

1.1.8.7. Antidepressants

Table 37: Summary of evidence: Antidepressants: Review Finding 1

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Information on the need for medication					

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Finding	Criteria	Rating	Overall assessment of confidence
3	Supplementary (i.e., in-depth) secondary analysis of narrative interviews (1 study); semi-structured interviews with thematic analysis (1 study) and semi-structured interviews with unspecified qualitative analysis (1 study)	Peoples' perception of their need for medication to maintain a normal life appeared to influence their treatment initiation as well as their potential discontinuation at a later stage, with some viewing antidepressants as essential but most experiencing great uncertainty.	Limitations	Moderate concerns about methodological limitations ^a	MODERATE
			Coherence	Very minor concerns about coherence ^b	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

(a) Three studies with very minor to moderate issues; limitations due to the potential influence of the researchers on the findings not being discussed in two studies ^{22, 120}, very minor concerns over potential bias in recruitment with participants in one study having already been selected for a different project ²², moderate concerns due to issues with data richness with themes mostly supported by limited information and single quotes in one study ¹²⁰, moderate concerns due to the lack of sufficient detail on the data collection method and analysis in one study ²⁷⁸

(b) Very minor concerns about coherence due to not all people across studies experiencing the same uncertainty towards their need for medication.

Table 38: Summary of evidence: Antidepressants: Review Finding 2

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Finding	Criteria	Rating	Overall assessment of confidence
Information about what to expect from the medicine					
6	Supplementary (i.e., in-depth) secondary analysis of narrative	The absence or provision of insufficient info on their condition and medication from their doctor	Limitations	Minor concerns about methodological limitations ^a	HIGH

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
	interviews (1 study); semi-structured interviews with thematic analysis (1 study), semi-structured interviews with unspecified qualitative analysis (1 study), qualitative interviews with grounded theory analysis (1 study) and focus groups with thematic analysis (2 studies)	before treatment initiation or changes to medication, caused dissatisfaction with prescribed medicines due to unrealistic expectations and often implicated their relationship with their doctor or caused reluctance to start medication, often dealt by pharmacists through the provision of information about how the medication works and the psychological causes of depression.	Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

(a) Four studies with very minor to moderate issues and two studies with no significant limitations^{21, 152}; methodological limitations due to the potential influence of the researchers on the findings not being discussed in two studies^{22, 328}, very minor concerns over potential bias in recruitment with participants in one study having already been selected for a different project²², moderate concerns due to the lack of sufficient detail on the data collection method and analysis in one study²⁷⁸ and due to concerns over recruitment (as participants contacted the researchers if they wanted to take part, hence being potentially more motivated to give stronger or more negative views) and lack of detail or rigour of analysis in one study⁴⁵²

Table 39: Summary of evidence: Antidepressants: Review Finding 3

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Side-effects & long-term adverse effects					
7	Supplementary (i.e., in-depth) secondary analysis of	People were worried about the potential side-effects, the dangers of being on antidepressants long-term while	Limitations	Moderate concerns about methodological limitations ^a	HIGH ^c

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
	narrative interviews (1 study); Semi-structured interviews with thematic analysis (2 studies); Focus groups and thematic analysis (2 studies); Semi-structured interviews and unspecified qualitative analysis (1 study); Content analysis of free text comments from consumer reports (1 study)	experiencing unexpected adverse effects amplified their dissatisfaction with health-professionals or even led to discontinuation or withdrawal; pharmacists reflected on the importance of being aware that side-effects commonly occur before therapeutic effects, while people reflected on how early awareness could facilitate coping.	Coherence	Very minor concerns about coherence ^b	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

