

Effective Psychotherapies for the Treatment of Major Depressive Disorder



U.S. Air Force photo by Staff Sgt. Steven Adkins

The Military Health System and the Department of Veterans Affairs offer several effective, evidence-based treatments for treating Major Depressive Disorder (MDD). When treating uncomplicated MDD, the 2022 Department of Veterans Affairs/Department of Defense clinical practice guidelines (CPG) for MDD state, “We recommend that MDD be treated with either psychotherapy or pharmacotherapy as monotherapy, based on patient preference... when choosing psychotherapy to treat MDD, we suggest offering one of the following interventions (not rank ordered): Acceptance and commitment therapy, behavioral therapy/behavioral activation, cognitive behavioral therapy, interpersonal therapy, mindfulness-based cognitive therapy, problem-solving therapy, short-terms psychodynamic psychotherapy.” (p. 33)¹



Acceptance and Commitment Therapy (ACT):

The ACT approach encourages acceptance of emotional distress and encourages the choice of goal-directed behaviors. A primary focus of ACT is to help the patient acknowledge difficulties in their life without feeling the need to escape from or avoid emotions.



Cognitive Behavioral Therapy (CBT): The CBT approach explores the connection between the thoughts and behaviors of patients. Many times, depression and its associated behaviors emerge from negative thoughts about oneself and their worth. Since both thoughts and behaviors are learned, patients can learn to establish new skills and patterns of thought that will help improve their mood.



Mindfulness-Based Cognitive Therapy (MBCT):

Similar to a CBT approach, MBCT adds mindfulness-based skills such as meditation, imagery and experiential exercises to help patients overcome negative thoughts. MBCT teaches patients to pay attention to their thoughts and feelings without judging them.



(NEW!) Short-Term Psychodynamic Psychotherapy (STPP): This is the only new psychotherapy approach added to the 2022 MDD CPG. The STPP approach includes helping patients gain a self-understanding of the negative relationship patterns they are repeating. It also focuses upon current relationship conflicts and setting interpersonal goals.



Behavioral Therapy/Behavioral Activation (BT/BA):

The BT/BA approach emphasizes the use of daily enjoyable activities and life events to help decrease depression. When patients become depressed, they can discontinue their routine and withdraw from their environment. Over time, this withdrawal can make depression worse. BT/BA encourages patients to engage in pleasurable activities that have been shown to improve mood.



Interpersonal Therapy (IPT):

The IPT approach helps patients solve relationship problems. This may include problems with family members, friends and co-workers. The approach has been demonstrated to be effective in improving communication, conflict resolution, distress tolerance and increasing problem-solving skills.



Problem-Solving Therapy (PST):

The PST approach focuses upon solving problems, achieving goals and changing behaviors. By defining the current problems experienced by the patient and developing a step-by-step method for solving them, the patient's overall mood improves.

Additional Considerations for Providers

In addition to becoming familiar with these psychotherapies, the CPG provides the following important considerations for providing effective care:



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- In selecting a treatment option, particularly when this is the patient's first experience with treatment, the provider should explain the risks and benefits of all treatments to achieve a shared decision on the course of treatment. (p. 33)¹
- For patients who select psychotherapy as a treatment option, we suggest offering individual or group format based on patient preferences. (p. 36)¹
- For individuals with mild to moderate MDD who are breastfeeding or pregnant, we recommend offering an evidence based psychotherapy as a first line treatment. (p. 25)¹
- We suggest offering a combination of pharmacotherapy and evidence-based psychotherapy for the treatment of patients with Major Depressive Disorder characterized as: Severe (e.g., PHQ-9>20); persistent major depressive disorder (duration greater than two years); recurrent (with two or more episodes). (p. 43)¹

Disclaimer: No one treatment is right for everyone. Consult with colleagues about medications and treatment options to determine which treatment is best for the patient based on the benefits, risks, and side effects of each treatment.

References

- 1 Veterans Affairs and Department of Defense. (2022). *VA/DOD Clinical Practice Guideline for the Management of Major Depressive Disorder*. Version 4.0. <https://www.healthquality.va.gov/guidelines/MH/mdd/VADoDMDDCPGFinal508.pdf>

Resources



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- Collect: 484-530-5908

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- State-side: 800-424-7877
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