**NICE publishes new depression guideline**

NICE has this week published its new clinical guideline for depression in adults, following a guideline development process that lasted seven years and resulted in an unprecedented three consultations. The delay follows the persistence of our coalition of stakeholders, that BACP join forces with more than forty other mental health organisations to call on NICE to address major methodological flaws that underpinned previous drafts of the guideline.

Never has a draft treatment guideline in the UK received so much scrutiny and detailed attention, and the final version of the guideline has dramatically improved as a consequence. There is now a strong focus on personalised care and a significant emphasis on the importance of service user choice and shared decision-making – all of which were notably absent from previous drafts. These changes should result in significant improvements in care for people with depression as the guideline is implemented.

Our coalition of stakeholders has brought together mental health organisations from across the UK, representing service users; professionals from psychiatry, psychology, social work, counselling and psychotherapy; research methodologists; GPs; pharmacists; nurses; and mental health charities and survivor-led organisations. Together we have argued strongly that the draft guideline wasn’t fit for purpose and that the resulting treatment recommendations would be misleading and impede good care and patient choice. The campaign received support from over 100 MPs and Peers from across all the major parties.

While NICE has not addressed all the key methodological issues [we have raised](https://cdn.ymaws.com/www.psychotherapyresearch.org/resource/resmgr/uk-spr/spruk_nice_01_2022.pdf), the significant efforts made by the Guideline Committee and the substantial additional work that has been carried out in response to our concerns and critique needs to be acknowledged. We hope NICE will learn from this process as future mental health guidelines are developed.

In order to deliver the recommendations in the new guideline, it is important that both the Government and NHS review capacity within the existing mental health workforce and commit to investing in the training and recruitment needed to provide adequate care for people with depression.

It is also important to stress that, despite the progress we have seen in this guideline, important methodological issues remain unaddressed – such as the unvalidated binary categorisation of depression and the failure to meaningfully use real-world clinical outcomes to inform treatment recommendations. Our coalition will continue to work together to encourage NICE to adapt its guideline development process – to ensure the growing number of people seeking mental health care are supported to find the right treatment for them.

The coalition has been spearheaded by Dr Felicitas Rost, former President of the Society for Psychotherapy Research UK. She said: ‘We welcome the enormous efforts made by NICE to engage with our coalition and the substantial additional work that has been carried out in response to our concerns. We now have a much-improved guideline with a far greater emphasis on personalised care, service user choice and shared decision-making.

‘There are still, however, important methodological issues with this guideline that need to be addressed in the future, some of which are relevant to all mental health treatment guidelines. We look forward to working with NICE to address these, to ensure that mental health care improves as demand continues to rise.'

Sir Norman Lamb, former Health Minister, who, as an MP, led the parliamentary support for the coalition, said: 'I am pleased to see a depression guideline that puts emphasis on personalised care, providing a genuine choice of treatments, and encourages clinicians to think more carefully before prescribing medication. These changes will undoubtedly have a positive impact on care for many people with depression.

'It is vital that NICE learns lessons from this process and engages closely with organisations from across the mental health sector in developing future guidelines. The number of people needing mental health support is sadly growing quickly, and it is vital that clinical guidelines best reflect the needs and experiences of those they are designed to help.'

Matthew Smith-Lilley, Policy and Engagement Lead for Mental Health for the British Association for Counselling and Psychotherapy, said: ‘This updated guideline is an important evolution from the previous 2009 version, with the changes ensuring that more people with depression will have access to a broader range of effective interventions. However, it falls short of the full package of changes needed to secure better care for all – for some people with depression this guideline will still not fully meet their individual care needs.

‘We hope that NICE have found the input and expertise from stakeholders such as the Coalition valuable - if challenging at times - and will seek to build on that dialogue in the development of future guidelines. Now comes the important step of ensuring the changes to this guideline are translated into tangible improvements for the public accessing service’.

Adam Jones, Policy and Public Affairs Manager for the UK Council for Psychotherapy, said: ‘This updated guideline takes important steps to improve the care of people with depression. It is vital that anyone seeking help is aware that they have a say in their care and can be supported to find the right treatment for them – different things work for different people.

‘However, alongside a renewed focus on patient choice must come investment in the mental health workforce. The government needs to ensure that there are practitioners available to meet both the increased choice of treatments and rising demand for support.’