Not All Unipolar Depressions Necessarily Chronic

By Barbara Rutledge

Mendoza, Argentina — The use of antidepressants may not be effective for long-term treatment of unipolar depression, and may actually be harmful, Dr. Ulrik Malt reported at the 6th World Congress of Depressive Disorders.

“There are no good arguments for treating all unipolar depressions as a chronic disorder,” said Dr. Malt, professor of psychiatry at the University of Oslo. “There are no good reasons for long-term antidepressant treatment of all unipolar depressions.”

In the absence of drug treatment, about 70% of patients go into remission within 6 months after a major depressive episode, and they may remain in remission for several years, with no or clinically insignificant symptoms of depression.

Support for the use of antidepressant drugs for treating unipolar depression comes from clinical studies, but study results can be misleading. In many cases, according to Dr. Malt, the study population includes patients with other depressive disorders, rather than true unipolar depression, which he defined as a depressive episode without evidence of past hypomania or past symptoms of melancholia.

Published studies often include patients whose depression stems from bipolar spectrum disorders, which are neurobiologically distinct from unipolar depression.

Several studies have demonstrated that careful rediagnosis of patients given a diagnosis of major depressive disorder reveals a high incidence of patients with bipolar II disorder. These patients are more likely to respond to drug treatment than are patients with major depressive disorder.

Dr. Malt also questioned the data supporting long-term use of antidepressants for prevention of relapses, arguing that...