

Children of depressed parents at high risk of adverse consequences into adulthood

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The latest report from a 30-year study of families at high- and low-risk for depression reveals that the offspring of depressed parents have a higher risk for depression, morbidity and mortality that persists into



middle age. While major depression typically begins during adolescence in both high- and low-risk individuals, children with a family history are more likely to have recurrent episodes of depression and poor outcomes as they mature.

The findings were published in the American Journal of Psychiatry.

Previous reports from this longitudinal study were issued at the 10- and 20-year follow-up periods, when the offspring were adolescents or young adults. This latest analysis confirms that children of depressed parents continue to have a three-fold increase in the risk of <u>major depression</u> or anxiety. High-risk offspring with early-onset <u>depression</u> also had a higher risk of a recurrence after age 20. The low-risk group did not have an increased risk of recurrence.

The study began in 1982, and the last interviews were completed in 2015. There were six waves of interviews, at baseline and 2, 10, 20, 25, and 30 years. The current analysis included 263 biological children from 91 families who entered the study at wave 1 or 2 and were assessed at wave 5 or 6.

Although the high- and low-risk groups did not show differences in education, employment status, or income at the 30-year follow-up, those in the high-risk group were more likely to be separated or divorced and had fewer children. They also received more treatment over a longer period of time, received more continuous treatment for emotional problems, and had worse overall functioning than those in the low-risk group.

"These findings indicate that a simple <u>family history</u> of assessment of major depression can help identify individuals at long-term risk for depression," said Myrna Weissman, PhD, the Diane Goldman Kemper Family professor of epidemiology (in psychiatry) at Columbia



University Medical Center, chief of the division of epidemiology at New York State Psychiatric Institute, and one of the lead authors of the paper. "It has been shown that even highly efficacious prevention programs for previously depressed adolescents were less effective if the parent was depressed. Our previous work has shown that treatment of the depressed parent to remission can reduce the symptoms of depression for both parent and child."

Ongoing research with this cohort includes neuroimaging studies to better understand the biological underpinnings of depression. In the era of precision medicine, these studies are designed to bring the identification and treatment of depressed individuals to new levels of accuracy and effectiveness.

More information: Myrna M. Weissman et al, Offspring of Depressed Parents: 30 Years Later, *American Journal of Psychiatry* (2016). DOI: 10.1176/appi.ajp.2016.15101327

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