

The NSDUH Report

January 3, 2008

Treatment for Past Year Depression among Adults

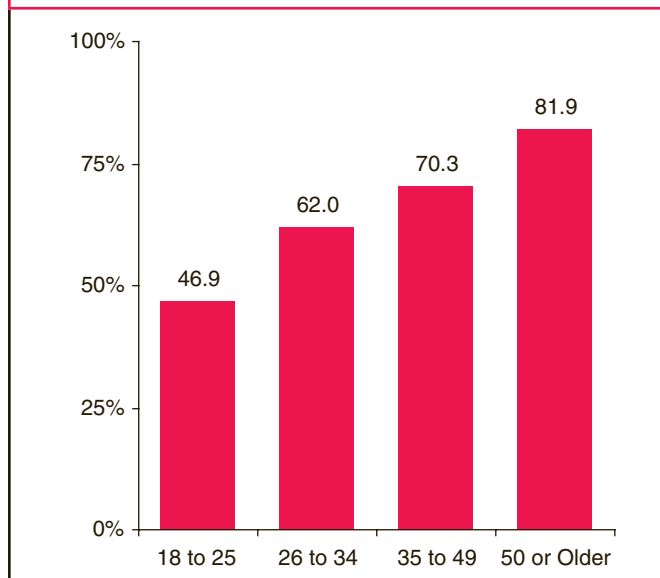
In Brief

- In 2005 and 2006, an annual average of 67.4 percent of adults aged 18 or older who experienced a past year major depressive episode (MDE) received treatment for depression in the past year, i.e., saw or talked to a medical doctor or other professional about depression and/or used prescription medication for depression
- Among adults aged 18 or older with past year MDE who received treatment for depression in the past year, 69.4 percent reported both talking to a professional and using medication, 23.8 percent reported talking to a professional but not using medication, and 6.7 percent reported using medication but not talking to a professional
- Among adults aged 18 or older with a past year MDE who talked with a professional as treatment for depression, those who also used medication were more likely than those who did not also use medication to report that talking to a professional was extremely helpful or helped a lot (43.2 vs. 33.0 percent)

In 2005 and 2006, an annual average of 15.8 million adults aged 18 or older (7.3 percent) experienced a major depressive episode (MDE) in the past year.¹ Several treatments for depression are available, including various psychotherapeutic approaches and antidepressant medications, although many adults who experience an MDE do not receive any treatment for their symptoms.²

The National Survey on Drug Use and Health (NSDUH) asks persons aged 12 or older questions to assess lifetime and past year MDE. The survey defines MDE using the diagnostic criteria set forth in the 4th edition of the *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)*,³ which specifies a period of 2 weeks or longer in which there is either depressed mood or loss of interest or pleasure and at least four other symptoms that reflect a change in functioning, such as problems with sleep, eating, energy, concentration, and self-image.⁴ Respondents with MDE are asked about their experiences with treatment for depression during the past year. Treatment for depression is defined as seeing or talking to a medical doctor or other professional about depression or using prescription medication in the past year for depression. NSDUH also

Figure 1. Percentages of Past Year Treatment for Depression* among Persons Aged 18 or Older with Past Year Major Depressive Episode (MDE), by Age Group: 2005 and 2006



Source: SAMHSA, 2005 and 2006 NSDUHs.

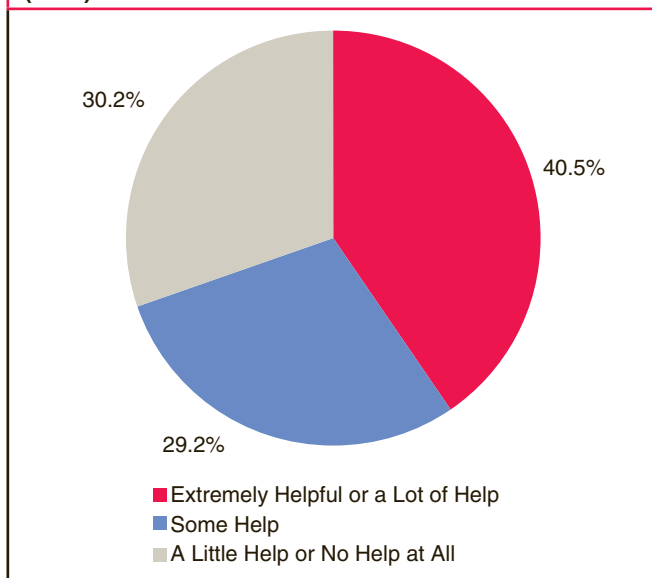
asks respondents who have received past year treatment of depression about their perceptions of the help they received from treatment.⁵

This issue of *The NSDUH Report* examines variation in the utilization of treatment for depression, types of treatment received, and satisfaction with that treatment among adults aged 18 or older who experienced at least one MDE in the past year. All findings presented in this report are based on combined 2005 and 2006 NSDUH data.

