



DEPRESSION

As part of a comprehensive research agenda aimed at advancing the care of Veterans with depression, VA researchers are developing, testing, and implementing new models of primary care that do a better job of screening for and treating the disease. They are also studying ways to improve outcomes for Veterans affected by depression along with other conditions, such as heart disease or diabetes, and exploring the genetic and molecular roots of the condition, with the goal of developing more effective drugs.

EXAMPLES OF VA RESEARCH ADVANCES

DULOXETINE FOR DEPRESSION—A serotonin and norepinephrine reuptake inhibitor (SNRI) was more effective for depression symptoms than drugs that only modulate serotonin (SSRIs), found VA researchers in Indianapolis and Philadelphia. The scientists, plus colleagues at other institutions, compared the SNRI duloxetine with four generic SSRI drugs. Duloxetine provided greater improvements in pain and functioning in 750 people with depression. In addition, the study population was more racially and ethnically diverse than is usually found in drug trials: About 19 percent was of African descent, and 15 percent was Hispanic. Duloxetine also has been used to treat anxiety, diabetes-related nerve pain, fibromyalgia, lower back pain, and osteoarthritis pain.

BELIEFS AFFECT TREATMENT CHOICES—African Americans and Caucasians have different beliefs about effective treatments for depression, says a study of more than 200 Veterans. Pittsburgh VA researchers surveyed the Veterans, all of whom had symptoms of depression. African Americans were less likely to view antidepressant medication as helpful. There were no differences in attitudes toward counseling or psychotherapy.

TELECOUNSELING, EXERCISE, EDUCATION ALL EFFECTIVE—People with type 2 diabetes and depression can benefit from telephone counseling and a walking program, say VA researchers from Flint, Mich. Patients received weekly cognitive behavioral therapy sessions via phone for 12 weeks and monthly sessions for the next nine months. The pedometer-based walking program was added partway through the 12 weekly sessions. The therapies decreased blood pressure and increased total exercise. After a year, 58 percent of the people in the study no longer showed symptoms of depression. And a VA team from Providence, R.I., followed 81 men with chronic obstructive pulmonary disease (COPD) who went to a group exercise and education program twice a week for eight weeks. After the program, the men had fewer depression symptoms and less fatigue.

★ **FACTS ABOUT DEPRESSION**—*Depression is one of the most common and costly mental disorders. Depression costs the U.S. more than \$80 billion per year, according to the Depression and Bipolar Support Alliance. The figure includes both direct health care costs and indirect costs, such as lost work days. Nearly one in five Veterans returning from Afghanistan or Iraq has symptoms of either major depression or posttraumatic stress disorder. While there are effective pharmacologic treatments and psychotherapies for depression, studies show that the condition is under-diagnosed. An untreated episode of depression may last several months, and most people with depression experience repeated episodes over a lifetime.*