- (a) Six studies with very minor to moderate issues and one study with no issues¹⁵²; methodological limitations due to the potential influence of the researchers on the findings not being discussed in two studies^{22, 328}, very minor concerns over potential bias in recruitment in one study with participants having already been selected for a different project²², moderate concerns due to the lack of sufficient detail on the data collection method and analysis in one study²⁷⁸ and due to methodological details being unclear in one study²⁸⁷, moderate concerns due to the potential impact of the researcher on the findings not being explored and issues with data richness with themes mostly supported by limited information and single quotes¹²⁰ and due to concerns over the design and data collection (retrospective analysis of independently submitted free text feedback from consumers) of one study where the design was dictated by the data/consumer feedback process, results were reported interspersed with references and insights from other studies, making it unclear what conclusions were based on this study alone)⁴⁵⁶
- (b) Very minor concerns about coherence with some contradictory information about the extent to which side-effects should be emphasised from the start between pharmacists and people taking antidepressants but the vast majority of information clearly indicating its importance.
- (c) Overall assessment of confidence was high due to the wealth of information strengthening or confidence in the finding despite the methodological limitations of the individual studies.

Table 40: Summary of evidence: Antidepressants: Review Finding 4

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Expected length of treatment at the start					
3	Thematic analysis of interviews (combined analysis of three qualitative studies, all conducted by the authors (1 study); Semi-structured interviews with thematic analysis (1 study); Semi-structured interviews and unspecified qualitative analysis (1 study)	People beginning to take antidepressants had concerns over the length of their treatment which often remained unaddressed, while being aware of the limited duration and temporary nature of antidepressants from the beginning of prescribing appeared to facilitate tapering.	Limitations	Moderate concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Minor concerns about adequacy ^b	

- (a) Two studies with moderate issues and one study with no issues²¹; methodological limitations due to moderate concerns due to the lack of sufficient detail on the data collection method and analysis in one study²⁷⁸, concerns due to issues with data richness with themes mostly supported by limited information and single quotes in one study¹²⁰
- (b) Minor concerns over adequacy with the theme emerging from three studies one of which contributed particularly limited information to the theme²¹ and due to the concerns over data richness in one study¹²⁰

Table 41: Summary of evidence: Antidepressants: Review Finding 5

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Time lag between treatment initiation and benefits					
3	Qualitative interviews with grounded theory analysis (1 study); thematic analysis of narrative interviews (combined analysis of three qualitative studies) (1 study); focus groups with thematic analysis (1 study)	People are often unsure about how long it takes for antidepressants to take effect considering raising their own dosage, experimenting with benzodiazepines or other alternatives when experiencing disappointment in the effects of their medicine, while pharmacists reported that information on that during the first weeks is important as it can be difficult to persevere as expected positive outcomes are often preceded by side-effects.	Limitations	Minor concerns about methodological limitations ^a	HIGH
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

(a) One study with moderate issues and two studies with no serious issues^{21,152}; methodological limitations due to concerns over participant recruitment as participants contacted the researchers if they wanted to take part, hence being potentially more motivated to give stronger or more negative views and lack of detail or rigour of analysis⁴⁵²

Table 42: Summary of evidence: Antidepressants: Review Finding 6

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
The benefits and positive aspects of medication					
2	Focus groups with thematic analysis (2 studies)	As people can be reluctant towards starting their medication due to concerns over potential side-effects or social stigma associated with the medicine, pharmacists consider it is important to provide information on the benefits of treatment in the beginning, focusing on the positive aspects rather than the long-term negative aspects people may experience, while patients wish to be informed both about the benefits as well as the risks.	Limitations	Very minor concerns about methodological limitations ^a	MODERATE
			Coherence	Moderate concerns about coherence ^b	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

(a) One study with very minor issues and one study with no issues¹⁵²; methodological limitations due to the potential influence of the researcher on the findings not being discussed ³²⁸

(b) Moderate concerns about coherence with pharmacists reflecting on the importance of focusing on the benefits rather than the potential risks of medication at the start of treatment while patients wishing to be informed about both.

