

## Guidelines for the initial management of depression

### Diagnosis

Depression refers to a wide range of mental health problems characterised by the absence of positive affect, low mood, and a range of associated emotional, cognitive, physical, and behavioural symptoms. Cancer patients have a greater incidence of depression, due to a multitude of factors including uncertainty about the future, treatments and even having past traumatic experiences brought to the front of their minds. Recognition of depression in these patients is crucial.

In **ICD-11**, depression is defined as the presence of depressed mood or diminished interest in activities occurring most of the day, nearly every day, for at least 2 weeks, accompanied by other symptoms such as:

- reduced ability to concentrate and sustain attention or marked indecisiveness
- beliefs of low self-worth or excessive or inappropriate guilt
- hopelessness about the future
- recurrent thoughts of death or suicidal ideation or evidence of attempted suicide
- significantly disrupted sleep or excessive sleep
- significant changes in appetite or weight
- psychomotor agitation or retardation
- reduced energy or fatigue

NICE released new guidance in June 2022 which classifies depression as 'less severe' or 'more severe' depression. <sup>1</sup> Less severe includes subthreshold and mild depression and more severe depression encompasses moderate and severe depression. If you think your patient has depression based off the above definition, then completing the PHQ-9 questionnaire is appropriate. <sup>2</sup> A score less than 16 is defined as less severe depression and scores of 16 or more are defined as more severe depression.

## Management

'Less severe' depression

- Advise patient to see GP, Macmillan/BUPA counselling, Maggie's, sleep hygiene advice, regular exercise, and use the free mental health website and phone app (for those patients in Greater Manchester) called [Living Life to the Full](#).
- Do not routinely offer anti-depressants as first line treatment for less severe depression unless that is the patient's preference

'More severe' depression

- All the above management points but also consider starting anti-depressants
- Ensure to ask about suicide/self-harm **risk** when asking about mood, if there is risk then please refer to psycho-oncology. These questions are asked in the PHQ-9 questionnaire.

## Medication

If commencing an anti-depressant, then there are a few options:

- **Sertraline** 50 mg once daily (25 mg if frail) is well tolerated and has few side effects – ensure to check platelets, liver, and sodium prior to starting – caution with platelets below 50 and in severe liver dysfunction. If sodium is 133 or less, then avoid Sertraline or other SSRI medications as these can worsen hyponatraemia.
- If patient has sleep or appetite issues, can instead start with **Mirtazapine 15 mg** once daily, take at night as sedating. Aim to get dose to 30 mg, can increase dose after 2 weeks
- If no symptom improvement on 50 mg Sertraline or 15 mg Mirtazapine after 2-3 weeks, then it is reasonable to **refer** to psycho-oncology for review

If starting an antidepressant then patients will need to be followed up, this can be done by the GP but needs to be communicated to them in the discharge letter with the rationale for starting. This is usually within 2 weeks to check symptoms are improving but may be one week if for patient between 18-25 years or if there is a concern of suicide risk. Anti-depressants need to be taken for at least 6 months at full treatment dose.

Ensure to tell patients that medication will take a few weeks to start working and that treatment will need to be taken for several months at least. They should **not stop** it abruptly as this can lead to withdrawal.

#### References:

1. National Institute for Health and Care Excellence. Depression in adults: treatment and management [Internet]: NICE; 2022 (NICE guideline [NG222]). Available from: <https://www.nice.org.uk/guidance/ng222/>
2. PHQ-9 Depression Test Questionnaire [Internet]. Patient.info. 2022 [cited 15 July 2022]. Available from: <https://patient.info/doctor/patient-health-questionnaire-phq-9>

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