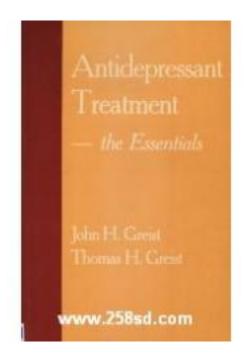
Antidepressant Treatment-The Essentials



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A campaign several years ago to educate physicians
br>about the detection and treatment of hypertension proved
br>so successful that last year a special Lasker Award was
br>given to its promoters. Hypertension and depression have
br>many similarities, so it is not at all strange that in
the past three years or so, much the same educational
br>campaign about depression has been directed at
physicians.
br> Hypertension is insidious in onset, can produce
br>marked morbidity and mortality, and can be effectively
br>treated in most cases.
Depression is also insidious in
br>onset, although more symptomatic than hypertension.
br>Depressed patients may not know that they are depressed,
but rather feel that something is seriously wrong.
br>Depression is much more difficult to diagnose than
br>hypertension, for many symptoms provide many

diagnostic
leads. Hypertension can be diagnosed by the simplest of
physical examinations; depression often remains
br >unrecognized even after a \$2000 workup. The morbidity of
br >depression is not long delayed but immediately apparent;
br >depressed patients are miserable and are often severely
br > impaired. The degree and duration of impairment may
br > rival that of many serious disorders. And depression is
br > a potentially fatal illnessi'lue one of the few with which
br > psychiatrists must deal. ~ \"
br > Both hypertension and depression are well managed by
br > drug therapyi'lue although one must confess that drug
br > treatment of hypertension is more rewarding. One has
br > many more points of pharmacologic attack on the
br > pathogenesis of hypertensioni'lue which is still largely
br > unknown. Drug treatment for both disorders is
br > unpleasanti'lue producing a variety of side effects. Thusi'lue
sesi'lue
br > vii
br > vii
br

variety of side effects. Thusi¼E compliance in treatment is a problem with both illnessesi¼E vii
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