Treatments for depression

What the fact sheet covers:
- Types of treatments for depression
- Physical treatments
- Psychological treatments
- Self-help and alternative therapies
- Where to get more information.

Types of treatments for depression

Several different treatments are available for depression and research continues to find new ones. This research means that the evidence for how well a treatment works is always changing too. This Fact Sheet provides a summary of available treatments for depression.

There can be different types of depression, and this can guide which treatment/s are selected. Depressions that are more biological in their origins (melancholic depression and psychotic depression) are more likely to need physical treatments (antidepressants) and may not be resolved with psychological treatments alone. Non-melancholic depression which is linked to psychological factors, personality characteristics and stressful life events, responds to both psychological treatments and physical treatments.

See our fact sheet on Types of Depression for more information.

Physical treatments

The main physical treatments for depression comprise drug treatments and Electroconvulsive therapy (ECT).

1. Medications

There are three groups of drugs most likely to be used for depression:
- Tranquillisers
- Antidepressants
- Mood stabilisers.

Tranquilisers

These medications are divided into ‘minor’ and ‘major’ tranquillisers. Minor tranquillisers (typically benzodiazepines) are usually not used in treating depression as they are addictive. Major tranquillisers are used to treat psychotic or melancholic depression to control psychotic symptoms.
Antidepressants

There are a large number of antidepressants – they have a role in many types of depression and vary in their effectiveness across the more biological depressive conditions.

Selective Serotonin Reuptake Inhibitors (SSRIs), Tricyclics (TCAs) and Irreversible Monoamine Oxidase Inhibitors (MAOIs) are three common classes of antidepressants, with the latter two having ‘broader’ actions (i.e. influencing more neurotransmitter pathways).

Health providers should be able to assess the type of depression, its likely causes and identify the best type of medication. It is also important to be aware that not all depressions require medication and will respond to psychological interventions alone. Furthermore, the use of medication in children and adolescents is generally not recommended as a first-line treatment option.

Mood stabilisers

These drugs are of great importance in bipolar disorder. Their use in treating mania makes them ‘anti–manic’, while their ability to reduce the severity and frequency of mood swings makes them ‘mood stabilisers’. Lithium carbonate, sodium valproate and carbamazepine are the most commonly used mood stabilisers. It is important to remember that people sometimes need to continue taking medication for some time after they are better to reduce the chance of a future relapse.

2. Electroconvulsive Therapy (ECT)

Because of its controversial past many people feel the need to think carefully before having ECT or allowing it to be given to relatives. ECT can have an important role in treatment, particularly in:

- Psychotic depression
- Severe melancholic depression where there is a high risk of suicide or the patient is too ill to eat, drink or take medications
- Life–threatening mania
- Severe post–natal depression.

While there are some short–term side effects, ECT is a relatively safe procedure.

Psychological Treatments

There are a wide range of psychological treatments for depression. Some of these include:

- Cognitive behaviour therapy (CBT)
- Acceptance and commitment therapy (ACT)
- Interpersonal psychotherapy (IPT)
- Schema.

CBT, ACT, IPT, and Schema are just a few of psychological therapies that exist. Each person can resonate differently with a particular therapy so it is important to discuss with your clinician what options are available to see which could be the best fit.

1. Cognitive Behaviour Therapy (CBT)

People suffering from depression can have a negative view about themselves and the world around them. CBT helps people to understand how their thoughts and behaviours can impact on their mood. The “cognitive” side of CBT involves exploring how people think about things and adjusting unhelpful cognitions through cognitive restructuring. The “behaviour” side of CBT involves getting people moving and activated, often through activity scheduling. CBT is a therapy that has been around for decades and has strong evidence in treating a range of mental health concerns.

2. Acceptance and Commitment Therapy (ACT)

As the name suggests, ACT involves accepting experiences that are outside of our control, and committing to meaningful and valued action. ACT places emphasis on mindfulness as an intervention and encourages people to defuse from distressing thoughts or memories, accept and make room for difficult emotions, and maintain contact with our experience in the here and now (present moment).

3. Interpersonal Psychotherapy

Like CBT, IPT is well studied and strongly supported in the treatment of depression. It is an attachment based therapy that helps people overcome their symptoms of depression by addressing interpersonal relationships or
circumstances that are related to the persons depression. IPT also assists people to build on their support network often by improving the ways in which we ask for help.

4. Schema

In a nutshell schema focuses on meeting unmet childhood needs. It is based in some concepts from existing psychological therapies and theories (CBT, Psychoanalytic, Psychodrama, Gestalt, attachment) and focuses on meeting individuals core emotional needs. Schema also helps people to explore the reasons for why they may engage in problematic behaviours and how they may overcome these.

Self-help and alternative therapies

There are also a wide range of self-help measures and alternate therapies which can be useful for some types of depression, either alone or in conjunction with physical treatments (such as antidepressants) or psychological treatments. These therapies can be valuable adjuncts to physical or psychological treatments. Self-help and alternative therapies that may be useful for depression are:

- Meditation – see our fact sheet Quick relaxation techniques
- Relaxation and meditation techniques
- Good nutrition
- Alcohol and drug avoidance
- Exercise – see our fact sheet Exercise and depression
- Bibliotherapy
- Omega-3 – see our fact sheet Omega-3 and mood disorders
- St John’s Wort – see our fact sheet St John’s wort as a depression treatment

- Light therapy
- Yoga
- Acupuncture.

Where to get more information

myCompass – an online self-help program provided by the Black Dog Institute www.blackdoginstitute.org.au/resources-support/digital-tools-apps/mycompass/

MoodGYM program – an online cognitive behaviour therapy program www.moodgym.anu.edu.au

Beyond Blue – An Australian based organisation with great resources for depression www.beyondblue.org.au

Key points to remember

- Different types of depression respond best to different sorts of treatment.
- A thorough and thoughtful assessment needs to be carried out before any treatment is prescribed.
- Treatments for depression include physical therapies (e.g. medications) and psychological therapies.
- Depression can resolve of its own accord but, if left untreated, may last for many months.
- Depending on the nature of the depression, self-help and alternative therapies can also be helpful, either alone or in conjunction with physical and psychological treatments.