USING PATIENT CHARACTERISTICS AND PREFERENCES TO MATCH INDIVIDUALS WITH DEPRESSION TO ANTIDEPRESSANT MEDICATIONS, COGNITIVE BEHAVIORAL THERAPY, AND/OR MINDFULNESS-BASED COGNITIVE THERAPY

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ABSTRACT

Depression is one of the most prevalent and impactful mental disorders. For individuals with depression, finding the most beneficial treatment can be very challenging due to the abundance of available options. This study examined research on patient characteristics and preferences for treatment to determine which individuals with depression would have more successful outcomes for three specific freatments: antidepressant medications (ADMs), cognitive behavioral therapy (CBT), and mindfulness-based cognitive therapy (MBCT). The compilation of literature aims to indicate which of the three treatment options would be the most effective treatment for individuals based on their characteristics and preferences for treatment.

Introduction

Clinical depression is one of the most common mental disorders that negatively impacts many individuals and finding an effective treatment can often be difficult and time-consuming (NIMH, 2019).

A significant number of individuals with depression are not receiving adequate treatment (Moise et al., 2018; Puyat et al., 2016).

This non-empirical study explored literature on depression treatment, patient characteristics, and preferences to match individuals based on those features to antidepressant medications (ADM), cognitive behavioral therapy (CBT), and mindfulness-based cognitive therapy (MBCT). ADM, CBT, and MBCT have all been shown to be effective at treating individuals with depression.

The use of ADMs is as effective as psychotherapies; but becomes more effective when individuals with depression are also receiving psychotherapy (De Maat et al., 2006).

CBT does not cause adverse side effects nor have withdrawal symptoms when treatment ends, which ADMs often do (Driessen & Hollon, 2010).

Literature

Review

MBCT was shown to be so effective in limiting and preventing depression relapse that many individuals can decrease or discontinue their ADM treatment altogether (Kuyken et al., 2008). Patient characteristics are any demographic, such as age, race/ethnicity, gender, level of education, etc. along with the characteristics of the depression diagnosis, such as severity, length of disorder, and comorbidities (Himmerich & Wranik, 2012).

Individuals with depression who have a comorbid anxiety disorder were less likely to succeed in CBT treatment (Vittengl et al., 2019).

The individual's preferences for treatment typically focus on the characteristics of the treatment itself, such as in-person vs online, individual vs group, or psychotherapy vs medication (Lokkerbol et al., 2018).

Individuals with depression typically prefer psychotherapies over psychopharmacologies when seeking treatment (APA, 2012).

Literature Review cont.



Although the patient's characteristics are vital to consider and can influence treatment outcomes, the patient's preferences for styles/characteristics of the treatment are arguably the most influential aspects.

Individual's preference for the type of treatment is essential to a positive outcome when treating depression (Dorow et al., 2018).

Despite the effectiveness of a treatment option, when a patient receives their preference, the outcomes are more clinically significant and successful (Mergl et al., 2011).

Clinical Implications

Clinicians should take a collaborative and educational approach when discussing treatment options with their patients.

This will allow patients the opportunity to better understand their options, which will help them determine their preferences for treatment.

This clinicians should gain an understanding of what the patients' preferences are and incorporate them into treatment as much as possible.

Informed decision making for depressed individuals is critical to ensure a successful match between preferences and available treatment options (Dorow et al., 2018).

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