Table 43: Summary of evidence: Antidepressants: Review Finding 7

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
The consequences of stopping					
3	Semi-structured interviews with thematic analysis (2 studies); Qualitative interviews with grounded theory analysis (1 study)	People taking antidepressants wish to be informed about the potential consequences of stopping the medicine, as fears surrounding potential consequences and the possibility of relapse were often a barrier to discontinuation.	Limitations	Moderate concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

(a) Three studies with minor to moderate issues; moderate limitations due to concerns over participant recruitment (as participants contacted the researchers if they wanted to take part, hence being potentially more motivated to give stronger or more negative views) and lack of detail or rigour of analysis in one study⁴⁵², minor concerns over participant recruitment in one study due to participants only recruited from one group practice within one primary care trust ²²⁹, moderate concerns over one study due to issues with data richness with themes mostly supported by limited information and single quotes¹²⁰.

Table 44: Summary of evidence: Antidepressants: Review Finding 8

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Internet resources					
2	Thematic analysis of three qualitative studies (all conducted by the authors) (1 study); Focus groups with thematic analysis (1 study)	The internet facilitated peoples' access to information about their prescribed medicine and was often used to complement the information received by health-professionals, although some were concerned over the reliability of the information available online or preferred face-to-face communication, books or telephone services.	Limitations	Very minor concerns about methodological limitations ^a	MODERATE
			Coherence	Moderate concerns about coherence ^b	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

(a) One study with very minor issues and one study with no issues²¹; methodological limitations due to the potential influence of the researcher on the findings not being discussed³²⁸ that were considered too minor to lower our confidence.

(b) Moderate concerns about coherence with some people questioning the reliability of the information found online or preferring face-to-face contact and different sources of information over the internet.

Table 45: Summary of evidence: Antidepressants: Review Finding 9

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Patient accounts and peer support					
3	Thematic analysis of three qualitative studies (all conducted by the authors) (1 study); Focus groups with thematic analysis (1 study); Qualitative interview with grounded theory analysis (1 study).	Reading about the experiences of others with drugs via internet forms, although potentially misleading, helped people better understand their own experience, while sharing one's own experiences with peers via the internet could be source of support.	Limitations	Minor concerns about methodological limitations ^a	MODERATE
			Coherence	Minor concerns about coherence ^b	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

- (a) Two studies with very minor to moderate issues and one study with no issues²¹; methodological limitations due to concerns over participant recruitment in one study, due to participants having contacted the researchers if they wanted to take part, hence being potentially more motivated to give stronger or more negative views and lack of detail or rigour of analysis⁴⁵², due to the potential influence of the researcher on the findings not being discussed in one study ³²⁸.
- (b) Minor concerns about coherence with some recognising that online forums via which patient accounts were accessed could contain inaccurate information and could be misleading.

Table 46: Summary of evidence: Antidepressants: Review Finding 10

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Finding	Criteria	Rating	Overall assessment of confidence
Information and support through medical consultations					
3	Thematic analysis of three qualitative studies (all conducted by the authors) (1 study); Focus groups with thematic analysis (1 study); Qualitative interview with grounded theory analysis (1 study).	Physicians were viewed by people taking antidepressants as the primary source of information and support and being given sufficient information during medical consultations was key for establishing a relationship with their health professional and in decision-making about taking antidepressants.	Limitations	Minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Minor concerns about adequacy ^b	

(a) Two studies with very minor to moderate issues and one study with no issues (Anderson 2015 ²¹); methodological limitations due to concerns over participant recruitment in one study, due to participants having contacted the researchers if they wanted to take part, hence being potentially more motivated to give stronger or more negative views and lack of detail or rigour of analysis⁴⁵², due to the potential influence of the researcher on the findings not being discussed in one study³²⁸.

(b) Minor concerns about adequacy with relatively limited information in three studies supporting the theme.

