



Depression & Anxiety Disorders

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Depressive Disorders

- ▶ Disruptive Mood Dysregulation Disorder (DMDD)
- ▶ Major Depressive Disorder (MDD)
- ▶ Persistent Depressive Disorder (Dysthymia)
- ▶ Premenstrual Dysphoric Disorder
- ▶ Substance/Medication-Induced Depressive Disorder
- ▶ Depressive Disorder Due to Another Medical Condition



Anxiety Disorders (DSM-5)

Separation Anxiety Disorder

Selective Mutism

Specific Phobia

Social Anxiety Disorder (Social Phobia)

Panic Disorder

Generalized Anxiety Disorder

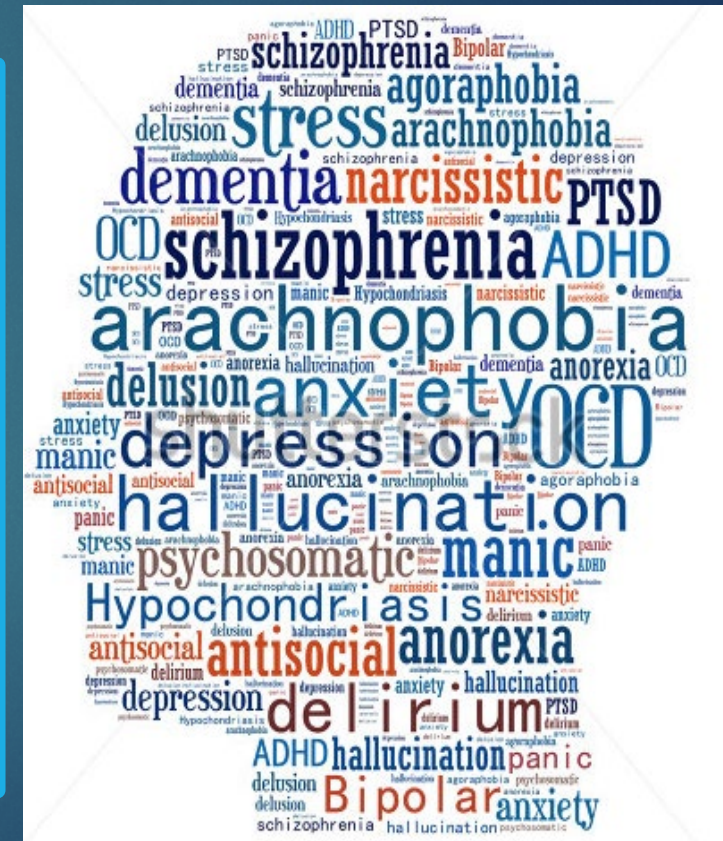
Agoraphobia

Substance/Medication-Induced Anxiety Disorder

Anxiety Disorder Due to Another Medical Condition

Prevalence of Common Mental Disorders

- ▶ Depression 10.4%
- ▶ Anxiety disorders 10.1%
- ▶ Alcohol use disorders 6.0%
- ▶ Sleep disorders 6.5%
- ▶ Chronic tiredness (neurasthenia) 5.4%
- ▶ Unexplained somatic complaints 2.7%



Prevalence of Psychiatric Disorders in the Philippines

(Perlas et al., 1994)

Disorder	Percentage
Anxiety	14.3
Panic	5.6
Depression	5.3
Psychosis	4.3
Organic impairment of memory	1.2
Substance abuse	0.7
Obsessive-compulsive	0.6

How serious is major depression?

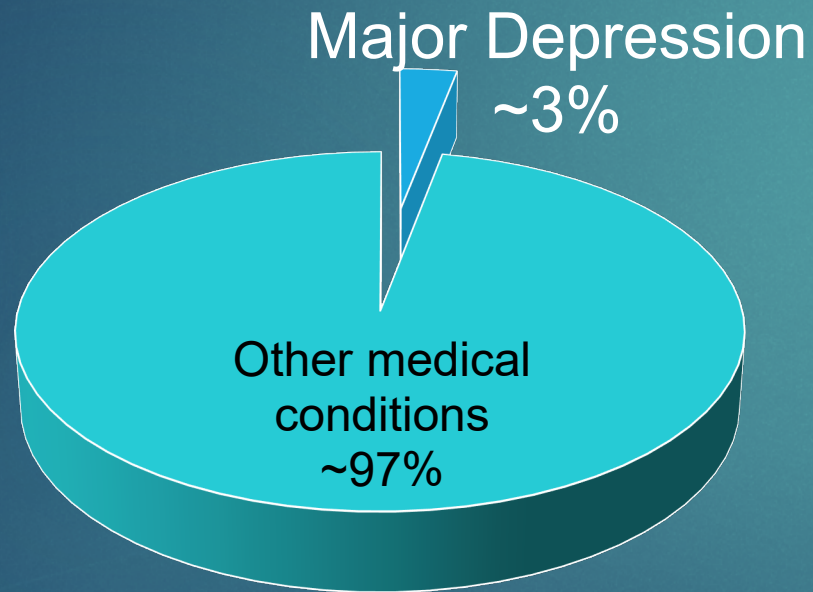
~1/3 of all depressive disorders take a chronic course

