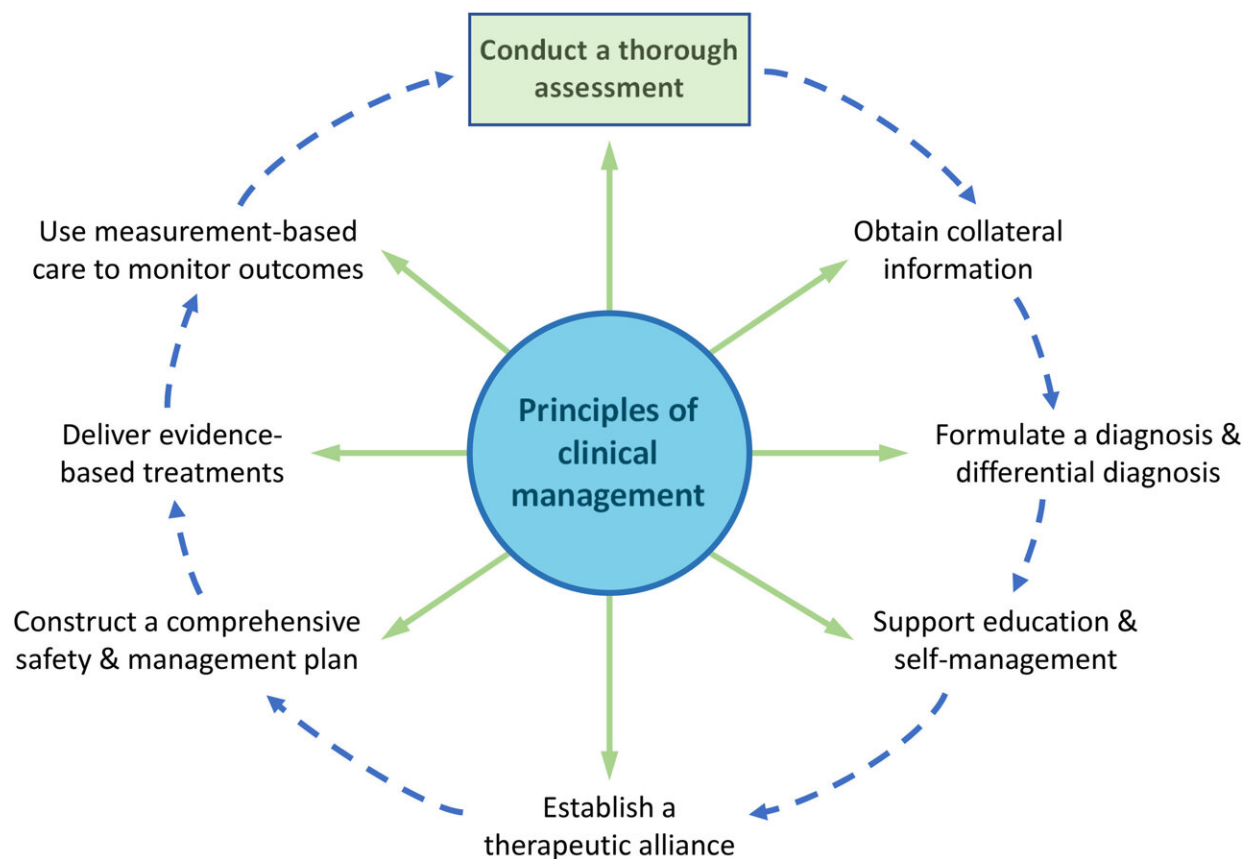


New guidelines for depression care emphasize patient-centered approach in Canada

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Principles of clinical assessment and management of major depressive disorder.
Credit: *The Canadian Journal of Psychiatry* (2024). DOI:
10.1177/07067437241245384

Psychiatrists and mental health professionals have a new standard for managing major depression, thanks to refreshed clinical guidelines published today by the Canadian Network for Mood and Anxiety Treatments (CANMAT).

The CANMAT guidelines are the most widely used [clinical guidelines](#) for depression in the world. The [new version](#) integrates the latest scientific evidence and advances in [depression care](#) since the previous guidelines were published in 2016. The update was led by researchers at the University of B.C. and the University of Toronto, alongside a national working group of more than 40 academic clinical experts and patient partners.

"These recommendations not only represent the evidence and broad consensus of leading experts in depression research and care, but, importantly, they also reflect the perspectives of patients with lived experience," says co-lead author Dr. Raymond Lam, professor of psychiatry at UBC and co-director of the Mood Disorders Centre at the Djavad Mowafaghian Centre for Brain Health.

"Our hope is that this update will empower clinicians with the latest recommendations that can help achieve better outcomes and improved quality of life for the millions of people affected by depression."

More than one in 10 Canadians will experience depression at some point in their lives, making it one of the largest public health burdens in Canada. However, it is estimated that only 20% of people receive adequate treatment.

The updated guidelines cover eight primary topic areas that map the patient care journey, from assessment and diagnosis through to the selection of treatments and strategies to prevent recurrence. The question-and-answer format is designed to be practical, accessible and easy for

clinicians to use.

To develop the refreshed guidelines, the working group conducted a comprehensive literature review of new scientific evidence published since the previous 2016 guidelines. Drafts were revised based on review by patient partners, expert peer review and a defined expert consensus process.

The resulting recommendations are organized by lines of treatment based on the level of evidence supporting each therapy and factors such as safety, tolerability and feasibility. Guidance is provided to aid health care professionals in choosing the right treatment option with an emphasis on collaborative decision-making.

"Depression is a complex and highly individualized condition," says Dr. Lam. "The guidelines highlight the importance of collaborating with patients in care decisions and providing a personalized treatment approach that carefully considers a person's needs, preferences and treatment history."

The guidelines underline the strong evidence base for well-established first-line treatments, including a number of medications, as well as psychological treatments such as [cognitive behavioral therapy](#), interpersonal therapy and behavioral activation. Based on recent evidence, a number of new psychological and pharmacological treatments were added to the list of treatment options.

"Notable additions to the new guidelines are a strong emphasis on patient participation in choosing treatment, applying outcome measures throughout care, and an overview of digital mental health tools in the management of depression," says co-lead author Dr. Sidney Kennedy, professor of psychiatry at the University of Toronto and director of the Centre for Depression and Suicide Studies at Unity Health Toronto.

The guidelines include further direction on how health care professionals can incorporate lifestyle interventions, such as exercise, nutrition and sleep hygiene. They also explore when neuromodulation treatments should be considered and what should be done when a patient doesn't respond to initial treatments or develops treatment-resistant depression.

"Many well-established psychological and behavioral interventions have accumulated more support for their efficacy across different delivery formats," says co-author Dr. Lena Quilty, associate professor of psychiatry at the University of Toronto and senior scientist at the Centre for Addiction and Mental Health.

"We are especially pleased to report on evidence for new interventions that target depression as well as commonly co-occurring challenges such as anxiety or disrupted cognitive processes. We hope that these additional alternatives provide more opportunities for integrated attention to these multi-faceted issues."

More information: Raymond W. Lam et al, Canadian Network for Mood and Anxiety Treatments (CANMAT) 2023 Update on Clinical Guidelines for Management of Major Depressive Disorder in Adults: Réseau canadien pour les traitements de l'humeur et de l'anxiété (CANMAT) 2023 : Mise à jour des lignes directrices cliniques pour la prise en charge du trouble dépressif majeur chez les adultes, *The Canadian Journal of Psychiatry* (2024). [DOI: 10.1177/07067437241245384](https://doi.org/10.1177/07067437241245384)

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