

## Fact Sheet

## Mood Disorders

About 20.9 million American adults, or 9.5 percent of the population, have mood disorders, which include major depressive disorder; dysthymic disorder (a chronic, mild depression); and bipolar disorder (also called manic depression). Major depressive disorder is, by itself, the leading cause of disability among Americans age 15 – 44.

### Thirty Years Ago

- Depression and bipolar disorder weren't considered distinct brain illnesses, and distinct treatments for each illness did not exist.
- It wasn't known that mood disorders can increase a person's risk for heart disease, diabetes, and other medical diseases.
- Today's most commonly used type of antidepressant medications did not exist. Selective serotonin reuptake inhibitors (SSRIs) resulted from the work of the late Nobel Laureate and NIH researcher Julius Axelrod, who defined the action of brain chemicals (neurotransmitters) in mood disorders.

### Today

- With medication, psychotherapy, or combined treatment, most people with mood disorders can be effectively treated and resume productive lives.
- In addition to developing effective medications, NIH research has produced cognitive-behavioral interventions – therapies that identify harmful patterns of thoughts and behaviors and replace them with helpful ones – for depression, which studies show to be as effective as medications in some patients.
- Advanced brain imaging techniques are giving scientists a “window into the brain,” identifying specific circuits that are involved in mood disorders and yielding a new way to study the effectiveness of medical and behavioral treatments.
- NIH research on treatment cost-effectiveness has shown that providing treatment for depression makes good health and business sense; effective treatment for depression improves workplace productivity and reduces absenteeism.

- NIH is funding the largest and most comprehensive studies to date on depression and bipolar disorder, including the Treatment of Adolescent Depression Study, Sequenced Treatment Alternatives to Relieve Depression, and Systematic Treatment Enhancement Program for Bipolar Disorder. These studies aim to better understand how different treatment options affect people in real-world settings and how to best tailor treatment for improving individualized medical care.

### Tomorrow

- Years of basic research are now promising the first new generation of antidepressant medications in two decades, with a goal of relieving depression in hours, rather than weeks. Such fast acting medications could potentially treat patients at risk for suicide, the most severe consequence of depression, which continues to claim 30,000 lives each year (compared to 18,000 deaths from homicide).
- For the first time, discoveries in basic neuroscience are providing an opportunity to study biochemical indicators that can be used to track the onset and course of mood disorders. For example, NIH is planning a new series of studies that will focus on genes that may predict treatment response and thus could open the door for greater personalization of health care by identifying the individuals who will benefit most from specific treatments.
- Research on novel treatment approaches, such as telemedicine (providing services over satellite, Internet, or other remote connections) and collaborative or team-based care in medical care settings will improve the quality of care for people with mood disorders, including special populations, such as minorities; people in rural communities; and older people.