~15% will commit suicide over a 10–20 year period



Global Burden of Disease

(Murray, C.J. et al., 2010)



2030

Major depression will be the 2nd leading cause of disability in high-income countries

(Mathers, C.D. & Loncar, D., 2006)

Consequences of Anxiety Disorders

Often precede the onset of other psychiatric disorders such as Major Depressive Disorder

Anxiety symptoms may predict worse outcomes of other mental disorders

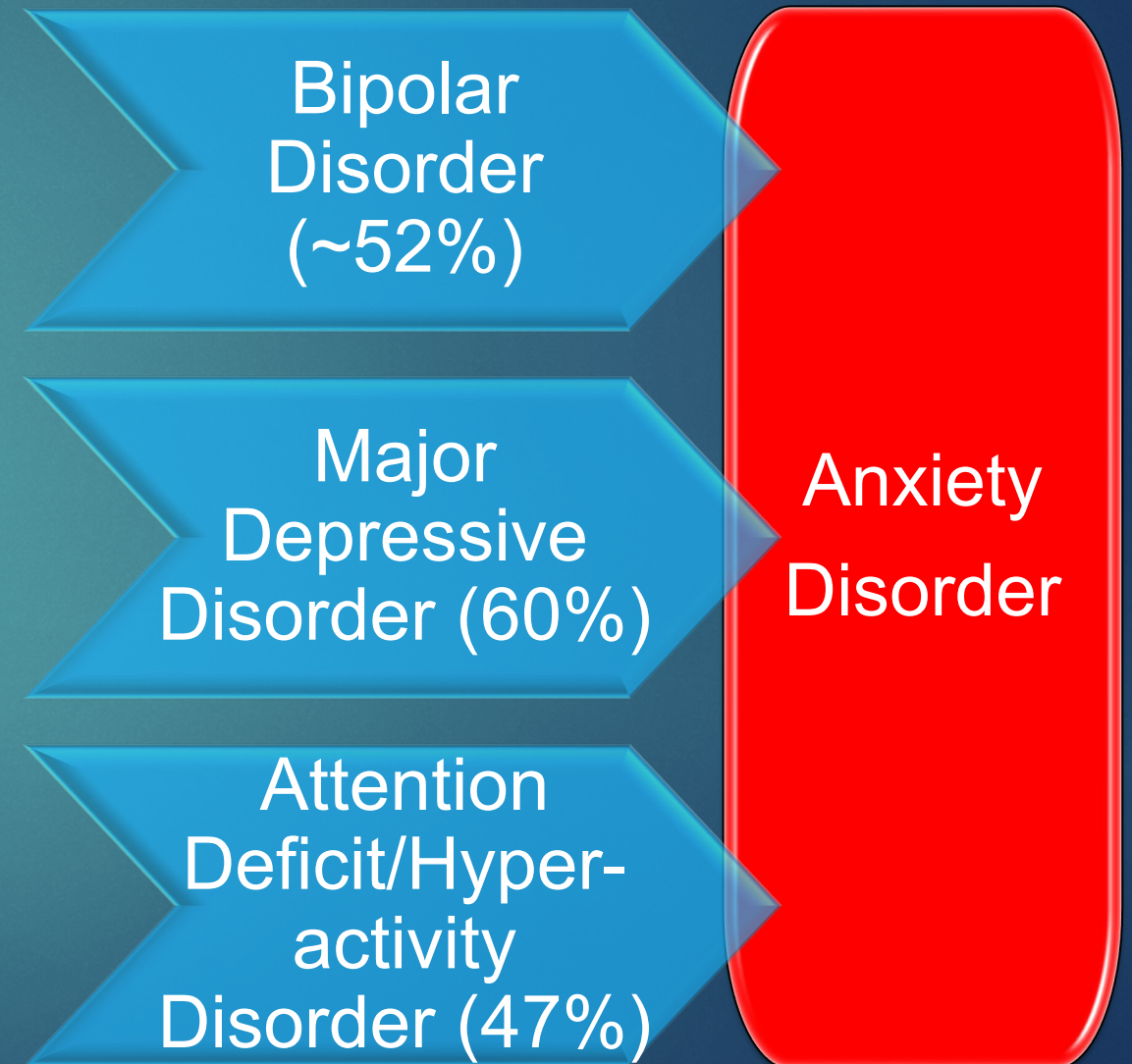
Associated with substantial impairment & economic costs

