



Depression in the 20th century

*– the change and advancements of
treatments and care of patients*



Introduction

Throughout the 20th century, there were significant changes in the way that depression was understood and treated, as well as in the methods that were used to treat it.

The introduction of psychotherapies, the development of new medical treatments, and the increasing acknowledgement of depression as a genuine and treatable mental illness are some of the major developments.

(Schimelpfening, 2023)
(National Institutes of Health (US), 2007)

Early 1900s: Psychoanalysis and the Birth of Psychotherapy

At the beginning of the 20th century, psychoanalysis, based on Sigmund Freud's theories, was the most widely used treatment for depression and other mental illnesses

- **Psychoanalysis:** The focus of Freud's theory of depression, or "melancholia," was on repressed emotions and unconscious conflicts that frequently resulted from early life events. Talking therapy was a common form of treatment, in which patients discussed their feelings and thoughts with a qualified psychoanalyst. Even though it can take years, this method set the stage for other types of psychotherapy.
- **Limited Medical Treatments:** At this time, there were very few medical treatments available to treat depression. Sedatives, tonics, and even electric shock therapy—which later developed into more structured types of electroconvulsive therapy—were common therapies. However, these therapies frequently had serious adverse effects or were ineffective.

1930s-1940s: Rise of Biological Treatments and ECT

During this time, there were attempts to fully understand depression from a biological standpoint. This resulted in early experimental treatments.

- **Electroconvulsive Therapy (ECT):** Electroconvulsive therapy (ECT), which entailed causing seizures in patients to treat severe mental disorders, was created in the 1930s by Italian neurologist Ugo Cerletti. ECT was first used to treat a variety of mental diseases, but as time went on, it was increasingly linked to severe depression that was unresponsive to treatment. Even though it is controversial, some people can still benefit from ECT today because of more targeted and less invasive current methods.
- **Insulin Coma Therapy:** Large doses of insulin were given to create a coma, which was first used to treat depression and schizophrenia. Later, this was discontinued because of risks involved.
- **Psychosurgery:** During this time, lobotomy—a surgical technique that involves cutting connections in the prefrontal cortex of the brain—was another experimental treatment, particularly for patients suffering from severe depression. Although lobotomy was first thought to be a means of symptom relief, it eventually declined since it frequently caused long-term cognitive and personality abnormalities.

1950s: The Advent of Antidepressants and Broader Recognition of Depression

With the development of the first antidepressants and an increased emphasis on mental health in science, the 1950s were a turning point in the history of treating depression.

- **Tricyclic Antidepressants (TCAs):** Tricyclic antidepressants, such as imipramine, were the first antidepressants to be discovered in the 1950s. These drugs worked by changing the brain's neurotransmitter levels, including those of serotonin and norepinephrine. Despite their effectiveness, TCAs frequently caused serious adverse effects, such as impaired vision, dry mouth, and weight gain.
- **Monoamine Oxidase Inhibitors (MAOIs):** Monoamine oxidase inhibitors (MAOIs), another class of antidepressants, were also introduced. These drugs worked by inhibiting the enzyme monoamine oxidase, which broke down neurotransmitters. Despite their effectiveness, MAOIs came with dietary limitations because of their harmful interactions with specific foods and drinks such as cheese.
- **Recognition of Depression as a Medical Condition:** More people started to understand that depression was a medical illness that could be treated rather than merely a moral failure or personal weakness. During this time, mental care gained increased attention, and more organised diagnostic frameworks were created.

1960s-1970s: Psychotherapy Gains Ground and Antidepressants Evolve

Alongside the ongoing advancement of pharmaceutical treatments for depression, psychotherapy started to gain traction as the main therapeutic option during this time.

- **Cognitive Behavioural Therapy (CBT):** CBT started to become popular in the 1960s and 1970s. Cognitive behavioural therapy (CBT), which was created by Aaron T. Beck, aimed to recognise and address the negative thought patterns and cognitive distortions linked to depression. Numerous patients reported symptom improvements, making it a useful, structured substitute for psychoanalysis.
- **Selective Serotonin Reuptake Inhibitors (SSRIs):** Researchers started creating more focused antidepressants in the 1970s, which are known as selective serotonin reuptake inhibitors, or SSRIs. In contrast to older antidepressants like TCAs and MAOIs, the first SSRIs, such as fluoxetine (Prozac), appeared in the late 1980s and early 1990s and had a better side effect record. By the late 20th century, SSRIs became the most prescribed class of antidepressants since they mainly raised serotonin levels in the brain and had fewer negative effects.
- **Greater Attention to Mental Health:** During the 1960s and 1970s, there was a cultural shift in how people understood mental health, with more people talking openly about the need for improved psychiatric care, a decrease in stigma, and a higher awareness of mental disease. The deinstitutionalisation movement, which sought to encourage outpatient care and close big psychiatric facilities, also emerged around this time.

(Chand et al., 2023) (Hillhouse & Porter, 2015) (Chu & Wadhwa, 2023)
(Pescosolido, 2013)

1980s-1990s: Medication Becomes the Primary Treatment, and Psychotherapy Expands

While psychotherapy continued to play a significant role, medication became the standard treatment for depression in the late 20th century.

- **Wider Use of Antidepressants:** Millions of people benefited from SSRIs, which revolutionised the treatment of depression when they were introduced (e.g., Prozac in 1987). Because SSRIs were promoted as being more tolerable than earlier antidepressants, their use and acceptability grew.
- **Growth of Psychotherapy:** Even though many people turned to medicine as their primary treatment, psychotherapy kept evolving and growing. Apart from cognitive behavioural therapy (CBT), other therapies such as dialectical behaviour therapy (DBT) and interpersonal therapy (IPT) have also gained favour for treating depression, especially when paired with medication.
- **Advances in Understanding Depression:** More knowledge on the biological and psychological causes of depression emerged in the 1980s and 1990s. Even though the precise reasons of depression were still unknown, research on neurotransmitters, brain anatomy, and genetics started to influence therapeutic strategies.

Summary of Key Developments in the 20th Century:

- In the early 1900s, psychoanalysis was the main therapeutic strategy.
- Insulin coma therapy and electroconvulsive therapy (ECT) were created as treatment for severe depression.
- The 1950s saw the introduction of antidepressants (MAOIs and TCAs), while the 1980s saw the introduction of SSRIs.
- As psychotherapy developed, CBT and its variations, such as interpersonal therapy (IPT), emerged as popular therapies.
- Depression was more widely acknowledged as a medical disorder as a result of growing public awareness of mental health issues.
- While alternative therapies like electroconvulsive therapy (ECT) were still used for severe instances, the major treatments at the end of the century were psychotherapy and pharmaceuticals, particularly SSRIs.
- The development of stronger medications and psychotherapies replaced psychoanalysis and simple medical treatments as the primary means of diagnosing and treating depression during the 20th century, opening the door for the more sophisticated and individualised therapies of the 21st century.

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