

Pub	Year	Title	Design	Country	Setting	Population	Intervention	Comparator	Outcomes	Notes
204470	June 2011	Efficacy of the sequential integration of psychotherapy and pharmacotherapy in major depressive disorder: a preliminary meta-analysis	2011	Meta-analysis	Italy					The meta-analysis was designed to evaluate the efficacy of the sequential integration of psychotherapy and pharmacotherapy in reducing the risk of relapse and recurrence in MDD.
2512136	October 2014	Effect of cognitive therapy with antidepressant medication vs antidepressant alone on the rate of recovery in major depressive disorder: a randomized clinical trial	2014	Randomized clinical trial	United States	Outpatient				To determine the effects of combining cognitive therapy (CT) with antidepressant medication on remission and recovery in major depressive disorder (MDD). A total of 432 adult outpatients with chronic or recurrent MDD participated in a trial conducted in research clinics at 2 university medical centers in the United States. The patients were randomly assigned to ADM treatment alone or CT combined with ADM treatment. Treatment was continued for up to 42 months until recovery was achieved.
1902709	February 2000	Efficacy of nurse-led health care and peer support in augmenting treatment of depression in primary care	2000	Randomized controlled trial	United States	Primary care				To evaluate the efficacy of augmentation to antidepressant drug treatment with companion of usual care, health care, and health care peer support (HPCS) for patients with major depressive disorder.
1942935	February 2006	Long-term outcomes from the IMPACT randomized trial for depressed outpatients from primary care	2006	Randomized controlled trial	United States	Primary care				To determine the long-term effectiveness of collaborative care management for depression in a life.
1846824	May 2008	A meta-analysis of psychotherapy and medication in unipolar depression and dysthymia	2008	Meta-analysis						To examine the relative efficacy of psychotherapy and medication across types of depression.
2101197	September 2015	The effect of adding psychosocial therapy to antidepressant treatment in randomized clinical trials with meta-analysis and trial sequential analysis	2015	Systematic review and meta-analysis	Denmark					How many randomizing a total of 386 participants who all received antidepressants as co-intervention.
1051128	January 1999	Health Care Systems for Primary Care Patients with Persistent Symptoms of Depression	1999	Randomized controlled trial	United States	Primary care				To understand effectiveness of stepped collaborative care for primary care patients with persistent symptoms of depression.
1842419	October 2008	Population-Based Rates of Depression: Health Care Approaches to Improving Outcomes	2008	Systematic Review	United States	Primary care				To describe evidence-based quality improvement interventions that improve care systems that have been shown to be cost-effective trials to improve quality of care and outcomes of patients with depression.
1884406	October 2006	Cognitive behavioral analysis system of psychotherapy and brief supportive psychotherapy for augmentation of antidepressant response in chronic depression: the NEIGHBOR trial	2006	Randomized controlled trial	United States	Primary care				To determine the role of adjunctive psychotherapy in the treatment of chronic depressed patients who lack a complete response to an initial medication trial.
19792474	October 2006	Patient preference as a moderator of outcome for chronic forms of major depressive disorder: findings in the National Institute of Mental Health Treatment of Depression Collaborative Program	2006	Randomized controlled trial	United States	Primary care				To examine moderators of response to psychotherapy, medication, and combination treatment for chronic forms of major depressive disorder (MDD).
2544870	October 2014	Efficacy and acceptability of acute treatments for persistent depressive disorder: a network meta-analysis	2014	Meta-analysis	Germany					To synthesize the available evidence on the relative efficacy and acceptability of specific treatments for persistent depressive disorder.
2603138	November 2010	The Patient Health Questionnaire Somatic Anxiety and Depressive Symptom Scales: a systematic review	2010	Systematic Review	United States	Clinical				Determine efficient means for measuring and monitoring depression, anxiety and somatization.
1888477	November 1996	The role of the therapeutic alliance in psychotherapy and pharmacotherapy outcome: findings in the National Institute of Mental Health Treatment of Depression Collaborative Program	1996	Randomized controlled trial	United States	Primary care				The relationship between therapeutic alliance and treatment outcome was examined for depressed outpatients who received interpersonal psychotherapy, cognitive-behavior therapy, medication with or without psychotherapy, or medication with or without psychotherapy.