Predict the onset or course of other conditions (e.g., Coronary Heart Disease, stroke, & diabetes)

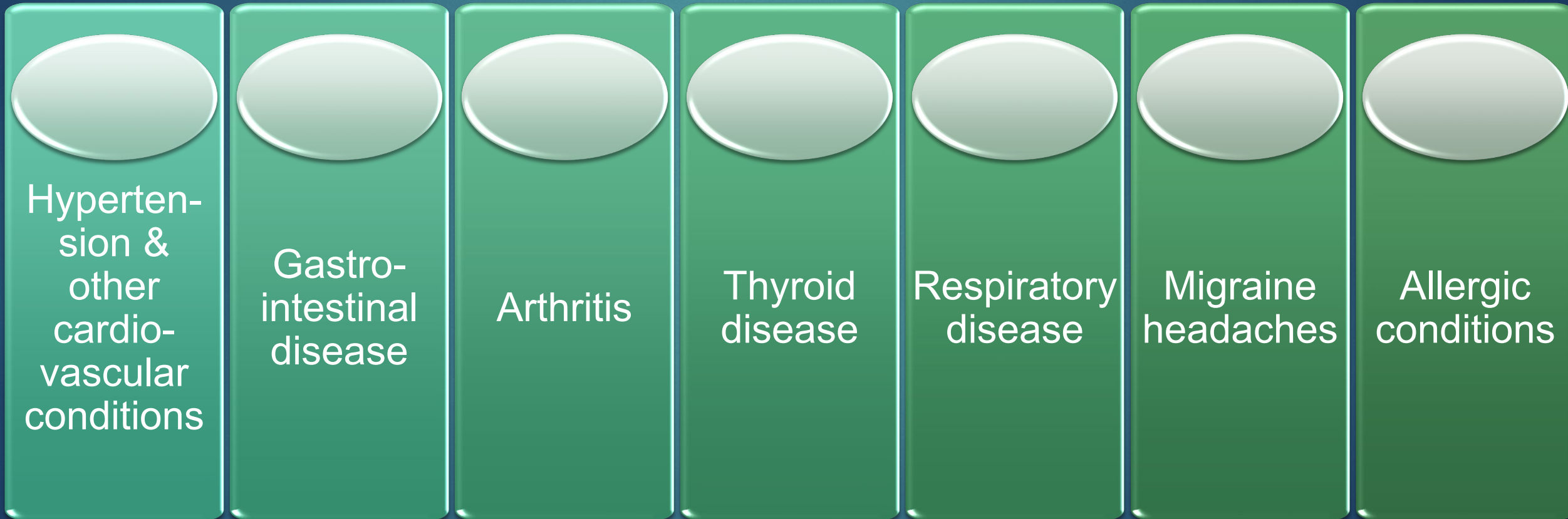
Comorbidity in Anxiety Disorders

>50% of patients with an anxiety disorder have at least 1 more anxiety disorder.

Anxiety disorder is often comorbid with substance use & mood disorders.



Medical Disorders Comorbid with Anxiety Disorders



Anxiety disorders with comorbidity are associated with...

