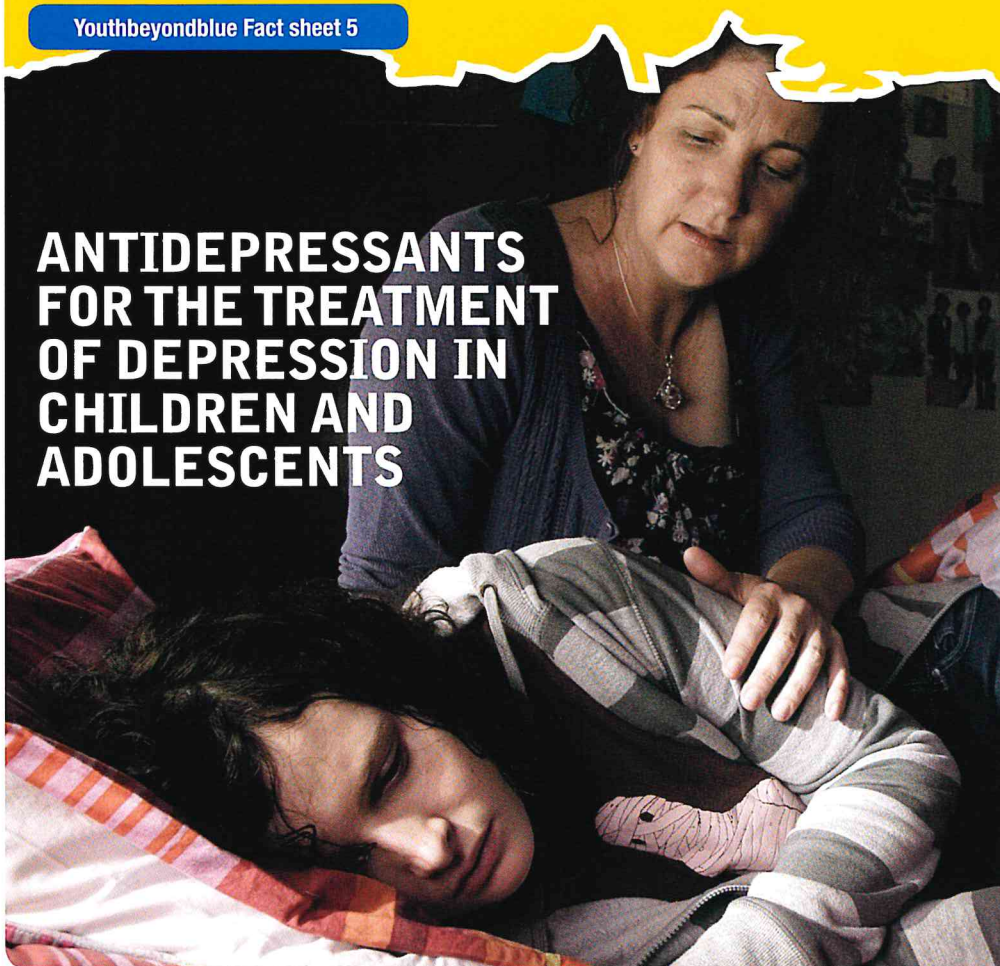


ANTIDEPRESSANTS FOR THE TREATMENT OF DEPRESSION IN CHILDREN AND ADOLESCENTS



WHAT TREATMENTS ARE AVAILABLE FOR CHILDREN AND YOUNG PEOPLE?

- Getting information about depression and how to recover from it is an important part of the treatment of depression.
- Psychological and family therapies are the main treatment for depression in children and young people.
- Two psychological therapies have been found to be especially helpful. One is called Cognitive Behaviour Therapy (CBT) and the other is Interpersonal Therapy (IPT). Other types of 'talking therapy' may also be useful.
- CBT helps you to change the negative thinking that comes with depression. IPT helps you to deal with any hassles you may be having with family and friends.
- Other ways to tackle depression such as stress management and tips to improve your sleep patterns can also be helpful.
- Occasionally, antidepressant medicines are prescribed to treat young people with depression.
- The Therapeutic Goods Administration (Australia's regulatory agency for medical drugs) does not recommend the prescription of antidepressants to children and young people.

ABOUT DEPRESSION

Everybody feels sad or down sometimes. This can be because of some disappointment, frustration or stress in your life. Most of the time though, this sadness is short-term and doesn't stop you from getting on with your life.

Depression is more than short-term sadness. It's a medical condition that causes persistent changes to your thoughts, mood, behaviour and physical health. It also affects your enjoyment of life.

Effective treatments for depression, however, are available. It's important to get help as soon as possible, so that treatment can be started. An important part of managing your depression is talking to family or friends. Having someone you know and trust aware of your situation can help you.

ARE ANTIDEPRESSANT MEDICATIONS EFFECTIVE IN THIS AGE GROUP?

While antidepressant medicines have been used to treat young people under 18 years with more severe depression (including children), there is much debate among doctors as to the benefits of these medicines with young people. One of the main reasons why doctors have found it difficult to give clear recommendations is because of the lack of research on the impact of antidepressants with young people. The Therapeutic Goods Administration and

manufacturers of antidepressants do not recommend antidepressant use for depression in young people under the age of 18. This is because:

- in trials, there were concerns about increased suicidal behaviour in young people taking antidepressants compared to those taking a pill which contained no drugs (placebo). The difference was roughly 4 per cent compared to 2 per cent. The risk was greatest in the first two months.
- of the lack of scientific evidence for the effectiveness of antidepressants in this age group. The increased risk of suicidal behaviour seen with antidepressants includes young adults up to the age of 24 years. There are, however, no Australian Government (i.e. Pharmaceutical Benefits Scheme) restrictions placed on the prescription of antidepressants and doctors are not prevented from prescribing them.