Treatment of MDE

In 2005 and 2006, an annual average of 67.4 percent of adults aged 18 or older who experienced a past year MDE received treatment for depression in the past year. Adult females who had experienced past year MDE were more likely than their male counterparts to have received past year treatment for depression (72.2 vs. 58.2 percent). Among adults who experienced past year MDE, those aged 50 or older were more likely than those in other age groups to have received treatment for depression in the past year (Figure 1). There was no difference by family income in the rates of past year treatment for depression among adults with past year MDE, but those who were college graduates were more likely than those with less education to have received treatment for depression in the past year (e.g., 72.3 percent for college graduates vs. 66.2 percent for high school graduates). Adults with past year MDE who lived in large metropolitan areas were less likely than their counterparts who lived in small metropolitan or non-

Figure 2. Percentages of Perceptions of Help Received from Seeing or Talking to a Medical Doctor or Other Professional about Depression among Persons Aged 18 or Older with Past Year Major Depressive Episode (MDE): 2005 and 2006**



Source: SAMHSA, 2005 and 2006 NSDUHs.

metropolitan areas to have received past year treatment for depression (64.9 vs. 68.9 and 71.4 percent, respectively).⁶

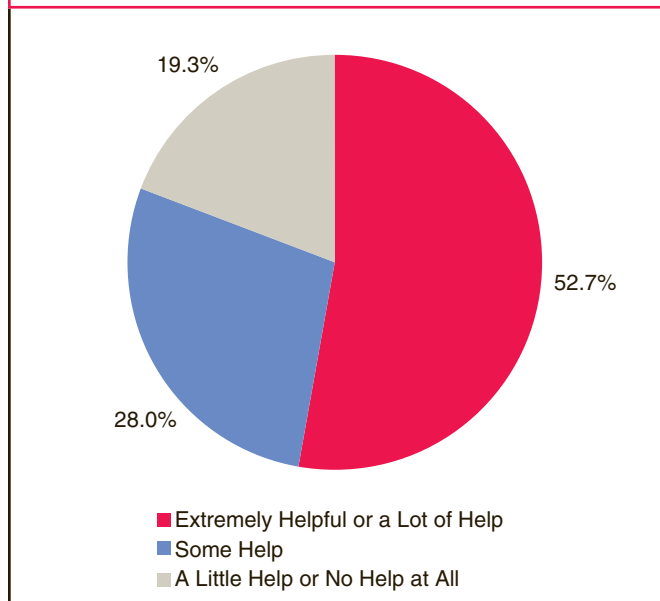
Type of Treatment Received for MDE

Among adults aged 18 or older who experienced past year MDE and who also received treatment for depression in the past year, 69.4 percent saw or talked to a medical doctor or other professional about depression and used prescription medication for depression, 23.8 percent saw or talked to a medical doctor or other professional about depression but did not take prescription medication for depression, and 6.7 percent took prescription medication for depression but did not see or talk with a medical doctor or other professional about depression in the past year.^{7,8}

Perceptions of MDE Treatment: Talking with a Doctor or Other Professional

Among adults aged 18 or older with past year MDE who saw or talked to a medical doctor or other professional in the past year about depression, 40.5 percent reported that this treatment was extremely helpful or helped a lot, 29.2 reported that this treatment offered some help, and 30.2 percent reported that this treatment was of little help or no help at all (Figure 2). Adult females with past year MDE who saw or talked to a medical doctor or other professional about depression were more likely than their male counterparts to report that this type of treatment was extremely helpful or helped a lot (44.0

Figure 3. Percentages of Perceptions of Help Received from Prescription Medication for Depression among Persons Aged 18 or Older with Past Year Major Depressive Episode (MDE): 2005 and 2006



Source: SAMHSA, 2005 and 2006 NSDUHs.

vs. 32.5 percent). There was no difference across age groups in the perceived helpfulness of talking to doctors or other professionals about depression.

Among adults with past year MDE who saw or talked to a medical doctor or other professional about depression in the past year, those who also took prescription medication for depression were more likely than those who did not take medication to report that talking with a doctor or other professional about depression was extremely helpful or helped a lot (43.2 vs. 33.0 percent).

