Editorial

It has been an inspiration to have the opportunity of editing this focus issue on depression. Not only have the accounts of recent advances provided tantalising indications of how the effective management of depression might change radically in the near future, the contributions from people with the disorder have demonstrated the extraordinary determination of human courage that can be shown in overcoming a condition to which, sadly, many still succumb.

The growth of genetics is offering the promise of individually-tailored treatment. The importance of the interaction between genetics and environment is becoming more and more evident. While it is obvious that biological factors can affect an individual's psychosocial status, psychosocial factors can also affect biological states relevant to depression, through neurochemical and epigenetic mechanisms. The observation that antidepressant treatment might affect brain-derived neurotrophic factor (BDNF) implies that early effective treatment of depression might prevent or even reverse some of the cognitive and structural brain changes associated with this condition.

Depression is a very common condition with some prospective studies suggesting a lifetime prevalence of up to 40%. It can have a major effect on quality of life and even on life itself; there is evidence for the presence of a major depressive disorder in 20% to 35% of deaths by suicide. This implies that better identification and treatment of depression might decrease the suicide rate by up to one third. Because many patients who commit suicide consult primary care but not secondary care in the period leading up to their death, the importance of the role of the general practitioner cannot be overemphasised. In most cases, depression is a treatable condition. The combination of cognitive behavioural therapy and antidepressant medication can be very effective in a high proportion of individuals. The accessibility and widespread use of the internet means that computer-based CBT can be made available to a much broader range of people than was previously possible. Indeed, the internet also opens up ways not only to assess mental health, but also to deliver many forms of psychiatric treatments remotely.

One of the recent advances has been to identify a group of people with antidepressant-resistant depression in whom the condition is strongly linked to inflammation. This raises the possibility that those patients who have not responded to antidepressant medication might respond favourably to suitable anti-inflammatory treatments. Another exciting advance in treatment has been the use of ketamine, which can be effective in lifting depression within hours of treatment. The feasibility of implementing ketamine treatment in routine practice has yet to be determined but it offers further hope to those with more challenging depression.

Neurostimulation offers another totally different mode of treatment, that may be used as an alternative to ECT which, despite its effectiveness, unfortunately continues to have associated stigma. There are promising results from non-invasive stimulation treatments, which include repetitive transcranial magnetic stimulation (rTMS) and transcranial direct current stimulation (tDCS). There are also promising results from vagus nerve stimulation and deep brain stimulation for the few refractory cases in whom more invasive treatment methods might be justifiable.

All these advances leave us in no doubt about the fact that it is an exciting time in the management of depression, with several potential new treatments. However, the importance of the humane relationship should never be underestimated. This is true for all the interactions that the person with depression may have: not only with professionals such as the general practitioner, the nurse or the psychiatrist but also in the social settings of home, family and work or study. While all the advances covered in the various papers in this focus issue have been both impressive and encouraging, the greatest inspiration comes from the simple, honest accounts of people

with depression who have not allowed the condition to defeat them and whose courage provides a role model for us all.

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