Poorer
treatment
outcomes

Greater
severity &
chronicity

More
impaired
functioning

Increased
health
service use

Higher
treatment
costs

Conclusions About Anxiety Disorders from the World Mental Health Surveys

Earlier age of onset than mood disorders & substance use disorders

Course is often chronic & recurrent

Often more impairing than physical disorders

First treatment usually occurs at least a decade after the onset

Implications of Depressive & Anxiety Disorders to Health Care Policies

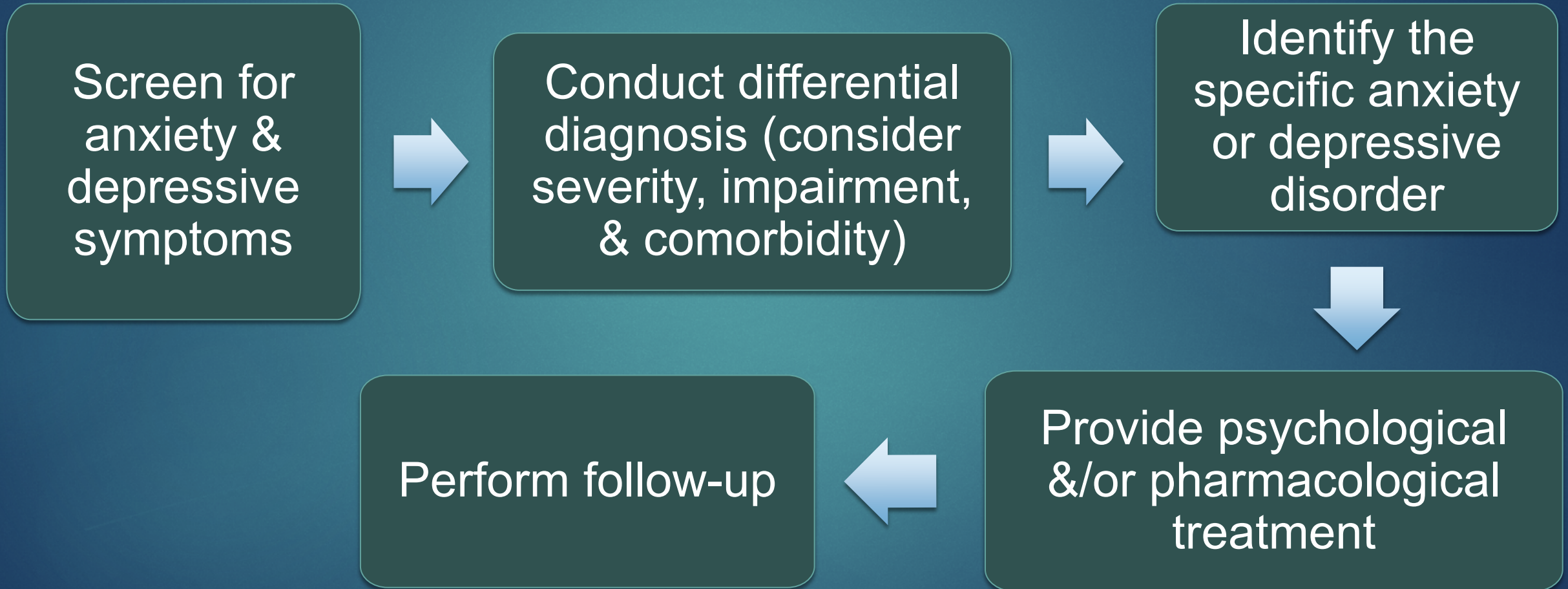
Early diagnosis & treatment

Evaluation & treatment in integrative or collaborative care settings

Consumer advocacy & government policies addressing mental health literacy

Address stigma & other sociocultural barriers

Overview of the Management of Depressive & Anxiety Disorders



Treatment of Anxiety & Depressive Disorders

Psychoeducation: information about the disorder, efficacy & tolerability of treatment choices, aggravating factors, signs of relapse

Information on self-help materials such as books or websites

Factors Determining the Choice of Treatment

- Patient's preference & motivation
- Ability of patient to engage in treatment
- Severity of illness
- Clinicians' skills & experience
- Availability of treatments
- Patient's prior response to treatment
- Presence of comorbid medical or psychiatric disorders

Psychological Treatment for Anxiety Disorders

Cognitive Behavioral Therapy (CBT) & Mindfulness-Based Cognitive Therapy (MBCT)

CBT can be effectively delivered as individual or group therapy

Self-directed or minimal intervention formats

Psychotherapy & pharmacotherapy are generally equally efficient

Pharmacological treatment of anxiety disorders

Anitdepressants: Selective serotonin reuptake inhibitors (SSRIs)

Benzodiazepines: adjunctive in early treatment

The Conundrum in Treating Major Depressive Disorder

- Antidepressants are the mainstay in treatment
- Antidepressants decrease risk of relapse

- ▶ New antidepressants only obtained beneficial effect in severely depressed patients; clinically small effect
- ▶ Only a third to half of patients fully respond to antidepressants



The benefits of antidepressant medication seem to be limited.

Are there other effective treatments for this serious illness?

Evidence-Based Psychotherapies for Major Depressive Disorder

Problem solving therapy (PST)

Cognitive behavioral therapy (CBT)

Interpersonal psychotherapy (IPT)

3rd wave cognitive behavioral therapies

Summary

Depressive and anxiety disorders are prevalent.

Depressive and anxiety disorders significantly contribute to impaired functioning and health care costs.

The early diagnosis and treatment of depressive and anxiety disorders will redound to better quality of life of patients and lower health care costs.