2507153	November 2015	Efficacy and cost-effectiveness of antidepressant treatment in patients with moderate to severe depression: a randomized controlled trial	2015	Randomized controlled trial	United Kingdom	Primary care				To see whether MECT will support to taper or discontinue antidepressant treatment (MECT) is superior to maintenance antidepressant treatment for prevention of depressive relapse or recurrence (PREVENT) a randomized controlled trial.
19727136	November 2011	Efficacy of Antidepressants in Dysthymia: A Meta-Analysis of Placebo-Controlled Randomized Trials	2011	Meta-analysis	United States					To determine the efficacy of antidepressants in dysthymic disorder and to compare antidepressant and placebo response rates between major depressive disorder (MDD) and dysthymic disorder.
1741411	July 2007	The impact of patient participation on adherence and clinical outcome in primary care of depression	2007	Observational study	United States	Primary care				To evaluate the impact of patient participation on these factors and to determine the variance of clinical outcomes as the primary outcome variable.
1626117	March 2005	A comparative trial of psychotherapy and pharmacotherapy for pure dysthymic patients	2005	Randomized controlled trial	United States	Primary care				To report outcomes of an acute randomized trial of 84 outpatients treated for 18 weeks with either interpersonal psychotherapy (IPT), brief supportive psychotherapy (BSP), sertraline, or sertraline plus IPT.
2411505	March 2014	Moderators of remission with interpersonal counseling or drug treatment in primary care patients with depression: a randomized controlled trial	2014	Randomized controlled trial	Australia	Primary care				Multiple depression disorders being very common there has been little research to guide primary care physicians on the choice of treatment or on how to monitor depression.
2607138	October 2016	Screening for Depression in Adults: An Updated Systematic Evidence Review for the U.S. Preventive Services Task Force	2016	Systematic Review	United States					To systematically review evidence to update the benefits and harms of screening for depression in general and other adults, and also consider evidence for benefits and harms in pregnant and postpartum women, which was not previously reviewed, and the U.S. Preventive Services Task Force in updating its recommendation on this topic.
2005043	October 2011	Optimal duration of combined psychotherapy and pharmacotherapy for patients with moderate and severe depression: a meta-analysis	2011	Meta-analysis	Denmark					To investigate the most effective duration of combined psychotherapy and pharmacotherapy for patients with moderate and severe depression in depressive patients as compared to pharmacotherapy alone.
2085484	October 2013	The clinical effectiveness of evidence-based interventions for depression: a pragmatic trial in routine practice	2013	Randomized controlled trial	Netherlands	Primary care				To examine the acute phase effectiveness of cognitive therapy (CT) and interpersonal psychotherapy (IPT) in a naturalistic setting allowing patients their choice of treatment.
21802418	May 2011	The effect of internet-based cognitive therapy for prevention of relapse in recurrent major depressive disorder: a systematic review and meta-analysis	2011	Systematic review and meta-analysis	Denmark					By means of a meta-analysis to evaluate the effect of MECT for relapse or recurrence in recurrent major depressive disorder with recurrent MDD in remission.
1940486	May 2003	The 16-item quick inventory of depressive symptomatology (QIDS) clinician rating (QIDS-C) and self-report (QIDS-SR) in a psychiatric inpatient population with chronic major depressive disorder	2003	Observational study	United States	Primary care				To evaluate and compare the psychometric properties of the QIDS-SR16 in relation to the QIDS-C16 and the 24-item Hamilton Rating Scale for Depression (HAM-D24).
21193525	April 2010	Antidepressant monotherapy versus Sequential Pharmacotherapy and Mindfulness-Based Cognitive Therapy or Active Release Psychotherapy in Recurrent Depression	2010	Randomized clinical trial	Canada	Outpatient mental health				To compare rates of relapse in remitted depressed patients receiving MECT against maintenance antidepressant monotherapy, the current standard of care.

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1976/96	Simon 2004	Cost effectiveness of a collaborative care program for primary care patients with persistent depression	2007	United States	Primary care	Randomized controlled trial	Primary care patients with persistent depression	Collaborative care	Usual care	Cost effectiveness of collaborative care compared to usual care for patients with persistent depression	Collaborative care was more cost-effective than usual care for patients with persistent depression. The incremental cost-effectiveness ratio was \$24,444 per quality-adjusted life year (QALY) gained.
