

INTRODUCTION

Each of the following lifestyle factors has been shown to be efficacious in treating depression:

- •Dietary omega-3 supplementation (Martins, 2009)
- •Bright light exposure (Golden et al., 2005)
- •Sleep hygiene (Thase, 2006)
- •Aerobic exercise (Blumenthal et al., 2007)
- •Anti-rumination strategies (Dimidjian et al., 2006)
- Social connectedness (Grav et al., 2012)

Therapeutic Lifestyle Change for Depression (TLC-D) is a multi-component treatment integrating each of these elements to treat major depressive disorder (MDD).

The purpose of the current study is to measure the efficacy of TLC-D as a treatment for MDD.

METHOD and PARTICIPANTS

Participants recruited locally were initially screened to confirm current MDD (APA, 2000).

Twenty-nine participants qualified for the study (76% female, mean age = 42.8).

Two-to-one random assignment to either the TLC-D treatment condition (n = 22) or a treatment-as-usual (TAU) control group (n = 7).*

Participants in the treatment condition took part in 12 sessions of group therapy over a period of 14 weeks, and were assessed at 3 and 6 months post-treatment.

Over the course of treatment, depressive symptoms were assessed weekly using the Beck Depression Inventory-II (BDI-II; Beck et al., 1996).

* Seven non-randomly selected participants from a pilot group are included in the current analysis.

Successful Treatment of Depression via Therapeutic Lifestyle Change: Preliminary Controlled-Trial Results

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RESULTS

A 2x2 factorial design using time (pre-treatment, posttreatment) by condition (treatment, TAU) revealed a significant time-by-condition interaction, F(1,27) = 15.45, *p* = .001.

A clinically significant response (50% or greater reduction in BDI-II scores) was observed in 77.3% of participants in the treatment condition versus 28.6% in the TAU group.

No significant change in BDI-II scores, t(13) = -.252, p = .81, was observed from end of treatment to a 6-month follow up for those in the treatment condition (n=14).



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Mean BDI-II Scores for TLC-D vs. Control

TLC-D demonstrated favorable outcomes in the treatment of MDD, with low relapse rates at post-treatment follow-up.

Participants in the treatment group showed a significantly greater decrease in depressive symptoms from pre-treatment as compared to those in the TAU group.

Reduced depressive symptoms in the treatment group were maintained up to 6 months post-treatment.

Follow-up data for 12 months post-treatment is currently being collected.

Future research will focus on the impact of individual TLC elements on treatment outcomes.

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DISCUSSION

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