



New Web Site Fills in the Missing Pieces That May Be Hindering Recovery From Depression

Interactive Depression Tool Provides Information People Need

INDIANAPOLIS, IN, Nov 30, 2009 (MARKETWIRE via COMTEX News Network) -- People living with depression have a new resource to help them get well and take back their lives. A group of leading mental health experts, in partnership with Eli Lilly and Company, has launched a new program, called Missing Pieces, and corresponding Web site (www.MissingPiecesProgram.com), to help people uncover and address the obstacles they may be facing on the road to recovery from depression. The initiative was developed in response to a national survey of more than 2,000 adults with depression. The survey, conducted by Harris Interactive, revealed that many unknowingly took actions that could have sabotaged their chances of getting better.(i)

At www.MissingPiecesProgram.com, people can select the information that is most relevant to their experience with depression. Additionally, they will have the opportunity to compare their experiences and knowledge of depression, symptoms, and treatment plans with those who participated in the national survey via an online questionnaire.

The cornerstone of the Missing Pieces Program and Web site is a simple action plan to help guide patients from their depression diagnosis to recovery (for full action plan details, click here: <http://missingpiecesprogram.com/actionplan.jsp>)

- Two Week Rule for Diagnosis: Current American Psychiatric Association guidelines state that adults experiencing at least five of the symptoms of depression for two consecutive weeks, and at least one of them is depressed mood or loss of interest, they should talk to a health care professional.(ii) Additional symptoms of depression can also include feelings of guilt or worthlessness, thoughts of death or suicide, restlessness, trouble concentrating or making decisions, fatigue, lack of energy and changes in weight or sleep patterns.(ii) Additional symptoms of depression may include pain, irritability and anxiety.(ii)
- Six Week Rule for Seeing Improvement: To get fully well, it is important to address all of the symptoms of depression.(iii), (iv) Experts recommend that individuals on any type of treatment plan for depression who are unsatisfied with their level of improvement should consider consulting with their doctor about making changes to their treatment plan.
- Managing Medications When Feeling Better: If an individual has found a depression treatment plan that is addressing many of their depression symptoms, they should continue on that treatment for at least another four to nine months to help prevent the return of their symptoms. Some individuals will also need long-term maintenance treatment to help prevent future episodes of depression.(v), (vi)

Full survey results <http://missingpiecesprogram.com/survey.jsp> and a list of helpful questions to ask your doctor <http://missingpiecesprogram.com/communication.jsp> are also available.

(i) This survey was conducted online within the United States by Harris Interactive on behalf of Eli Lilly and Company April 23 to May 7, 2009 among 2,001 U.S. adults ages 18 and older who have been diagnosed with depression. Results were weighted as needed to the U.S. adult population diagnosed with depression. Propensity score weighting was also used to adjust for respondents' propensity to be online. No estimates of theoretical sampling error can be calculated; a full methodology is available through Harris Interactive.

(ii) Diagnostic and Statistical Manual of Mental Disorders. 4th ed., Text Revision. Washington DC. American Psychiatric

Association; 2000. 345-428.

(iii) Keller, Martin B. "Past, Present, and Future Directions for Defining Optimal Treatment Outcome in Depression." JAMA 2003; 289 (23): 3152-3160.

(iv) Rush JA, et al Neuropsychopharmacology 2006;31:1841-1853.

(v) American Psychiatric Association. "APA Practice Guidelines: Treatment of Patients With Major Depressive Disorder." April, 2000.

(vi) Suehs B, et al. "Texas Medication Algorithm Project Procedural Manual: Major Depressive Disorder Algorithms." Texas Department of State Health Services. July, 2008. 26-27.

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