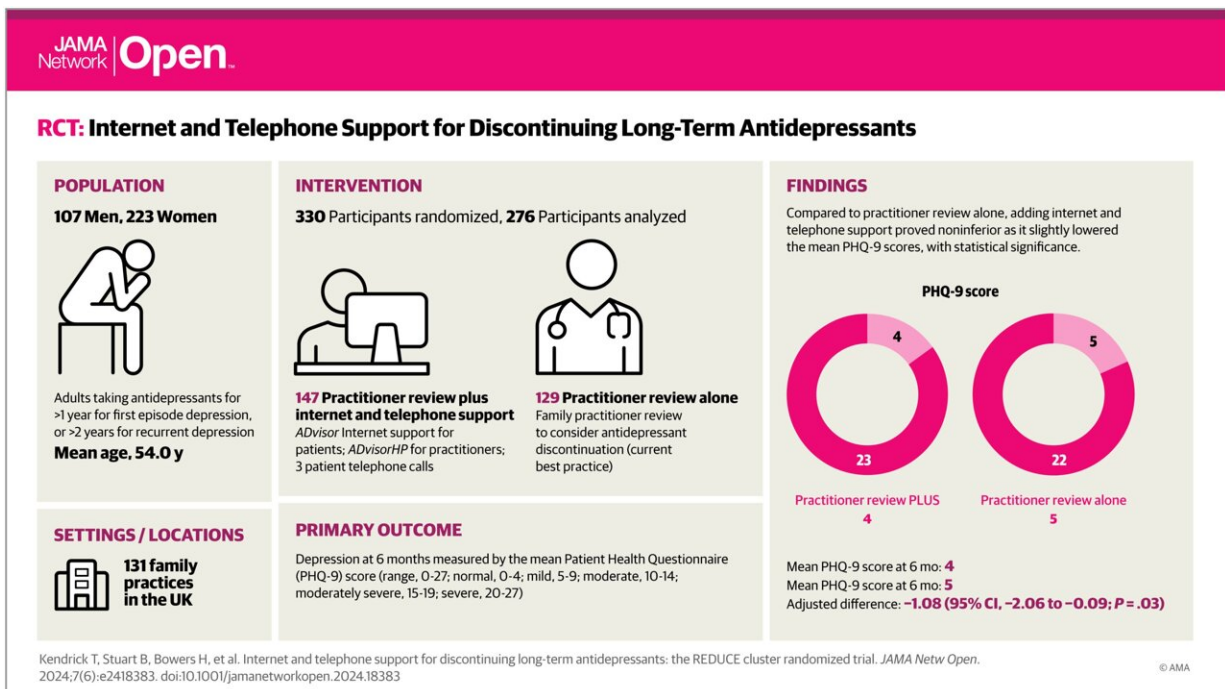


Study shows half of long-term antidepressant users can taper off drugs with simple support

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Internet and telephone support for discontinuing long-term antidepressants.
Credit: *JAMA Network Open* (2024). DOI:
10.1001/jamanetworkopen.2024.18383

Nearly half of long-term antidepressant users can quit the drugs with GP support and access to internet or telephone helplines alone, a study involving the University of Liverpool has revealed.

Scientists found that more than 40% of people who were well and not at risk of relapse managed to come off the medication with advice from their doctors. They also discovered patients who could access online support and psychologists by phone had lower rates of depression, fewer withdrawal symptoms, and reported better mental well-being.

The findings are [published](#) in the journal *JAMA Network Open*.

More than 10% of adults in the U.K. are taking antidepressants for depression with more than half using them for longer than two years, according to NHS figures.

Liverpool's Professor of General Practice Mark Gabbay is a co-author of the study which was led by the University of Southampton and also involved Hull York Medical School. Professor Tony Kendrick from Southampton was the lead author of the research.

He said the findings are significant as they show high numbers of patients withdrawing from the drugs do not need costly intense therapy sessions.

He added, "This approach could eliminate the risk of serious side-effects for patients using antidepressants for long periods who have concerns about withdrawal.

"Offering patients internet and psychologist telephone support is also cost-effective for the NHS.

"Our findings show that support not only improves patient outcomes but also tends to reduce the burden on [primary health care](#) while people taper off antidepressants."

The scientists behind the study enrolled 330 adults who have been taking

the medication for more than a year for a first episode of depression, or more than two years for a recurrence of the illness.

Co-author Una Macleod, Professor of Primary Care Medicine at Hull York Medical School, said, "Many patients are taking antidepressants for depression for longer than two years, when they probably no longer need them.

"The evidence in our study is clear and suggests the U.K. should establish a national helpline, by phone and online, to help people intending to come off the medication."

The new study is the latest in a seven-year research program, named REDUCE, led by the universities to investigate the long-term effects of withdrawing from antidepressants.

Professor of General Practice Mark Gabbay, a co-author from the University of Liverpool, said the research shows that many [patients](#) do not need intense face-to-face therapy sessions while withdrawing.

He added, "This is the first study to demonstrate that stopping inappropriate long-term antidepressant treatment is possible at scale without psychological therapy.

"Antidepressants are recommended only for up to two years in most cases, and people are running the risk of increasing side effects as they get older.

"From our findings, we are calling for active family practitioner reviews for antidepressant discontinuation to be promoted."

More information: Tony Kendrick et al, Internet and Telephone Support for Discontinuing Long-Term Antidepressants, *JAMA Network*

Open (2024). [DOI: 10.1001/jamanetworkopen.2024.18383](https://doi.org/10.1001/jamanetworkopen.2024.18383)

Provided by University of Liverpool

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