPP)

### How is this delivered?

Individual sessions delivered by a practitioner with therapy-specific training and competence.

Uses an empirically validated protocol developed specifically for depression.

### Key features

Focus is on recognising difficult feelings in significant relationships and stressful situations and identifying how patterns can be repeated.

Both insight-oriented and affect focused.

Relationship between therapist and person with depression is included as a focus to help support working through key current conflicts.

### Other things to think about

May be useful for people with emotional and developmental difficulties in relationships contributing to their depression.

May be less suitable for people who do not want to focus on their own feelings, or who do not wish or feel ready to discuss any close and/or family relationships.

May suit people who do not like talking about their depression in a group.

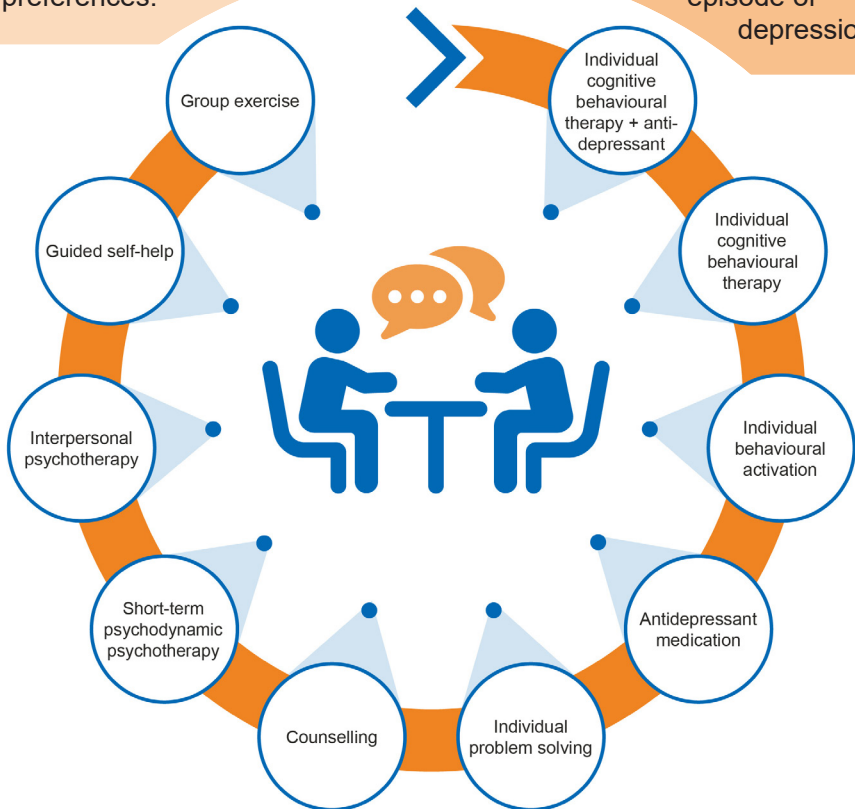
Focusing on painful experiences in close and/or family relationships could initially be distressing.

# Depression in adults: discussing first-line treatments for more severe depression

More severe depression encompasses moderate and severe depression, and in this guideline was defined as depression scoring 16 or more on the PHQ-9 scale.

Discuss treatment options with people who have a new episode of more severe depression. Match their choice of treatment to their clinical needs and preferences.

If the person has a clear preference, or experience from previous treatment to use as a guide: support the person's choice, unless there are concerns about suitability for this episode of depression.



Treatment options are listed in order of recommended use, based on the committee's interpretation of their clinical and cost effectiveness and consideration of implementation factors.

- **Combination of individual cognitive behavioural therapy (CBT) and an antidepressant**

### How is this delivered?

A combination of individual CBT and a course of antidepressant medication.

### Key features

Combines the benefits of regular CBT sessions with a therapist and medication.

### Other things to think about

Sessions with a therapist provide immediate support while the medication takes time to work or medication can be started immediately, and then CBT started as soon as possible afterwards to obtain combined effects.

There may be side effects from the medication, and some people may find it difficult to later stop antidepressant medication.



## • Individual CBT

### How is this delivered?

Individual intervention delivered by a practitioner with therapy-specific training and competence.

