

NATIONAL CLINICAL GUIDELINE FOR THE NON-PHARMACOLOGICAL TREATMENT OF UNIPOLAR DEPRESSION

Quick guide

Early screening	
√	Systematic early screening for recurrence in patients with a history of depression is not good practice.
Add-on treatment	
↑	Consider offering physical training to patients with mild to moderate depression in combination with usual treatment (⊕⊕○○).
↑↑	Offer psychotherapy in combination with pharmacological treatment to patients with moderate to severe depression (⊕⊕⊕○).
Choice of therapeutic approach	
↑	Short-term psychodynamic psychotherapy and cognitive behavioral therapy may both be offered for the treatment of moderate to severe depression, since the working group found no evidence of a difference in the effect in a direct comparison (⊕○○○).
↑	Interpersonal psychotherapy and cognitive behavioral therapy may both be offered for the treatment of moderate to severe depression, since the working group found no evidence of a difference in the effect in a direct comparison (⊕○○○).
Chronic depression and recurrence prevention	
↑	Consider offering patients with medically difficult to treat chronic depression to switch to psychotherapy (⊕○○○).
↑	Consider offering mindfulness training as recurrence prevention to patients remitted from moderate to severe depression (⊕○○○).
Treatment in the primary sector	
√	It is good practice to consider offering supportive conversations/talk therapy with a GP to patients with depression.
↑	Consider offering collaborative care to patients with depression rather than the usual treatment (⊕○○○).

About the quick guide

This quick guide contains the key recommendations from the national clinical guideline for the non-pharmacological treatment of unipolar depression. The guideline was prepared by the DHA.

The national clinical guideline focuses on selected parts of the assessment and treatment course for adults with mild to severe unipolar depression. The guideline primarily concerns psychotherapeutic interventions for patients with unipolar depression and does not shed light on pharmacological interventions.

Thus, the guideline contains recommendations for selected parts of the field only and therefore must be seen alongside the other guidelines, process descriptions etc. in this field.

The recommendations are preceded by the following indications of their strength:

↑↑ = a strong recommendation for
↓↓ = a strong recommendation against
↑ = a weak/conditional recommendation for
↓ = a weak/conditional recommendation against

The symbol (√) stands for good practice. This symbol is used in case of lack of evidence, when the working group wants to emphasise particular aspects of the established clinical practice.

The recommendations are followed by the following symbols which indicate the strength of the underlying evidence – from high to very low:

(⊕⊕⊕⊕) = high
(⊕⊕⊕○) = moderate
(⊕⊕○○) = low
(⊕○○○) = very low

In case of lack of evidence, a recommendation is not followed by a symbol. This applies to the good practice recommendations.

Further information at sundhedsstyrelsen.dk

At sundhedsstyrelsen.dk, a full-length version of the national clinical guideline is available, including a detailed review of the underlying evidence for the recommendations.

About the national clinical guidelines

The national clinical guideline is one of the 50 national clinical guidelines (NCGs) to be prepared by the DHA during the period 2013-2016.

Further information about the choice of subjects, method and process is available at sundhedsstyrelsen.dk.
