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Depressed cancer patients helped by integrated care, studies show

Depression in cancer patients can be significantly improved with a new, integrated approach to care, research has revealed.

Patients receiving the new programme showed a strikingly greater response to the therapy than those who were given usual care, according to the research.

Other cancer-related symptoms – including anxiety, pain and tiredness – are also improved by the treatment, which has a marked improvement on quality of life, the study found.

The researchers say the cost of the therapy is modest in comparison with other treatments.

Researchers led by the Universities of Edinburgh and Oxford looked at the prevalence of major depression in more than 20 000 Scottish cancer patients.

They found that depression was substantially more common in cancer patients than the general population but only around a quarter of patients were receiving treatment.

Lung cancer patients were the most affected, with around one in eight patients being diagnosed with depression.

Depression was also more common in women, younger patients and those from socially deprived backgrounds.

A study looked at 500 people with a positive cancer prognosis who also suffered from major depression. Doctors found that after six months, 62 per cent of patients who received the integrated care programme responded to treatment compared with just 17 per cent of those who received standard care. This benefit was also seen 12 months after treatment.

In a separate study of 142 lung cancer patients, which typically has a poorer prognosis, patients who received the integrated care programme had a significantly greater improvement in depression compared with those receiving existing treatments.

The new programme – called Depression Care for People with Cancer (DCPC) – is an intensive approach. All patients are offered both antidepressants and psychological therapy.

Ranked among the top universities in the world

The treatment is delivered by a team of specialist cancer nurses and supervising psychiatrists, who work in collaboration with the patient's oncology team and GP. Most sessions are delivered face-to-face.

Professor Michael Sharpe, an honorary professor at the University of Edinburgh now based at the University of Oxford, who co-led the research, said: "The huge benefit that DCPC delivers for patients with cancer and depression shows what we can achieve for patients if we take as much care with the treatment of their depression as we do with the treatment of their cancer."

Dr Jane Walker of the University of Oxford, who co-led the research, said: "Patients with lung cancer often have a poor prognosis. If they also have major depression that can blight the time they have left to live. This trial shows that we can effectively treat depression in patients with poor prognosis cancers like lung cancer and really improve patients' lives."

Professor Charlie Gourley, of the Edinburgh Cancer Research UK Centre at the University of Edinburgh, said: "Depression affects around one in ten cancer patients and has a significant impact on their quality of life. This research has shown that better management of the condition can be hugely beneficial for their overall health, which may also have implications for patients with other chronic medical conditions who are suffering from depression."

The findings are published in three studies in journals *The Lancet*, *The Lancet Oncology* and *The Lancet Psychiatry*. The research was funded by Cancer Research UK and The Chief Scientist Office of the Scottish Government.

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Embargoed links to articles:

Prevalence, associations and adequacy of treatment of major depression in 21,151 cancer outpatients: a cross-sectional analysis of routinely collected clinical data.

The Lancet Psychiatry article and Comment: <http://press.thelancet.com/depressioncancer.pdf>

Integrated collaborative care for comorbid major depression in cancer patients (SMaRT Oncology-2): a multicentre randomised controlled effectiveness trial

The Lancet article: <http://press.thelancet.com/SMART2.pdf>

Integrated collaborative care for major depression comorbid with a poor prognosis cancer (SMaRT Oncology-3): a multicentre randomised controlled efficacy trial in patients with lung cancer

The Lancet Oncology article: <http://press.thelancet.com/SMART3.pdf>