### Key features

Focuses on how thoughts, beliefs, attitudes, feelings and behaviour interact, and teaches coping skills to deal with things in life differently.

### Other things to think about

May be helpful for people who can recognise negative thoughts or unhelpful patterns of behaviour they wish to change.

## • Individual behavioural activation (BA)

### How is this delivered?

Individual intervention delivered by a practitioner with therapy-specific training and competence.

### Key features

Focuses on identifying the link between an individual's activities and their mood. Helps the person to recognise patterns and plan practical changes that reduce avoidance and focus on behaviours that are linked to improved mood.

### Other things to think about

May be helpful for people whose depression has led to social withdrawal, doing fewer things, inactivity, or has followed a change of circumstances or routine.

May suit people who do not like talking about their depression in a group.

## • Antidepressant medication

### How is this delivered?

Can be a selective serotonin reuptake inhibitor (SSRI), serotonin–norepinephrine reuptake inhibitor (SNRI), or other antidepressant if indicated based on previous clinical and treatment history.

### Key features

SSRIs are generally well tolerated, have a good safety profile and should be considered as the first choice for most people.

Tricyclic antidepressant (TCAs) are dangerous in overdose, although lofepramine has the best safety profile.

### Other things to think about

Choice of treatment will depend on preference for specific medication effects such as sedation, concomitant illnesses or medications, suicide risk and previous history of response to antidepressant medicines.

Minimal time commitment, although regular reviews needed (especially when starting and stopping treatment).

There may be side effects from the medication, and some people may find it difficult to later stop antidepressant medication.

## • Individual problem-solving

### How is this delivered?

Individual sessions delivered by a practitioner with therapy-specific training and competence.

### Key features

Focus is on identifying problems, generating alternative solutions, selecting the best option, developing a plan and evaluating whether it has helped solve the problem.

### Other things to think about

May be helpful for people who want to tackle current difficulties and improve future experiences.

## • Counselling

### How is this delivered?

Individual sessions delivered by a practitioner with therapy-specific training and competence.

Uses an empirically validated protocol developed specifically for depression.

### Key features

Focus is on emotional processing and finding emotional meaning, to help people find their own solutions and develop coping mechanisms.

### Other things to think about

May be useful for people with psychosocial, relationship or employment problems contributing to their depression.

## • Short-term psychodynamic psychotherapy (STPP)

### How is this delivered?

Individual sessions delivered by a practitioner with therapy-specific training and competence.

Uses an empirically validated protocol developed specifically for depression.

### Key features

Focus is on recognising difficult feelings in significant relationships and stressful situations, and identifying how patterns can be repeated.

Relationship between therapist and person with depression is included as a focus to help support working through key current conflicts.

### Other things to think about

May be useful for people with emotional and developmental difficulties in relationships contributing to their depression.

May be less suitable for people who do not want to focus on their own feelings, or who do not wish or feel ready to discuss any close and/or family relationships.

Focusing on painful experiences in close and/or family relationships could initially be distressing.

## • Interpersonal psychotherapy (IPT)

### How is this delivered?

Individual sessions delivered by a practitioner with therapy-specific training and competence.

### Key features

Focus is on identifying how interpersonal relationships or circumstances are related to feelings of depression, exploring emotions and changing interpersonal responses.

The goal is to change relationship patterns rather than directly targeting associated depressive thoughts.

### Other things to think about

May be helpful for people with depression associated with interpersonal difficulties, especially adjusting to transitions in relationships, loss, or changing interpersonal roles.

May suit people who do not like talking about their depression in a group.

Needs a willingness to examine interpersonal relationships.

## • Guided self-help

### How is this delivered?

Printed or digital materials that follow the principles of guided self-help including structured CBT, structured BA, problem-solving or psychoeducation materials. These can be delivered in person, by telephone, or online.

Support from a trained practitioner who facilitates the self-help intervention, encourages completion and reviews progress and outcome

### Key features

Focuses on how thoughts, beliefs, attitudes, feelings and behaviour interact, and teaches coping skills to deal with things in life differently.



