Are you taking an SSRI antidepressant? We here at HDRF would like to comment on oversimplified reports concerning the SSRI medications made by many news outlets earlier this year, calling into question whether the drug is actually effective.

If an SSRI treatment prescribed by your doctor is working for you – then stick with it. Don’t get the wrong idea that these drugs don’t work. They’re not perfect, but research shows they benefit millions of people.

Quick background: The SSRI medication is the most commonly prescribed type of antidepressant out there today, including Prozac, Zoloft and Celexa. It stands for Selective Serotonin Reuptake Inhibitor, and it prevents neurons from sucking up the neurotransmitter serotonin, allowing more of the chemical to circulate in the brain.

The media often gets it wrong about SSRIs, because there is a disconnect between how the public views depression and what scientists have discovered. Years ago, experts believed that depression must be caused by low levels of serotonin, because the SSRI drugs increase levels of the chemical, benefiting many. This basic "chemical imbalance" theory of depression gained a strong foothold in our society and media and was promoted by ads for the medications.

However, the chemical imbalance theory of depression has been disproven and discredited for many decades now. Research has revealed that people with depression do not have less serotonin than people who are not depressed. The picture is far more complex, with several parts of the brain involved, and HDRF’s Depression Task Force scientists are leading the field in finding this out.

This summer, a stir erupted in the media when a scholarly paper was published that rehashed all the studies from several decades showing that serotonin levels do not cause depression. For experts this was an old story. However, the chemical imbalance theory is so deeply entrenched in the public mind that news outlets leapt on the story and then went on to force the question: Are SSRIs really effective? As a result, HDRF received a lot of calls and emails from our constituents who were confused by the headlines.

Please know: We do not need to understand exactly how a drug, or a non-drug treatment works in order to use it. If that were the case there would be no treatments for depression, whether it’s drugs like SSRIs or cognitive therapy or lifestyle changes like more exercise and better sleep.

What we DO want to know about SSRIs are answers to some long vexing questions: Why do SSRIs only work for 50% of patients? To avoid trial and error, how can we identify beforehand who will respond? Why do SSRIs take three or four weeks before they start to kick in?

Here is what our scientists have learned through research that are steps toward real answers:

1. There is no clear link between decreased serotonin and depression.
2. Serotonin is involved in the action of SSRIs but is not a primary cause of depression.
3. Increased serotonin, our scientists believe, sets off a cascade of molecular events that help the brain form new connections between cells, restoring circuits that have been broken down by chronic stress.

It is interesting to note that chronic stress, experts say, is the biggest risk factor for developing depression, and serotonin seems to help by assisting damaged cells regrow their connections.

There’s no doubt that basic research on serotonin and depression is critical to our understanding of depression and the search for better, more personalized treatments.

Knowing WHY serotonin and SSRIs work for millions of patients will help us get to the next generation of treatment. Until then, we counsel patience. Let’s not confuse the question, “Why does it work?” with, “Does it work at all?”

LOUISA BENTON
On the back of the current unprecedented mental health crisis among teenagers and younger people in the United States, Hope for Depression Research Foundation had its inaugural Next Generation awareness-building symposium on October 6, 2022, in West Palm Beach, Florida.

Centered around the topic “Teenagers and Depression: Addressing the Youth Mental Health Crisis,” the symposium featured leading experts in psychiatry, brain research and social work. The panel also included two brain scientists from the HDRF Depression Task Force.

“I was so inspired to see the interest and engagement around this very important topic,” said HDRF Executive Director Louisa Benton who moderated the talk. “Not only from our audience, but from the younger generation of students that were here, who shared personal experiences and posed inquisitive questions to our panelists.”

Per recent statistics, more than one in three high school students has experienced sadness or hopelessness – a 40% increase since 2009 – with suicide being the second leading cause of death for teens aged 15 to 19. More than half of parents and caregivers have expressed concern over their children’s mental well-being.

The talk addressed this, and explored vital topics including how to identify depression in teenagers, real-life experiences with mental health, how social media contributes to the rise of depression among our youth, and what to do if you think someone you know is experiencing depression or anxiety.

“We hope that through more conversations like this, we can continue to educate schools and students to help our adolescents in need and remove the stigma that surrounds depression and other mood related disorders,” said Benton.

From left: Christoph Anacker, Ph.D., of Columbia University and the HDRF Task Force; Mental health counselor Erinn F. Beck with Restoring Hope of the Palm Beaches; Dr. Wei-Ii Chang of Columbia University and the HDRF Task Force; Anthony Trucks, former National Football League player and founder of Identity Shift Coaching; PBA students Julissa Gonzalez and Imad Mawass; and HDRF Executive Director Louisa Benton, who moderated the panel.
THE SEVENTH ANNUAL SOUTHAMPTON RACE OF HOPE RAISES $325,000

The Hope for Depression Research Foundation's (HDRF) Annual 5K Race of Hope to Defeat Depression gathered more than 400 men, women, and children in Southampton on August 4 to raise funds for mental health research. HDRF founder Audrey Gruss and Board member Arthur Dunnam, both Hamptons residents, served as Co-Grand Marshals for the race. They were joined by iconic author Candace Bushnell (Sex and the City), who was Celebrity Grand Marshal. The festive event raised more than $325,000 for critical research into new and better treatments for depression and anxiety.

SUPPORT HDRF

100% of all donations go directly to research into the origins, diagnosis, treatment and prevention of depression and its related mood disorders including: postpartum depression, post-traumatic stress disorder, anxiety disorders, and suicide.

HDRF is a non-profit 501(c)(3) public charitable organization. All donations are tax-deductible to the fullest extent of the law.

Visit us at hopefordepression.org

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Candace Bushnell, Arthur Dunnam and Audrey Gruss in front of runners at starting line

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To our Southampton Race of Hope sponsors:
Our 16th annual HOPE Luncheon Seminar on November 9 drew over 300 supporters and raised over $600,000 for HDRF’s research. The focus of the Luncheon was “Teens and Depression: Addressing the Youth Mental Health Crisis.”

HDRF Founder and Chair Audrey Gruss presented Olympic Gold Medalist Aly Raisman with the 2022 HOPE Award for Depression Advocacy.

The keynote speaker was Dr. Angela Diaz, acclaimed Director of the Mount Sinai Adolescent Health Center.

Dr. Jonathan Javitch, a neuroscientist from Columbia University and member of the HDRF Depression Task Force then shared the latest research updates.

Jamee and Peter Gregory accepted the 2022 HOPE Community Award for their transformational gift to HDRF’s New Treatment Initiative.

HDRF thanks the incomparable Chuck Scarborough for being our Master of Ceremonies, and all our HOPE Luncheon Co-Chairs who made this event a success: Susan Gutfreund, Kim Heirston, Tania Higgins, Eleanora Kennedy, Margo Langenberg, Susan R. McCaw, Kitty & Bill McKnight, Peter S. Paine III, Nancy Silverman, Barbara & Randall Smith, and Scott Snyder.

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