Table 47: Summary of evidence: Antidepressants: Review Finding 11

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Finding	Criteria	Rating	Overall assessment of confidence
Patient information leaflets					
3	Focus-groups with thematic analysis (2 studies); Semi-structured interviews and unspecified qualitative analysis.	Patient information leaflets, despite sometimes being viewed as insufficient or discouraging, can be a useful education tool for various stages of treatment both for people taking antidepressants and pharmacists supporting them and can overcome the barrier to information imposed by the limited consultation duration.	Limitations	Minor concerns about methodological limitations ^a	MODERATE
			Coherence	Minor concerns about coherence ^b	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

- (a) Two studies with very minor to moderate issues and one study with no issues¹⁵²; methodological limitations due to lack of sufficient detail over the data collection method and analysis in one study²⁷⁸, the potential influence of the researcher on the findings not being discussed in one study³²⁸.
- (b) Minor concerns about coherence with people taking antidepressants and pharmacists not always finding patient leaflets that helpful, although that appeared to be related to their content rather than patient leaflets as an information tool in general.

Table 48: Summary of evidence: Antidepressants: Review Finding 12

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Finding	Criteria	Rating	Overall assessment of confidence
Different means of communication					
1	Focus-groups with thematic analysis	Telephone services and email are mediums people are willing to use to get the information on antidepressants that they require, despite health professionals potentially being poorly equipped to respond to questions in this manner.	Limitations	Very minor concerns about methodological limitations ^a	VERY LOW
			Coherence	No concerns about coherence	
			Relevance	Minor concerns about relevance ^b	
			Adequacy	Serious about adequacy ^c	

- (a) One study with very minor issues; methodological limitations due to the potential influence of the researcher on the findings not being discussed ³²⁸ that were too minor to lower our confidence.
- (b) Minor concerns about relevance with the information emerging from a study conducted in 2009, ever since health professionals might have become better equipped to respond to patients via email
- (c) Serious concerns about adequacy with very limited information in one study supporting the theme.

Table 49: Summary of evidence: Antidepressants: Review Finding 13

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Finding	Criteria	Rating	Overall assessment of confidence
Type of information					
1	Focus-groups with thematic analysis	People taking antidepressants valued access to information that is the most up-to-date, comprehensive and evidence based.	Limitations	Very minor concerns about methodological limitations ^a	LOW
			Coherence	No concerns about coherence	
			Relevance	Moderate concerns about relevance ^b	
			Adequacy	Moderate concerns about adequacy ^c	

- (a) One study with very minor issues; methodological limitations due to the potential influence of the researcher on the findings not being discussed ³²⁸.
- (b) Moderate concerns about relevance with the theme emerging from a study examining the views of people who had access to the internet, whose perceptions may differ from people who do not have internet access or due the focus of the study (to assess how and why people use the Internet to access antidepressant information and the self-reported impact of information obtained online) that may overestimate peoples' need for information via the internet, not providing any evidence about the type of information people may value via other sources
- (c) Moderate concerns over adequacy, the theme emerging from only one study.

Table 50: Summary of evidence: Antidepressants: Review Finding 14

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Finding	Criteria	Rating	Overall assessment of confidence
Health-professional support with adherence & self-monitoring					
2	Focus-groups with thematic analysis (1 study); Semi-structured interviews with unspecified qualitative analysis (1 study)	People on antidepressant treatment often experienced adherence problems with pharmacists often undertaking the task of supporting them through the provision of advice and strategies to improve medication-taking behaviour, while support with self-monitoring from GPs was found helpful.	Limitations	Minor concerns about methodological limitations ^a	LOW
			Coherence	No concerns about coherence	
			Relevance	Very minor concerns about relevance ^b	
			Adequacy	Moderate concerns about adequacy ^c	

(a) One study with moderate issues and one study with no issues ¹⁵²; methodological limitations due to concerns over the lack of sufficient detail on the data collection method and the data analysis²⁷⁸.

(b) Very minor concerns over relevance with information in one study emerging from pharmacists rather than people prescribed antidepressants.

(c) Moderate concerns over adequacy with information on the need for professional support with adherence and self-monitoring, each emerging from one study.

