

The NICE Depression Guidelines – Depression Update and Depression in Adults with a Chronic Physical Health Problem

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NICE Depression Update

- NICE Depression Guideline
 - originally published in 2004 (revised 2007)
- NICE Depression Guideline Update
 - published 28th October 2009
- Depression in Adults with a Chronic Physical Health Problem
 - published 28th October 2009
- What's new in terms of nature of the disorder, range of treatment and organisation of services

NICE Depression Update

- Feedback on 2004 Guideline (and the CCBT TA)
 - classification of depression
 - symptom count and severity
 - psychological therapies
 - access to and choice
 - use of medication
 - venlafaxine
 - sequencing of anti-depressants
 - CCBT recommendation
 - too restrictive

NICE Depression Update

- What was missing from the 2004 Guideline
 - classification of depression
 - sub-threshold symptoms - dysthymia
 - management of depression in people with chronic physical health problems
 - choice of treatment
 - drug interactions
 - integration with TAs
 - CCBT
 - ECT

NICE Depression Update

- Classification of depression
 - DSM-IV based (i.e. 5 out of 9 symptoms for diagnosis not 4 out of 10 as in ICD-10)
 - Severity
 - **Subthreshold depressive symptoms:** Fewer than 5 symptoms of depression
 - **Mild depression:** Few, if any, symptoms in excess of the 5 required to make the diagnosis and symptoms result in only minor functional impairment
 - **Moderate depression:** Symptoms or functional impairment are between 'mild' and 'severe'
 - **Severe depression:** Most symptoms and the symptoms markedly interfere with functioning. Can occur with or without psychotic symptoms.

NICE Depression Update

- Classification of depression – implications
 - Shifts threshold for treatment
 - use of antidepressants in mild depression still limited
 - use of combination treatment in moderate depression
 - even less to say about severe depression
 - dropped term dysthymia preferring persistent symptoms
 - Moves away from a symptom count (danger with PHQ-9, BDI and HADS) and increases threshold

Guideline update	Not depressed	Subthreshold	Mild to Moderate	Moderate to Severe
APA 2000	Not depressed	Mild	Moderate	Severe
BDI Scores (cut off 14)	0-9	10-16	17-29	30+
PHQ-9 Scores (cut off 10)	0-4	5-9	10-19	20+

NICE Depression Update

- Treatment – low intensity psychosocial interventions
 - active monitoring
 - not watchful waiting
 - increased range of interventions
 - peer support in DCHP
 - but not medication management on its own
 - update of TA offer options beyond Beating the Blues
 - specification of means of delivery
 - exercise is group based
 - duration of interventions

NICE Depression Update

- Treatment – high intensity psychological interventions
 - increased choice
 - group CBT (both Dep Up and DCHP)
 - behavioural activation
 - behavioural couples therapy
 - limited use
 - counselling and short-term psychodynamic psychotherapy
 - focus on effective delivery
 - duration (16-20 sessions) and 2 sessions per week^{1st} 2 to 3 weeks
 - use in relapse prevention

