



VA research on **DEPRESSION**

Depression causes sadness, loss of interest in activities people once enjoyed, withdrawal from others, and low energy. Depression can also cause people to feel hopeless about the future and even think about suicide.

ABOUT DEPRESSION

- According to the National Institute of Mental Health (NIMH), major depression is one of the most common mental disorders in the United States, and it carries the heaviest burden of disability among mental and behavioral disorders. In 2014, NIMH [estimated](#) that some 15.7 million adults aged 18 or older in the United States had at least one major depressive episode in the past year—6.7 percent of all U.S. adults.

- Most experts believe a combination of genes and stressful life events can cause depression. Health problems such as anemia or an underactive thyroid gland can also lead to depression, as can certain medicines, such as steroids or narcotics.

- In 2008, VA [estimated](#) that about 1 in 3 Veterans visiting primary care clinics has some symptoms of depression; 1 in 5 has serious symptoms that suggest the need for further evaluation for major depression; and 1 in 8 to 10 has major depression, requiring treatment with psychotherapy or antidepressants

VA RESEARCH ON DEPRESSION: OVERVIEW

- VA researchers are making important headway in treating, screening, and

diagnosing depression and other mood disorders such as bipolar disorder, persistent despondency, and seasonal affective disorder.

- Researchers are developing models of family interventions and social support to help Veterans recover from mood disorders, learning which risk factors make a person more likely to suffer from depression or to respond positively to a specific medication, and identifying and testing potential new drugs for depression and other disorders.

SELECTED MILESTONES AND MAJOR EVENTS

2006 – Developed, through VA's [TIDES](#) project, an evidence-based collaborative approach to depression management

2006 – Began the [Heart and Soul Study](#), on how psychological factors influence the outcomes of patients with coronary heart disease

2008 – [Demonstrated](#) that the link between depression and heart disease may hinge largely on behavioral factors associated with depression, such as lack of exercise and increased smoking

2012 – [Found](#) that serotonin and norepinephrine reuptake inhibitors

(SNRIs) may be more effective in treating depression symptoms than drugs that affect only serotonin (SSRIs)

2015 – [Learned](#) that talk therapy delivered by two-way video calls is at least as effective as in-person treatment delivery for older Veterans with depression

RECENT STUDIES: SELECTED HIGHLIGHTS

- **Veterans with depression are more likely to complain of increased chest pain related to ischemic heart disease.**

Ischemic heart disease, also known as coronary artery disease, is the term given to heart problems caused by narrowed heart arteries. Researchers at the VA Puget Sound Health Care System found that changes in depression symptoms could affect the perception of a patient's chest pain, or angina. The greater the perception of chest pain, regardless of the actual extent of the disease, the greater the likelihood of cardiac intervention. ([Annals of Behavioral Medicine](#), February 2015)

- **Veterans with depression, PTSD, and traumatic brain injury have the greatest level of difficulty** in getting around, communicating and getting along with others, self-care, and other daily tasks, according to researchers at VA's Translational Research Center for

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TBI and Stress Disorders. Patients with these conditions have higher levels of disability than those with any other three-diagnosis combination. (*Journal of Traumatic Stress*, February 2015)

• **Women Veterans who undergo cardiac catheterization are more likely to be depressed** or have posttraumatic stress disorder (PTSD) than women who did not. They also tend to be younger and more obese than men and are also significantly less likely to have obstructive coronary disease, according to researchers with the VA Ann Arbor Healthcare System and the University of Michigan. Consequently, they were less likely to have been prescribed heart medications. However, their long-term health outcomes were about the same as those of their male counterparts. (*Circulation: Cardiovascular Quality and Outcomes*, March 2015)

• **Talk therapy delivered by two-way video calls is at least as effective as in-person treatment delivery for older Veterans with depression.** A study led by researchers from VA's Health Equity

and Rural Outreach Center randomly assigned 241 Veterans aged 58 or older with major depression to receive either telemedicine or same-room psychotherapy. Both groups received the same kind of treatment: behavioral activation, a talk therapy that emphasizes reinforcing positive behaviors. The team found that telemedicine-delivered psychotherapy produced similar outcomes to in-person treatment. (*Lancet Psychiatry*, August 2015)

• **Cognitive behavioral therapy (CBT) can help Veterans and others with seasonal affective disorder (SAD).** CBT is a form of psychotherapy that focuses on the integral relationship between people's thoughts and their behaviors. SAD is a form of clinical depression that occurs in fall and winter and is more highly prevalent in those who live in northern climates. In a study by researchers from VA's Baltimore and Denver Mental Illness Research Education and Clinical Centers (MIRECCs), along with researchers from several universities, patients focused on behaviors that would help them cope

with winter and were encouraged to engage in fun activities to counteract their avoidance mechanisms. (*American Journal of Psychiatry*, Sept. 1, 2015)

• **Depression may be the cause of poor health behaviors, not its consequence,** according to a study led by VA and University of California, San Francisco researchers. The team found that depressive symptoms were linked to a range of lifestyle risk factors among 667 patients with coronary heart disease. These included smoking, low levels of physical activity, poor sleep quality, and poor mental activities. Each of these lifestyle factors got worse over a five-year period in depressed individuals, more so than in those who had cardiovascular disease but few, if any, symptoms of depression. (*Annals of Behavioral Medicine*, August 2016)

For more information on VA studies on depression and other key topics relating to Veterans' health, please visit www.research.va.gov/topics

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