

Patients Taking Antidepressants Are Only Slightly More Likely to Improve Than Those Taking Placebos, Study Finds

Patients should discuss with their physicians the relatively small potential for benefit versus the risk of harm before starting or stopping antidepressants.

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[/EINPresswire.com/](https://www.einpresswire.com/) -- Patients taking antidepressants were only slightly more likely to improve than those taking non-drug placebos, according to a review of studies comparing antidepressants against placebos for depressed patients. The report adds to the growing concern that there are insufficient benefits to offset the risk of serious side effects when taking or discontinuing antidepressants.



Recent studies have shown little or no real benefit to patients from antidepressants over non-drug placebos. Patients should discuss any concerns about antidepressants with their health care provider.

Researchers led by Marc B. Stone of the FDA's Center for Drug Evaluation and Research combined the results of 232 randomized, controlled trials reported to the FDA from 1979 to 2016 that compared the effect of selective serotonin reuptake inhibitor (SSRI) antidepressants with placebos for patients with depression. Publishing their report recently in the *British Medical Journal*, the researchers found that a significant benefit from antidepressants over placebos was limited to just 15% of the patients.[1]

The placebo effect was found to be powerful. About two-thirds of depressed patients who were given placebos instead of antidepressants got better.

Other studies have also cast doubt on the benefit from antidepressants. A study earlier this year in *Drug and Therapeutics Bulletin* found no clinically significant difference in measures of depression symptoms between adults treated with antidepressants and those taking placebos, whether over a shorter or longer time frame and regardless of the depression severity of the

study participants. [2]

No convincing evidence of benefits from antidepressants was found in a 2019 systematic review of studies of antidepressants versus placebos. The study, published in *BMJ Open*, concluded: "The evidence does not support definitive conclusions regarding the benefits of antidepressants for depression in adults. It is unclear whether antidepressants are more efficacious than placebo." [3]

A 2017 study published in *BMC Psychiatry* not only found little benefit from SSRIs versus placebos, but also further concluded that because SSRIs significantly increase the risk of both serious and nonserious adverse events, "the harmful effects of SSRIs versus placebo for major depressive disorder seem to outweigh any potentially small beneficial effects." [4]

A similar conclusion was reached in a review of the medical literature published in *Frontiers in Psychiatry* in 2017, finding that "the efficacy of antidepressants is systematically overestimated, and harm is systematically underestimated," so that "antidepressants are largely ineffective and potentially harmful." [5]

These studies matter because some 45 million Americans are currently prescribed antidepressants for depression, including more than 2 million children and teens under the age of 18. Despite an increasing number of patients taking antidepressants, rates of depression and suicide have continued to rise. The 32% increase in the number of antidepressant prescriptions in the U.S. from 2006 to 2020 parallels the 35% increase in the nation's suicides over the same period.



The National Institute of Mental Health advises anyone taking an antidepressant who experiences worsening depression or thoughts about suicide or dying, which could be side effects of the drug, to call their doctor right away.



Individuals experiencing depression can ask their physician for a complete physical exam and lab tests to look for any physical conditions that could be causing the depression.

Worsening depression and suicidal thoughts and actions are known side effects of antidepressants. The National Institute of Mental Health website warns that anyone taking antidepressants who experiences “thoughts about suicide or dying, attempts to commit suicide, [or] new or worsening depression” should call their doctor right away.

The rising suicide rate is particularly noticeable among youth. A 2020 study concluded that “recent data suggest that increasing antidepressant prescriptions are related to more youth suicide attempts and more completed suicides among American children and adolescents.” [6]

Still another study in 2016 found that children and teens taking antidepressants doubled their risk of suicide, while the benefit from the drugs “seems to be below what is clinically relevant.” [7]

Other common side effects of antidepressants, such as the insomnia and sexual problems the drugs can cause, may also lead to depression. Worse still, the sexual performance problem can persist even after antidepressants are discontinued, becoming a medical condition called post-SSRI sexual dysfunction.

Those taking antidepressants also face the risk of withdrawal symptoms when they reduce the dose or discontinue the drugs, symptoms that can be serious and long-lasting. A 2019 study found that more than 56% of people who attempt to come off antidepressants experience withdrawal effects, with nearly half (46%) of them rating those effects as “severe.” [8] A 2018 study found that the average duration of withdrawal symptoms when discontinuing SSRI antidepressants was 90.5 weeks and for SNRI (serotonin-norepinephrine reuptake inhibitor) antidepressants, 50.8 weeks. [9]

The [Citizens Commission on Human Rights](#) (CCHR) continues to raise awareness of the lack of effectiveness and the harms of antidepressants and other psychiatric drugs, based on current research, so that consumers can make fully informed decisions with their physicians about taking or discontinuing the drugs. CCHR recommends that individuals experiencing depression should start by ask their physician for a complete physical examination with lab tests to



discover any underlying physical conditions that could be causing the mental symptom of depression. Prescription drugs besides antidepressants have the side effect of depression, so patients can also ask their physician about them.

WARNING: Anyone wishing to discontinue or change the dose of an antidepressant or other behavioral drug is cautioned to do so only under the supervision of a physician because of potentially dangerous withdrawal symptoms.

CCHR was co-founded in 1969 by members of the Church of Scientology and the late psychiatrist and humanitarian Thomas Szasz, M.D., recognized by many academics as modern psychiatry's most authoritative critic, to eradicate abuses and restore human rights and dignity to the field of mental health. CCHR has been instrumental in obtaining 228 laws against psychiatric abuses and violations of human rights worldwide.

The CCHR National Affairs Office in Washington, DC, has advocated for mental health rights and protections at the state and federal level. The CCHR traveling exhibit, which has toured 441 major cities worldwide and educated over 800,000 people on the history to the present day of abusive psychiatric practices, has been displayed at the Congressional Black Caucus Foundation Annual Legislative Conference in Washington, DC, and at other locations.

[1] <https://www.bmj.com/content/bmj/378/bmj-2021-067606.full.pdf>

[2] <https://dtb.bmj.com/content/dtb/60/1/7.full.pdf>

[3] <https://pubmed.ncbi.nlm.nih.gov/31248914>

[4] <https://bmcp psychiatry.biomedcentral.com/track/pdf/10.1186/s12888-016-1173-2.pdf>

[5] <https://pubmed.ncbi.nlm.nih.gov/29270136>

[6] <https://pubmed.ncbi.nlm.nih.gov/32116839/>

[7] <https://www.bmj.com/content/352/bmj.i65.long>

[8] <https://www.sciencedirect.com/science/article/pii/S0306460318308347?via%3DIhub>

[9] <https://pubmed.ncbi.nlm.nih.gov/29758951/>

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