**Anti-depressants 'no more effective than counselling'**

By [Laura Donnelly](http://www.telegraph.co.uk/journalists/laura-donnelly/), Health Editor

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**New research published in the BMJ suggests that for moderate to severe depression, talking therapies can be just as effective as anti-depressants**

Anti-depressants are no more effective than counselling in tackling depression, a BMJ study has found.

The research comes amid soaring levels of prescribing of the drugs, with a doubling in the numbers doled out in the last decade.

Researchers examined 11 trials which compared modern antidepressants such as Prozac with psychological approaches, usually involving cognitive behavioural therapy (CBT).

The study found no statistical difference between drugs and therapy when it came to their effectiveness for moderate to severe depression.

The UK now has the seventh highest prescribing rate for antidepressants in the Western world, with around four million Britons taking them each year - twice as many as a decade ago.

Mental health charities have raised concerns that the drugs are often doled out because they are cheaper and there are long waits for other help, such as counselling.

Last year a report found that one in 10 patients seeking talking therapies waits more than a year before their needs are even assessed.

Guidance from the National Institute of Health and Care Excellence says those with moderate to severe depression should be offered a combination of medication and counselling, with account taken of a patient’s preferences.

Researchers led by Danube University analysed the results of 11 randomised controlled trials, involving more than 1,500 patients.

Some were on modern antidepressants – known as selective serotonin reuptake inhibitors - while others were having regular counselling sessions.

Overall, there was an improvement of around 45 per cent in depression scores among patients in both groups, the research found.

Last year there were 57.1 million antidepressant medicines dispensed in England – almost twice as many as in 2004.

Researchers said many patients might prefer psychological treatments, but end up taking antidepressants because of limited access to counselling, where there are often long waiting lists

Psychiatrists said the findings also suggested there could be a case for teaching school pupils basic therapies and interventions such as mindfulness, in a bid to help prevent depression.

Prof Sir Simon Wessely, President of the Royal College of Psychiatrists said: “This confirms what many have been saying for some time.

“Both antidepressants and talking therapies such as CBT should be offered for patients with depressive illnesses.”

The Professor of Psychological Medicine, King’s College London’s Institute of Psychiatry, Psychology & Neuroscience said decisions were likely to come down to patient preference and the availability of counselling services.

“We should remember that it's not either/or here - the evidence repeatedly shows that the best outcomes comes from both together. If I were to develop depression I would want both antidepressants and talking therapies,” he said.

Prof Shirley Reynolds, director, Charlie Waller Institute at the University of Reading, said: “This research is important because it suggests that, when possible, patients should be given the opportunity to choose what treatment they would prefer.”

Rachel Boyd, information manager for charity Mind, said other studies had found that people who were given an informed choice of treatment options were far more likely to feel that therapy was effective.