

Psychotherapy alone keeps some elders depression-free

Most elderly depressed people who report that they sleep well after receiving combined drug and psychotherapy treatment can maintain their nondepressed state with maintenance psychotherapy alone, new research finds. The findings suggest hope for elderly patients who are unable or unwilling to continue taking antidepressants as maintenance treatment.

The high rate of remission from depression—90 percent—for good sleepers who received therapy is encouraging, the team says. And in the context of a larger study the team is conducting, of which this sample is a part, the findings are 'remarkable,' they say: Elderly patients in the larger study had only a 75 percent to 80 percent chance of remaining nondepressed at the end of a year when they received drug therapy with or without psychotherapy, the team found.

In the study, reported in the July issue of the *American Journal of Psychiatry* (Vol. 154, No. 7, p. 958-962), researchers headed by Charles F. Reynolds III, MD, of the Western Psychiatric Institute and Clinic, studied 47 patients. They found that 90 percent of patients who reported good sleep quality after treatment with both nortriptyline (an antidepressant) and psychotherapy stayed nondepressed the following year when they saw a psychotherapist for 50 minutes of interpersonal therapy once a month.

By comparison, only 31 percent of patients who reported good sleep quality remained nondepressed when they attended a medication clinic monthly and received a placebo. Of the elderly patients who said they did *not* sleep well after regular treatment, 67 percent had relapsed by a year after treatment even when they received psychotherapy, while 83 percent who received placebo alone had fallen back into depression, the researchers found.

The aim of this study was to examine a possible treatment plan to avoid a relapse into depression for elderly patients who will not or cannot take antidepressants after they've gone into remission.

In addition, the team wanted to look at how the sleep patterns of elderly people may affect their relapse rates, based on earlier studies they'd done on middle-aged depressed patients showing an association between high delta sleep ratios (a measure reflecting more normal EEG sleep) and these patients' tendency to stay well after treatment.

The study is part of a larger body of research examining several combinations of drug, therapy and placebo treatments for the depressed elderly, say the authors, who also include Ellen Frank, PhD, Patricia Houck, Sati Mazumdar, PhD, Mary Amanda Dew, PhD, Cleon Cornes, MD, Daniel Buysse, MD, Amy Begley and David Kupfer, MD.