Of the various antidepressants available, selective serotonin reuptake inhibitors (SSRIs) have been the most widely researched with young people. When the results of research are put together, the findings show that SSRIs can increase suicidal thoughts and behaviour in people under 24 years.

It is a matter of weighing up the benefits against the risks. Depression itself poses risks of suicide, particularly during the early stages of treatment.

Among other adverse effects, children very commonly (up to 15 per cent) experience hyperkinesia (abnormal increase in activity, or hyperactivity) and adverse effects commonly lead to antidepressants being stopped (approximately 10 per cent). It is likely that the risks are greatest in younger children. While medical professionals may differ in their recommendations regarding the use of antidepressants in young people, there is agreement on the following:

- antidepressants should not be used as a first-line treatment for young people with mild-to-moderate depression
- treatment with antidepressants is more likely to be effective when coupled with psychological therapies
- any person taking antidepressants should be closely monitored by their doctor (ideally a parent or responsible adult should supervise the use of antidepressants by young people)
- the need for monitoring of suicidal behaviour is greatest in the first two months.

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beyondblue: the national depression initiative



ARE ANTIDEPRESSANT MEDICATIONS SAFE FOR CHILDREN AND YOUNG PEOPLE?

- As with most medicines, antidepressants have some side-effects such as nausea and headaches, which are usually mild and short-term if the person is going to tolerate them.
- Recently there has been concern about one particular side-effect that seems to be connected with the use of SSRIs. There seems to be an increase in suicidal thoughts and urges to act on these thoughts during the early stages of treatment in approximately 4 per cent of those treated.
- 10 per cent of people experience side effects which lead them to stop taking medication.
- These concerns have led health authorities in a number of countries to review all the available scientific studies relating to antidepressant use in children and young people under the age of 24 years (see below*).
- These reviews did find some evidence for an increase in the risk of suicidal thoughts and urges in young people taking these medications.
- If you stop taking SSRIs abruptly, once they have been taken for a while, it can lead to unpleasant symptoms in approximately 10 per cent of young people. Symptoms could include unpleasant mood states, irritability, agitation, dizziness and confusion. They generally stop by themselves after a short period of time.



KEY POINTS TO REMEMBER

- Depression is a very common medical condition.
- Effective treatments are available and it's important to get help as soon as possible.
- Psychological therapies are the recommended first-line of treatment for children and young people.
- In some cases, a doctor may think that an antidepressant may also be necessary, particularly if your depression is severe, or it isn't improving with other treatments.
- There is a risk that antidepressants may increase suicidal thoughts and urges (approximately 4 per cent).
- Your doctor should provide you (and your family) with clear information about the pros and cons of taking an antidepressant if this is considered necessary, and the steps to take in a crisis situation or emergency.
- Regular check-ups are important.
- With the right treatment, the vast majority of young people make a full recovery from depression.

WHAT DOES THIS MEAN FOR YOU?

- Everyone is different, so the treatment for depression needs to be worked out to suit you. This means you will need to see your local doctor. You should also discuss this with your family.
- If you're already taking one of these medicines, it's important not to stop taking them suddenly as this may cause an unpleasant 'withdrawal' reaction and make you feel worse (see above).
- If you're worried, speak with your doctor and ask for advice.
- If you do decide to stop these medicines, it's best to do so slowly, with regular check-ups with your doctor.
- Your doctor may have decided to consider an antidepressant if your depression is severe or other treatments haven't worked. Your doctor will provide you with information about the medicine and its possible side-effects.
- If taking antidepressants, it's important to avoid using some other types of medicines, including some over the counter and herbal medicines, alcohol or other drugs. You can ask your doctor or pharmacist for information on which things you should avoid.
- If you are started on an antidepressant by your doctor, it needs to be after balancing the pros and cons. You will need to see your doctor at least every week until the depression starts to improve. It's important not to miss your appointments.
- During this time, it's important that you and your doctor be on the look out for any signs that might indicate that you're one of the people who could experience a bad reaction from this treatment.
- If antidepressants have been helpful for you and you're uncertain what to do, please speak with your doctor.



LOOK

for the signs of depression



TALK

about what's going on



LISTEN

to your friends' experiences



SEEK HELP

together!

MORE INFORMATION AND SUPPORT

You can speak to trained counsellors by phoning these 24-hour telephone counselling services:

Lifeline 13 11 14 (cost of a local call)

Kids Help Line 1800 55 1800 (freecall)

Information and support is also available from the following websites:

beyondblue www.youthbeyondblue.com or www.beyondblue.org.au

Information on depression, anxiety and how to help a friend

headspace www.headspace.org.au
Information, support and help near you

ReachOut.com www.reachout.com

Information and support for young people going through tough times

National LGBT Health Alliance

www.lgbthealth.org.au Information and support for lesbian, gay, bisexual, transgender and other sexuality, sex and gender diverse people (LGBT)

The websites below can help you to find health services in your area. They list services that are either free of charge or low cost:

Kids Help Line www.kidshelp.com.au

Lifeline Service Finder

www.lifeline.org.au/service_finder

If you or a friend want to communicate with someone via email or online, Kids Help Line offers confidential, non-judgemental, emotional support 24 hours a day, 7 days a week.

*beyondblue and the National Health and Medical Research Council (NHMRC) are currently revising the management guidelines for depression in children, adolescents and young people. New information is frequently emerging in the field and a comprehensive review has not been published for some time. The new guidelines are expected to be available in 2010.

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