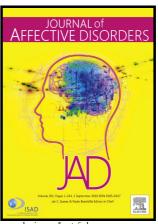
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The Ten-Year Course of Depression in Primary Care and Long-term Effects of Psychoeducation, Psychiatric Consultation and Cognitive Behavioral Therapy

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Abstract

Background

While the majority of depressed patients are treated in primary care, long-term follow-up data on the naturalistic course of depression and treatment effectiveness in this setting are scarce.

This study examined the ten-year course of depression in primary care patients who had participated in a randomized clinical trial aiming at enhancement of depression outcomes.

Methods

Of the original sample (n=267), 166 patients participated in the ten-year follow-up; missingness was random. Four treatments were compared: (1) Care As Usual (CAU; n=51); (2) a Psychoeducational Prevention program (PEP; n=68); (3) Psychiatric Consultation followed by PEP (PC+PEP; n=21); and (4) brief Cognitive Behavioral Therapy followed by PEP (CBT+PEP; n=26). During the first three years Composite International Diagnostic Interview (CIDI) based interviews were three-monthly applied, the seven years thereafter were assessed with a once applied CIDI and face-to-face life chart-based interview.

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