

# 16 - Drug treatment of depression

## Drug treatment of depression

344 The Maudsley® Prescribing Guidelines in Psychiatry CHAPTER 3 Drug treatment of depression  
Drugs used in the treatment of depression are summarised in Figure 3.1. Discuss choice of drug with the patient  
No effect No effect Effective Effective Poorly tolerated Poorly tolerated or No effect  
Include: Potential therapeutic effects Possible adverse effects Likelihood of discontinuation symptoms Likely time to respond (good therapeutic alliance predicts response to medication)<sup>1</sup>  
Suggest SSRI as first choice; mirtazapine if sedation required (see notes) Start antidepressant  
Titrate (if necessary) to recognised therapeutic dose (see Table 3.2 in previous section) Assess efficacy after 2 weeks (see notes) If possible, increase the dose (see notes) Continue for 6–9 months<sup>2–4</sup> at full treatment dose Consider longer-term treatment in recurrent depression<sup>2–6</sup>  
Assess over a further 2 weeks No effect Consider third-choice options – mirtazapine<sup>9</sup> (if not already used), vortioxetine,<sup>10</sup> agomelatine<sup>11</sup> No effect Refer to suggested treatments for refractory depression Switch to a different antidepressant (see notes) Titrate to therapeutic dose Assess efficacy over 4 weeks (increase dose at 2 weeks if no effect) Switch to a different antidepressant<sup>7,8</sup> Titrate (if necessary) to therapeutic dose. Assess over 3–4 weeks; increase dose as necessary (see notes) Figure 3.1 Drug treatment for depression.

---

Revision #1

Created 2026-01-04 20:15:19 UTC by Omar Ayman

Updated 2026-01-04 20:15:19 UTC by Omar Ayman