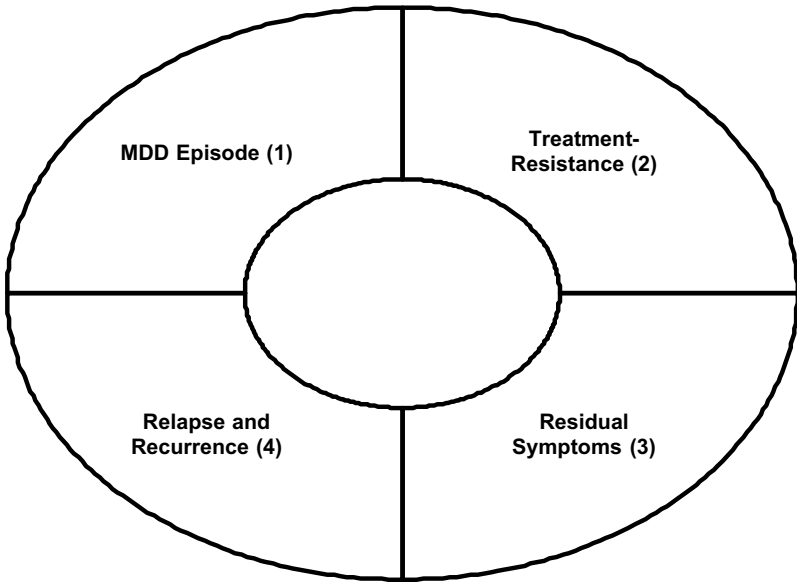


# Preface

Major depressive disorder (MDD) is a highly prevalent and, often, chronic illness, which has been shown to result in considerable patient suffering and distress, as well as significant disability, morbidity and mortality. Despite more than half a century of intensive research, contemporary therapies for MDD demonstrate, at best, modest overall efficacy, most often resulting in either a complete lack of or insufficient symptom improvement. In addition, the tolerability profile of all contemporary pharmacotherapies for MDD, although greatly improved since their first appearance in the mid-1950s, can often contribute to poor treatment adherence, as well as patient discomfort and disability. Furthermore, many patients who experience robust antidepressant effects may still suffer a relapse or recurrence of MDD shortly after the full eradication of symptoms, and despite full compliance with their treatment. As a result, patients with depression often describe feelings as if they are caught in a vicious cycle, with only brief periods of complete symptom recovery that are not sufficient in duration to allow for a return to the pre-morbid level of functioning.

When depression strikes, clinicians, patients, their families and their loved ones are on the front line. Supporting them are those working vigorously to enhance our ability to effectively treat depression: those working in academic clinical care and research centers, government sources including the National Institutes of Health, the pharmaceutical industry, as well as private donors and fundraisers. This book is intended as a review on the state of our knowledge regarding pharmacologic treatments for depression. It is divided into four parts. The first three parts focus on

“Life-Cycle” of Depression  
Step-wise Contributing Factors



- 1: Relative high prevalence of MDD in the general population.
- 2: Limited efficacy of first-line treatments for MDD contributing to TRD.
- 3: Modest efficacy of subsequent treatment strategies for MDD contributing to residual symptomatology.
- 4: History of treatment-resistance, presence of residual symptoms, and partial or non-adherence to treatment (poor tolerability) contributing to depressive relapse or recurrence.

contemporary pharmacologic treatment strategies for MDD, as well as non-pharmacologic strategies for treatment-resistant MDD. These include a description of first-line pharmacotherapy strategies (Part I), next-step treatment strategies (Part II), and pharmacologic strategies to help maintain treatment gains (Part III). The final part of the book (Part IV) focuses on describing emerging leads that may help improve our ability to treat MDD (novel treatments and biological markers in depression).

When writing this book, it was our intention to combine a comprehensive and detail-oriented approach, so that this work may have broader appeal to all those who have an interest in the field,

including clinicians, researchers, those who fund research, and those who provide direction and leadership. Thus, it was our hope that this work could, simultaneously, provide the readers with either an overview of our current state of understanding of the treatment of MDD, or with more selective knowledge that would enhance their understanding of a specific topic or topic area. Ultimately, such knowledge may lead to novel hypotheses and insights that, in turn, could help improve the standard of care for depression.

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