10889/03	Simon 2000	Randomized trial of monitoring, feedback, and management of care by telephone to improve treatment of depression in primary care	2000	United States	Primary care clinics in Seattle	Randomized controlled trial	Primary care patients with major depressive disorder	Telephone-based care management	Usual care	Effectiveness of telephone-based care management compared to usual care for patients with major depressive disorder	Telephone-based care management was more effective than usual care for patients with major depressive disorder. The incremental cost-effectiveness ratio was \$24,444 per QALY gained.
12870/20	Spitzer 2013	Psychotherapy, antidepressants, and their combination for chronic major depressive disorder: a systematic review	2013	Netherlands	Systematic review	Systematic review	Patients with chronic major depressive disorder	Psychotherapy, antidepressants, or combination	Comparison	Effectiveness of psychotherapy, antidepressants, and their combination for chronic major depressive disorder	Psychotherapy and combination treatment were more effective than antidepressants alone for chronic major depressive disorder.
2004/330	Werner 2014	Remission rates after psychotherapy for depression - stable long-term effects? A meta-analysis	2014	Germany	Meta-analysis	Meta-analysis	Patients with major depressive disorder	Psychotherapy	Comparison	Remission rates after psychotherapy for depression - stable long-term effects? A meta-analysis	Remission rates after psychotherapy for depression were stable over a long-term follow-up period.
1939/08	Wong 2008	Evaluation of outcomes with Measurement-Based Care in STAPC implications for Clinical Practice	2008	United States	Observational study	Observational study	Patients with major depressive disorder	Measurement-based care	Comparison	Evaluation of outcomes with Measurement-Based Care in STAPC implications for Clinical Practice	Measurement-based care was associated with improved outcomes for patients with major depressive disorder.
12472/05	Ullrich 2002	Collaborative Care Management of Life-Time Depression in the Primary Care Setting	2002	United States	Primary care clinic	Randomized controlled trial	Patients with major depressive disorder	Collaborative care management	Usual care	Effectiveness of collaborative care management compared to usual care for patients with major depressive disorder	Collaborative care management was more effective than usual care for patients with major depressive disorder.
11171/04	Wolfe 2013	The effectiveness of individualized psychotherapy as a treatment for major depressive disorder in adult outpatients: a systematic review	2013	Netherlands	Systematic review	Systematic review	Patients with major depressive disorder	Individualized psychotherapy	Comparison	The effectiveness of individualized psychotherapy as a treatment for major depressive disorder in adult outpatients: a systematic review	Individualized psychotherapy was more effective than usual care for patients with major depressive disorder.
18008/03	Wong 2003	Psychiatric Disorders in Pregnant and Postpartum Women in the United States	2003	United States	National survey	National survey	Pregnant and postpartum women	Psychiatric disorders	Comparison	Psychiatric Disorders in Pregnant and Postpartum Women in the United States	Psychiatric disorders are common in pregnant and postpartum women.
12923/06	Wong 2006	Selective serotonin reuptake inhibitors and tricyclic antidepressants in the acute treatment of chronic depression and dysthymia: A systematic review and meta-analysis	2006	Germany	Systematic review and meta-analysis	Systematic review and meta-analysis	Patients with chronic depression and dysthymia	SSRIs and TCAs	Comparison	Selective serotonin reuptake inhibitors and tricyclic antidepressants in the acute treatment of chronic depression and dysthymia: A systematic review and meta-analysis	SSRIs and TCAs are effective for the acute treatment of chronic depression and dysthymia.
15174/01	Werner 2014	The Effectiveness of the Cognitive Behavioral Analysis System of Psychotherapy (CBASP) in the Treatment of Chronic Depression: A Randomized Controlled Trial	2014	Netherlands	Outpatient	Randomized controlled trial	Patients with chronic depression	CBASP	Comparison	The Effectiveness of the Cognitive Behavioral Analysis System of Psychotherapy (CBASP) in the Treatment of Chronic Depression: A Randomized Controlled Trial	CBASP was more effective than usual care for patients with chronic depression.
10703/03	Werner 2003	The management of depression during pregnancy: a report from the American Psychiatric Association and the American College of Obstetricians and Gynecologists	2003	United States	Guideline	Guideline	Pregnant women with depression	Management of depression during pregnancy	Comparison	The management of depression during pregnancy: a report from the American Psychiatric Association and the American College of Obstetricians and Gynecologists	Management of depression during pregnancy should be individualized and take into account the needs of both the patient and the fetus.