

# Algorithm For The Treatment Of Non-Psychotic Depression

Change of stage should only be after failure of adequate dose and length of treatment or intolerable side effects

No hx of antidepressant drug response or failure

Hx of antidepressant drug response or failure

Stage 1

**Mono drug therapy**  
 SSRI (Fluoxetine, Paroxetine, Citalopram, Sertraline)  
 Non-SSRI (Mirtazapine or Bupropion IR/SR)

Move to the next appropriate stage following the type of antidepressant response or failure

Stage 2

**Mono drug therapy**  
 Switch to another generic agent above

PCP consider referral to psychiatry

**Mono drug therapy**  
 Switch to another class  
 SNRI (Duloxetine, Venlafaxine XR)  
 Non-SSRI (Nefazodone or TCA)  
 Individual or group psychotherapy if not already begun

Stage 3

**Antidepressant Cost Comparisons (Annual acquisition cost)**

Stages 1 and 2	
Bupropion IR/SR, generic	\$
Citalopram, generic	\$
Fluoxetine, generic	\$
Mirtazapine, generic	\$
Paroxetine, generic	\$
Sertraline, generic	\$
Stages 3 –7 agents	
Amitriptyline, generic	\$
Clomipramine, generic	\$
Desipramine, generic	\$
Doxepin, generic	\$
Imipramine, generic	\$
Nortriptyline, generic	\$
Trazodone, generic	\$
Nefazodone, generic	\$\$
Phenelzine (Nardil)	\$\$
Duloxetine (Cymbalta)	\$\$\$
Venlafaxine XR (Effexor XR)	\$\$\$

Stage 4

**Complex combination approach**  
**Combination Drug Therapy**  
 SSRI + NEF    VLF + MRT  
 MRT + SSRI    SSRI + TCA  
 SSRI + BUP    SSRI + TRAZ  
 Individual or group psychotherapy

If fail stage 4 change combination of agents for stage 5

Stage 5

**Augmentation Drug Therapy**  
 Add lithium, stimulants, buspirone, or thyroid medication  
 Individual or group psychotherapy

Stage 6

Stage 7

ECT, MAOI (restricted to psychiatry) or change to combination not tried or add lamotrigine, atypical antipsychotic  
 Individual or group psychotherapy

# *Algorithm For The Treatment Of Non-Psychotic Depression*

Stage	Recommended Drugs
Stage 1 (SSRI)	<b>SSRIs (fluoxetine, citalopram, paroxetine and sertraline) and Non-SSRIs (bupropion IR/SR or mirtazapine) – 1<sup>st</sup> line agents for patients initiating therapy for depression</b> <b>Consider individual or group therapy</b>
Stage 2 (SSRI)	Switch to another generic agent if initial therapy secondary to SE failure (which has tried to be managed) or efficacy failure. Adequate trial at starting dose is 4 to 6 weeks. <b>Consider individual or group therapy</b>
Stage 3	If the patient fails two medications from the same class, consider switching to a different class <b>SSRIs: fluoxetine, citalopram, paroxetine, or sertraline</b> <b>Non-SSRIs: bupropion IR/SR, mirtazapine, nefazodone or TCA</b> <b>SNRI: duloxetine (Cymbalta) or venlafaxine XR (Effexor XR)</b> Plus <b>Individual or group therapy</b>
Stage 4	Try augmentation with <b>lithium, stimulant, thyroid T3 or T4, or buspirone</b> to current antidepressant or try with an antidepressant previously untried. Plus <b>Individual or group therapy</b>
Stage 5	Combination drug therapy – <b>SSRI + bupropion or nefazodone or mirtazapine or TCA or trazodone</b> Or <b>Venlafaxine + mirtazapine</b> Plus <b>Individual or group therapy</b>
Stage 6	Try augmentation with <b>lithium, stimulant, thyroid T3 or T4, or buspirone</b> to current antidepressant Plus <b>Individual or group therapy</b>
Stage 7	<b>ECT or MAOI (Phenelzine – restricted to psychiatry)</b> Change to an untried combination Add <b>lamotrigine</b> Add <b>atypical antipsychotic</b> Plus <b>Individual and/or group therapy</b>