## Other things to think about

In more severe depression, the potential advantages of providing other treatment choices with more therapist contact should be carefully considered first.

Needs self-motivation and willingness to work alone (although regular support is provided).

Need to consider access, and ability to engage with computer programme for digital formats.

Less capacity for individual adaptations than individual psychological treatments.

## • Group exercise

### How is this delivered?

A group physical activity intervention provided by a trained practitioner.

Uses a physical activity programme specifically designed for people with depression.

### Key features

Includes moderate intensity aerobic exercise.

Does not directly target thoughts and feelings.

### Other things to think about

May allow peer support from others who are may be having similar experiences.

May need to be adapted if the person has physical health problems that prevent exercise.

May need to be adapted to accommodate psychological aspects, for example anxiety or shame which may act as barriers to engagement.

## Local Resources

### Individual guided self-help (CBT based)

#### **New Leaf Recovery and Wellbeing College**

Free courses about mental health, wellbeing and recovery.

Website: [www.newleafcollege.co.uk](http://www.newleafcollege.co.uk)

#### **Hertfordshire Talking Therapies:**

Psychological therapies and wellbeing service provide the following:

- guided self help
- behavioural activation groups.
- Interactive webinars

Website: [www.hpft-iapt.nhs.uk](http://www.hpft-iapt.nhs.uk)

#### **Other guided self-help resources:**

Hertfordshire Partnership University NHS Foundation Trust - Self Help

Guides: [www.selfhelpguides.ntw.nhs.uk/hertfordshire](http://www.selfhelpguides.ntw.nhs.uk/hertfordshire)

#### **Action for Happiness:**

Website: [www.actionforhappiness.org](http://www.actionforhappiness.org)

## Counselling services

#### **Mind In Mid Herts (Self-referral)**

Website: [www.mindinmidherts.org.uk](http://www.mindinmidherts.org.uk)

#### **Herts Mind Network (Self-referral)**

Website: [www.hertsmindnetwork.org](http://www.hertsmindnetwork.org)

## Structured group physical activity programme

### Little Hadham Village Hall Trust

Weekly support groups.

Website: [www.littlehadhamvillagehall.com](http://www.littlehadhamvillagehall.com)

### U3A Bishop Stortford

Weekly/monthly support groups

Website: [www.u3asites.org.uk/bishops-stortford/groups](http://www.u3asites.org.uk/bishops-stortford/groups)

### Active East Herts

Sports activity groups

Website: [www.activeeastherts.org.uk](http://www.activeeastherts.org.uk)

## Social prescribers

### Hertfordshire Directory

Find wellbeing support groups and services in your local area.

Website: [directory.hertfordshire.gov.uk/Search?CategoryId=13&SM=ServiceSearch](http://directory.hertfordshire.gov.uk/Search?CategoryId=13&SM=ServiceSearch)

### Frontline

Access to local resources including wellbeing support.

Website: [eastherts.hertsfrontline.org.uk](http://eastherts.hertsfrontline.org.uk)

### Herts Help

Find support and advice services in your local area.

Website: [www.hertshelp.net/hertshelp.aspx](http://www.hertshelp.net/hertshelp.aspx)

### Healthy Hub

Find free health and wellbeing support in your local area.

Website: [www.healthyhubs.org.uk/home.aspx](http://www.healthyhubs.org.uk/home.aspx)

### Mental health support for adults in Hertfordshire

Hertfordshire and West Essex NHS ICB- Different support services available. Website: [hertsandwestessex.icb.nhs.uk](http://hertsandwestessex.icb.nhs.uk)

To access our self-help book  
about depression and low mood  
please scan this QR code



Herts Mental Health,  
Learning Disability and  
Autism Health and Care  
Partnership

For additional mental health  
resources for adults in Hertfordshire  
who might find they need advice,  
support, help or immediate access  
to care, please scan the QR code.



Hertfordshire Partnership University NHS Foundation Trust  
works toward eliminating all forms of discrimination and  
promoting equality of opportunity for all.

We are a smoke free Trust therefore smoking is not  
permitted anywhere on our premises.

[www.hpft.nhs.uk](http://www.hpft.nhs.uk)

June 2023