NICE Depression Update

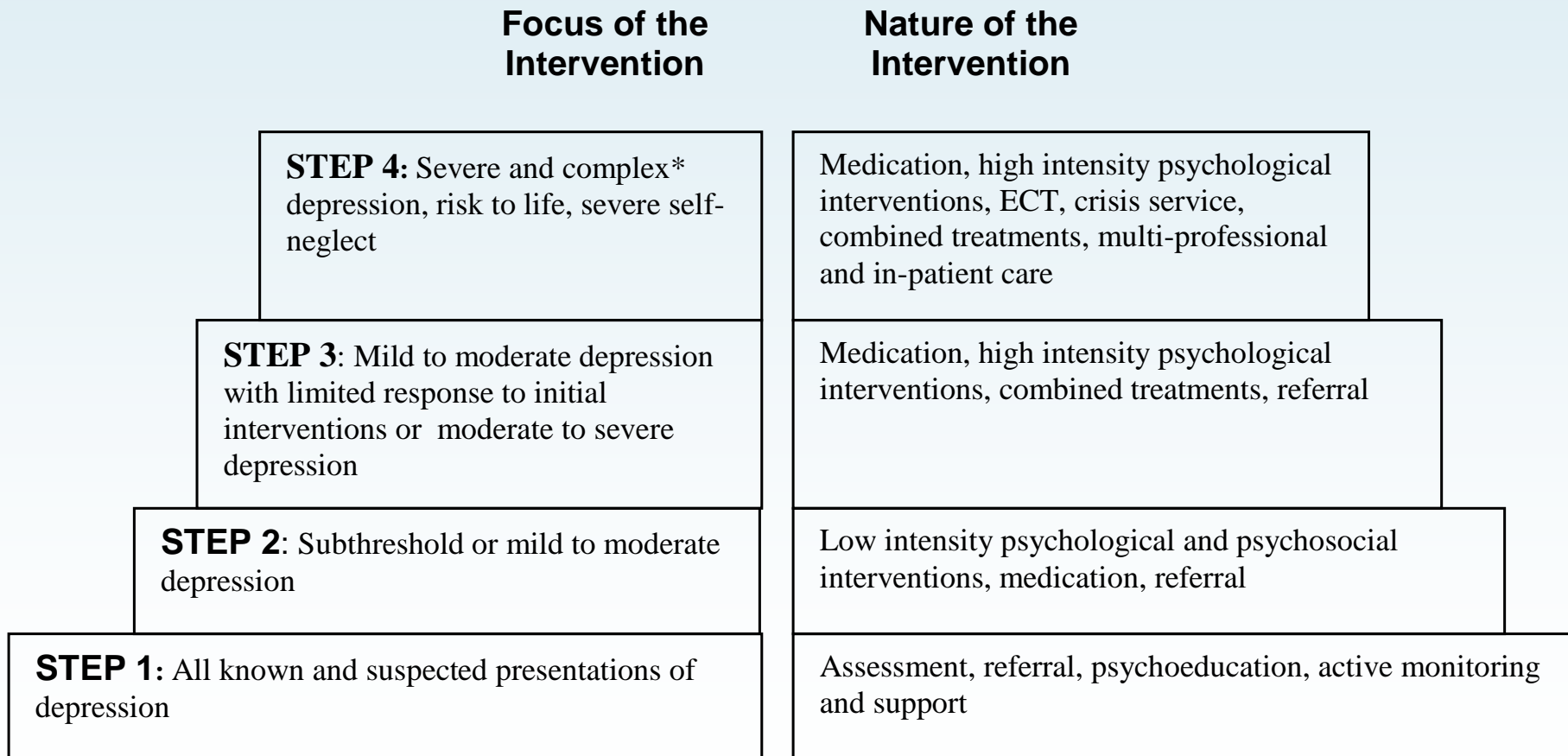
- Treatment – pharmacological interventions
 - SSRIs remain mainstay
 - side effects and interactions (especially in DCHP) major concern
 - expect improvement by 2 to 4 weeks
 - sequencing of treatment data on class switches weak (STAR*D)
 - data on sub-types also weak
 - consider increased dose or increased monitoring and review
 - for those at risk of relapse continue medication to 2 years
 - Consider combination treatment (ADs and CBT) of moderate and severe depression

NICE Depression Update

- Organisation of care
 - Stepped care model
 - Simplified model focused on primary care
 - Central role of LI interventions and staff
 - initial assessments
 - delivery of interventions
 - IAPT Programme - begins to address access issue
 - Collaborative care - in DCHP only
 - Delivering better care
 - routine outcome monitoring (sessional at least in psych therapies)
 - direct observation - audio tapes
 - appropriate supervision

Stepped care

The stepped care model for depression – NICE 2009



* Complex includes depression with a poor response to multiple treatments, complicated by psychosis, and/or significant psychiatric comorbidity or psychosocial factors

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