

Non-drug treatment of depression urged

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IT'S time that psychiatrists began prescribing meditation and exercise and not just medication for the treatment of depression, the 2014 Congress of the SA Society of Psychiatrists in Durban heard at the weekend.

Speaking on *The neurobiology of exercise and medication in treatment of depression*, Dr Rakesh Jain, clinical professor of psychiatry at Texas Tech University School of Medicine in the US, said that while current pharmaceutical treatment options for depression were "all very good", his profession did not do well with remission and had high relapse rates.

Numerous recent clinical studies had shown that exer-

cise and meditation were interventions "equally or more effective" than medication and should be prescribed along with it, Jain said.

"The effects of exercise are as profound above the neck as below", he said.

Studies showed that, for example, it increased the generation of new cells in the hippocampus region of the brain (which shrinks with exposure to stress and depression), improved immune functioning, and altered mood-enhancing neurotransmitters, dispelling negative mood and developing positive mood.

"It's a true biological intervention."

In a Cochrane Database meta-analysis of 25 studies comparing the effects of exer-

cise and anti-depressants, the results for exercise were "slightly better" than for anti-depressants, Jain reported.

Aerobic exercise was good, but resistance training was better, and the most effective exercise was a combination of the two, done for a total of 20 to 30 minutes a day at least five times a week, at a moderate intensity that made it impossible to speak normally while doing it.

Mindfulness

Scientific data on the benefits of meditation in treating depression were even better than for exercise, Jain said.

Of the different forms of meditation, the best data were for "mindfulness meditation", with mindfulness defined as

"paying attention in a particular way: on purpose, in the present moment, non-judgmentally".

High-quality studies now showed that, among other things, after just eight weeks of meditation for an hour a day, the amygdala – a part of the brain which becomes overactive in depressed patients – and the hippocampus measurably changed in volume.

The best results were from a combination of meditation and cognitive behavioural therapy (CBT) – a "promising new therapy" known as mindfulness-based cognitive therapy (MBCT), Jain said. This had been shown to work for patients suffering from anxiety, depression, panic attacks and even binge-eating.

As with exercise, the positive effect continued for some hours afterwards, and he advised two hours of meditation a week and "daily homework using CDs".

A large study had shown that MBCT had "the same power to prevent relapse as a pharmaceutical intervention", he said.

Jain recommended that psychiatrists prescribe exercise and meditation to patients as they did medication, explaining the benefits, checking for compliance, asking them to keep written logs, and encouraging the use of resources such as smartphone apps and CDs.

For help with depression contact the South African Depression and Anxiety Group on 0800 21 22 23, or SMS 31393.