Major depressive disorder, antidepressant use and subsequent 2-year weight change patterns in the Netherlands Study of Depression and Anxiety

Summary

The relationship between depression and obesity has been studied in general populations but few studies have investigated the relationship between obesity and weight changes within a clinically depressed group of people. According to the Diagnostic and Statistical Manual of Mental Disorders (DSM IV), clinical depression can lead to both weight loss and weight gain. Therefore in our study we compared weight changes over a 2-year period between people who had clinical depression, people who had a history of depression, and people who had never been depressed.

We used 2542 patients, aged between 18-65 years, from the Netherlands Study of Depression and Anxiety. Whether participants were depressed or not was diagnosed by interview at baseline and after 2, 4, and 6 years. Change in weight for the following 2-year period was calculated and categorised as being weight stable, weight loss or weight gain, using 5% change in body weight as cut-off points. The relationship between being depressed (or not) and antidepressant use with the weight change categories was analysed both together and separately using multiple observations (that is to say using baseline-year 2, year 2 – year 4 and year 4 - year 6 data).

The results showed that when compared to healthy controls, currently depressed patients were significantly more likely to gain or lose weight than remain weight stable. Having a history of depression was not associated with weight changes in either direction. Whilst the use of antidepressants was significantly related to weight gain, when analysed together with depression, only being depression status seem to affect future weight changes. These results demonstrate the heterogenous nature of clinical depression. Furthermore, they suggest that it is not necessarily the use of antidepressants that may lead to weight gain but the underlying depression itself.