

Depressive disorders

Priory offers a range of outpatient therapies to provide the best possible treatment for mental health conditions.

The information below provides you with the clinical specification of our depressive disorders treatment, along with information about outcome measures, ongoing care options and details of the therapy itself.

We strive to deliver innovative treatment plans which can be paid for on a session-by-session basis. The prices at our wellbeing centres are as follows:

- 1:1 therapy starts from £109 per session (£132 in London)
- Consultant psychiatrist assessments start from £300
- Consultant psychiatrist follow-ups start from £150
- Group therapy starts from £65 per session (£77 in London)

Priory also offers an outpatient package for depressive disorders, which provides a fixed price, includes a discount and provides you with certainty of cost for your initial treatment programme.

A simple GP referral process with 24/7 support

We have a simple process for GPs who would like to refer a patient, and our GP enquiry team can support you with any queries that you may have.

To make an online referral, visit [priorygroup.com/gp-referral](https://www.priorygroup.com/gp-referral)

The treatment that is offered across our wellbeing centre network varies. To discuss which Priory facility offers this specialism, please contact us today:

Call our 24/7 GP support line on 0800 090 1354

Email priory.referral@nhs.net

Fax 0844 770 6206

For more information visit [priorygroup.com/gp](https://www.priorygroup.com/gp)

Referrer guidance	<ul style="list-style-type: none"> + This service is for any patient presenting for help with low mood + Depressive disorders are characterised by sad, empty or irritable moods, accompanied by changes in somatic state (e.g. energy, appetite, sleep) and cognition (e.g. concentration and memory) that affect an individual’s ability to function + Depressive disorders include: major depressive disorder; disruptive mood dysregulation disorder; persistent depressive disorder (dysthymia); premenstrual dysphoric disorder; and others e.g. related to adjustment difficulties + Low mood/depression also occurs in the context of adjustment and bipolar disorders, and frequently accompanies other conditions e.g. substance misuse and anxiety disorders (see separate specifications)
Goals of treatment	<ul style="list-style-type: none"> + To refine the diagnosis and exclude depression secondary to general medical conditions or substance use, or occurring as part of bipolar disorder (see separate specification) + To manage risk + To use the clinical state and circumstances, patient preference and research evidence to provide treatment, which will improve mood and address secondary disabilities and vulnerability factors
Evidence base: NICE or other guidance / references	<ul style="list-style-type: none"> + NICE guidance - including: CG123 common mental disorder, CG90 depression in adults, CG91 depression in adults with a chronic physical health problem, CG192 antenatal and postnatal mental health + British Association of Psychopharmacology (2008) evidence-based guidelines for treating depressive disorders with antidepressants

Team	<ul style="list-style-type: none"> + Consultant psychiatrist to establish diagnosis and treatment plan, and manage psychopharmacological treatments + Accredited psychological therapists for 1:1 and/or group work
Time	<ul style="list-style-type: none"> + Psychiatric assessment and treatment initiation: 60 minutes + Psychiatric follow-up: 30 minutes + 1:1 cognitive behavioural therapy (CBT) sessions: 1 to 2 hours
Process of care	<ul style="list-style-type: none"> + Follows the NICE stepped care model (CG 90) + Initial assessments (diagnosis, cause and risk) + Low intensity care includes 6 to 8 1:1 sessions over 12 weeks, or 10 to 12 group sessions over 16 weeks + High intensity care includes 16 to 20 sessions over 16 weeks + All have 3 to 4 follow-up sessions over the next 3 to 6 months + Medication reviews at 2 weeks (at 1 week for those under 30 years), and then from 2 to 4 weekly
Outcome measure	<ul style="list-style-type: none"> + PHQ 9, GAD 7 + Patient satisfaction survey + Locally determined outcome measures
Options for ongoing care	<ul style="list-style-type: none"> + Additional psychotherapy (1:1 or groups) + Inpatient Priory care, including for ECT + NHS secondary services/GP + Second opinions e.g. NHS national services

Priory offers an extensive number of evidence-based therapy treatments for a range of conditions.

Because every individual is unique we have a bespoke approach to helping people through their most difficult times, offering mental health assessments, individual, group and family therapies. Not all of these interventions will be appropriate or necessary for all people and collaborative tailored treatment options will be explored with referrals at the first assessment.

First, we assess and understand the particular needs of a person and then recommend an appropriate course of treatment that is underpinned by clinical specifications based on the latest research and guidance.