Table 51: Summary of evidence: Antidepressants: Review Finding 15

Study design and sample size		Finding	Quality assessment		
Number of studies contributing to the finding	Design		Criteria	Rating	Overall assessment of confidence
Support with tapering and discontinuation					
4	Supplementary secondary analysis of narrative interviews (1 study); Narrative interviews with thematic analysis (1 study); Semi-structured interviews with thematic analysis (1 study); Qualitative interviews with grounded theory analysis (1 study)	People often wished to come off antidepressants but experienced difficulty doing so and a lack of information and guidance, while when that was given, it appeared to facilitate tapering.	Limitations	Moderate concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	No concerns about adequacy	

(a) Four studies with very minor to moderate issues; methodological limitations due to the potential influence of the researchers on the findings not being discussed in two studies ^{22, 120}, concerns over participant recruitment in three studies, due to participants contacted the researchers if they wanted to take part, hence being potentially more motivated to give stronger or more negative views in one study ⁴⁵², due to participants having already been selected for a different project in one study ²², due to participants only recruited from one group practice within one primary care trust ²²⁹ and due to a lack of detail or rigour of analysis ⁴⁵², issues with data richness with themes mostly supported by limited information and single quotes in one study ¹²⁰.

Table 52: Summary of evidence: Antidepressants: Review Finding 16

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Finding	Criteria	Rating	Overall assessment of confidence
Advocacy from health care professionals and mutual decision-making					
4	Supplementary secondary analysis of narrative interviews (1 study); Thematic analysis of 3 qualitative studies (all conducted by the authors) (1 study) Semi-structured interviews with thematic analysis (1 study); Semi-structured interviews with unspecified qualitative analysis (1 study)	Lack of acknowledgment of the patients' concerns and experiences as well as their part in decision making by clinicians and the ease with which they often prescribed antidepressants caused great dissatisfaction, while validation from clinicians could facilitate doctor-patient discussions and coping with the difficulties they experienced.	Limitations	Minor concerns about methodological limitations ^a	MODERATE
			Coherence	No concerns about coherence	
			Relevance	Very minor concerns about relevance ^b	
			Adequacy	No concerns about adequacy	

- (a) Three studies with very minor to moderate issues and one study with no issues²¹; limitations due some methodological details being unclear in one study²⁸⁷, lack of detail over data collection method and analysis in one study²⁷⁸, the potential influence of the researcher on the findings no being discussed in one study and very minor concerns over potential bias in recruitment with participants having already been selected for a different project²²
- (b) Very minor concerns over relevance due to the population of one contributing study being very narrow (n=10) and homogenous and hence of possibly limited relevance to the overall review population²⁸⁷

Table 53: Summary of evidence: Antidepressants: Review Finding 17

Study design and sample size			Quality assessment		
Number of studies contributing to the finding	Design	Finding	Criteria	Rating	Overall assessment of confidence
Relationship with clinician and continuity of care					
2	Semi-structured interviews with unspecified qualitative analysis (1 study); Content analysis of free text comments from consumer reports (1 study)	Developing a relationship with their clinician early on and being seen by the same person on subsequent visits was valued by people taking antidepressants, although some experienced lack of treatment follow-ups and of doctor-patient communication at treatment renewals.	Limitations	Moderate concerns about methodological limitations ^a	LOW
			Coherence	No concerns about coherence	
			Relevance	No concerns about relevance	
			Adequacy	Moderate concerns about adequacy	

(a) Two studies with moderate to serious issues; methodological limitations due to concerns over the lack of sufficient detail on the data collection method and data analysis in one study ²⁷⁸, due to concerns over the design and data collection (retrospective analysis of independently submitted free text feedback from consumers) of one study where the design was dictated by the data/consumer feedback process, results were reported interspersed with references and insights from other studies, making it unclear what conclusions were based on this study alone) ⁴⁵⁶

Moderate concerns over adequacy the theme supported by information from two studies.