Perceptions of MDE Treatment: Taking Prescription Medication

Among adults aged 18 or older with past year MDE who took prescription medication for depression in the past year, 52.7 percent reported that this treatment was extremely helpful or helped a lot, 28.0 reported that this treatment offered some help, and 19.3 percent reported that this treatment was of little help or no help at all (Figure 3). Adult females with past year MDE who took prescription medication for depression were more likely than their male counterparts to report that this type of treatment was extremely helpful or helped a lot (56.9 vs. 41.7 percent). Among adults with past year MDE who took prescription medication for depression in the past year, those aged 18 to 25 were less likely than those aged 35 to 49 or those aged 50 or older to report that prescription medication was extremely helpful or helped a lot (44.3 vs. 52.8 and 56.2 percent, respectively).

Among adults with past year MDE who took prescription medication for depression in the past year, those who also talked with a medical doctor or other professional about

their depression were more likely than their counterparts who did not talk with a doctor or other professional to report that prescription medication was extremely helpful or helped a lot (54.2 vs. 39.0 percent).

End Notes

- Office of Applied Studies. (2007). *Results from the 2006 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 07-4293, NSDUH Series H-32). Rockville, MD: Substance Abuse and Mental Health Services Administration.
- Wang, P. S., Lane, M., Olsson, M., Pincus, H. A., Wells, K. B., & Kessler, R. C. (2005). Twelve-month use of mental health services in the United States: Results from the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62, 629-640.
- American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
- In assessing MDE, no exclusions were made for MDE caused by medical illness, bereavement, or substance use disorders. Respondents with unknown MDE information were excluded from the analyses.
- Respondents who spoke to a medical doctor or other professionals about their depression in the past 12 months were asked: "During the past 12 months, how much has treatment or counseling helped you: not at all, a little, some, a lot, or extremely?" Respondents who took a prescription medicine that was prescribed for depression in the past 12 months were asked: "During the past 12 months, how much has this prescription medication helped you: not at all, a little, some, a lot, or extremely?" For these analyses, responses were grouped into the following categories: a little help or no help at all, some help, and extremely helpful or helped a lot. Respondents with unknown MDE treatment information were excluded from the analyses.
- Counties are classified as being in large metropolitan areas, small metropolitan areas, or non-metropolitan areas. Large metropolitan areas have a population of 1 million or more. Small metropolitan areas have a population of fewer than 1 million. Non-metropolitan areas are outside metropolitan statistical areas (MSAs), as defined by the Office of Management and Budget (OMB) in the June 6, 2003, *Revised Definitions of Metropolitan Statistical Areas, New Definitions of Micropolitan Statistical Areas and Combined Statistical Areas, and Guidance on Uses of the Statistical Definitions of These Areas* (OMB Bulletin No. 03-04, available at <http://www.whitehouse.gov/omb/bulletins/b03-04.html>). Also see the U.S. Census Bureau's June 12, 2003, *About Metropolitan and Micropolitan Statistical Areas* (last modified on June 7, 2005; available at <http://www.census.gov/population/www/estimates/aboutmetro.html>).
- As shown, 6.7 percent of adults with past year MDE who received treatment for depression in the past year indicated having taken prescription medication for depression in the past year without having spoken with a doctor or other health professional about depression during that same time period. Information to fully determine how these individuals could have taken prescription medication without seeing a doctor or health professional was not collected. However, it is very likely that this group includes persons who last saw or spoke to a doctor or other professional about depression more than a year ago yet took prescription medication for MDE during the past year.
- Percentages do not equal 100% due to rounding.

Figure Notes

- * Treatment for depression is defined as seeing or talking to a medical doctor or other health professional about depression or taking prescription medication for depression.
- ** Percentages do not equal 100% due to rounding.

Suggested Citation

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Research findings from the SAMHSA 2005 and 2006 National Surveys on Drug Use and Health (NSDUHs)

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The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). The 2005 and 2006 data used in this report are based on information obtained from 90,705 persons aged 18 or older. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.

The NSDUH Report is prepared by the Office of Applied Studies (OAS), SAMHSA, and by RTI International in Research Triangle Park, North Carolina. (RTI International is a trade name of Research Triangle Institute.)

Information on NSDUH used in compiling data for this issue is available in the following publications:

Office of Applied Studies. (2007). *Results from the 2006 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 07-4293, NSDUH Series H-32). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Office of Applied Studies. (2006). *Results from the 2005 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 06-4194, NSDUH Series H-30). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Also available online: <http://oas.samhsa.gov>.

Because of improvements and modifications to the 2002 NSDUH, estimates from the 2002 through 2006 surveys should not be compared with estimates from the 2001 or earlier versions of the survey to examine changes over time.



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