In NIH Study, Therapy Works As Well as Drugs For Depression

By Steven Brozov

**"IT IS A بعيد PERSON"** and didn't know how to love or to stop reacting to the job, and I suddenly became more likeable because I wasn't stupid and I no longer self-destructed. Patients suffering from depression are helped by such treatments, with the result that they're unable to make much of anything. Their sleep and eating are disturbed, and they often lose interest in sex and other activities.

In the past, psychiatrists used antidepressants to counteract the feelings of depression. These drugs worked for some patients, but others didn't respond. Researchers showed that the drugs work by increasing the level of certain brain chemicals, such as serotonin and norepinephrine, which are involved in the regulation of mood. However, this approach has limitations, as some patients do not respond to these drugs or experience side effects. Therefore, new treatments are being developed that target other brain pathways and mechanisms, such as the endocannabinoid system and the noradrenergic system. These treatments could provide additional options for patients who do not respond to conventional antidepressants.

One of the potential new treatments is the psychedelic drug psilocybin, which has shown promise in treating depression. Psilocybin is a naturally occurring compound found in magic mushrooms, and it has been used for thousands of years in various cultures for its mood-altering and hallucinogenic properties. In recent years, researchers have been exploring the therapeutic potential of psilocybin for a range of mental health conditions, including depression, anxiety, and addiction.

In a recent study, researchers administered psilocybin to 27 people with treatment-resistant depression and compared it to a placebo. The results showed that the psilocybin group had a significant reduction in depressive symptoms, as measured by the Montgomery-Asberg Depression Rating Scale (MADRS), compared to the placebo group. The psilocybin group also experienced improvements in other measures, such as quality of life, and the effects lasted for several weeks.

Another potential treatment is ketamine, which is a powerful anesthetic that has been used for many years in emergency rooms. In recent years, researchers have discovered that ketamine has rapid antidepressant effects, even in people with treatment-resistant depression. In a recent study, 25 people with treatment-resistant depression were given a single intravenous dose of ketamine, and they experienced a significant reduction in depressive symptoms, as measured by the MADRS, compared to a placebo group.

In conclusion, there is a growing body of evidence that supports the use of new treatments for depression, such as psilocybin and ketamine, which offer promise for patients who do not respond to conventional antidepressants. However, more research is needed to understand the mechanisms by which these drugs work and to develop safe and effective treatment protocols. The use of these drugs in clinical practice also requires significant regulatory and ethical considerations, as well as ongoing research to ensure their safety and efficacy.

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**References:**

