

DEPRESSION: NON-PHARMACOLOGICAL TREATMENT



Psychotherapy

Types of therapy:

- Cognitive behavioral therapy
- Interpersonal psychotherapy
- Family or couples therapy
- Supportive psychotherapy
- Psychoeducational intervention

There is no evidence that one form of therapy is better than another.

Early discontinuation is common. Nurses should follow up with clients, just as they would when starting a medication.



Exercise

- Aerobic exercise or resistance training
- 3–5x per week
- 45–60 minute sessions
- 50%–85% maximum heart rate
- For at least 10 weeks

Exercise as therapy should be used as an adjunct (conflicting studies on effectiveness).

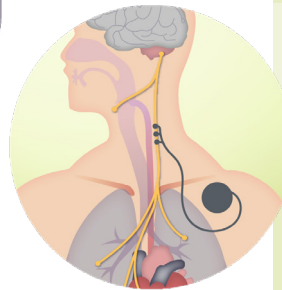
Exercise can improve other medical conditions beyond depression.

Electroconvulsive Therapy (ECT)

- Electrical current is used to induce a generalized seizure under general anesthesia.
- Mechanism of action is not fully understood but ECT is thought to help release neurotransmitters and change brain connectivity.
- Requires multiple treatments (average: 6–12 sessions)

Considered safe and effective for treatment-resistant depression, but remains stigmatized due to perceptions of the procedure

Continuation or maintenance ECT may be required; more effective when combined w/ pharmacotherapy



Vagus Nerve Stimulation

- Surgical intervention under general anesthesia: attaching electrode to vagus nerve, which is connected to pulse generator in the chest wall
- Intermittent stimulation is produced by a hand-held transmitter.
- Mechanism of action is not understood in treatment of depression.

Considered for treatment-resistant depression when at least 4 medications have failed

Serious adverse events can occur and evidence is still emerging as to the effectiveness of this treatment.

NOTES

