

**Find out about chronic or
recurrent
depression**



VAGUS NERVE STIMULATION

How would you describe your depression?

There are many ways to describe the feelings and experiences associated with clinical depression, but certain medically used terms are helpful to define specific categories of long-term depression.

What is “chronic or recurrent” depression?

Many people with major depressive disorder experience long periods of continuous depression. When this occurs for 2 years or more, this is termed *chronic depression*. When 2 or more depression episodes occur over time, the term *recurrent depression* may be used.¹

Are these types of depression rare?

Not at all. If the above descriptions apply to you, then you are far from being alone. As many as one third of people diagnosed with depression experience long-term depression symptoms.² The main issue is finding a treatment that will work for you long term.

Sometimes medications do not adequately relieve depression, or they relieve depression for a period of time but then stop working.³ This is particularly true for chronic or recurrent depression. If multiple medications have not adequately or continuously relieved your depression, it may be time to discuss effective long-term treatment options with your psychiatrist.



“It affects your whole life in that you are just struggling to get through every day rather than accomplishing something or looking forward to or planning for the future.”

Lauri, diagnosed with depression in 1984

Assess your depression by completing this simple questionnaire

1. Do you experience depression all the time, or do you experience periods of relief (6 months or longer) from your depression?

- I experience depression all the time
- I experience depression that comes and goes

2. How long have you currently been experiencing continuous depression?

- Less than 2 years
- 2 years or more

▶ **If you have been experiencing continuous depression for 2 years or more, you may be experiencing chronic depression.**

3. How many episodes of depression have you experienced in the past 2 years?

- 1
- 2 or more

▶ **If you answered "2 or more," you may be experiencing recurrent depression.**

4. Are you experiencing side effects from your current antidepressant treatment that interfere with your daily functioning?

- Yes
- No

5. How many different medications have you ever taken for your depression? Please count all medications that you have ever been prescribed and taken to treat your depression.

- 1
- 2–3
- 4 or more

▶ **If you may be experiencing chronic or recurrent depression and/or answered "4 or more" medications, then you may benefit from a unique approach to your depression treatment plan.**

6. Do you feel your current antidepressant treatment plan is working?

- Yes
- Somewhat
- No

▶ **If you answered "Somewhat" or "No," now may be a good time to discuss your long-term treatment options with your psychiatrist.**

Treatment options for chronic or recurrent depression

There are many treatments available for chronic or recurrent depression, including a variety of talk therapies, medications, and ECT (shock therapy). These can be used alone or in combination. However, many people find that the effectiveness of these treatments wears off over time. Also, a range of side effects is associated with antidepressant treatments. Common side effects include weight gain, sexual dysfunction, memory impairment, and sleep disturbance.¹ These side effects may prompt your psychiatrist to try something different.

When depression is chronic or recurrent, the challenge of finding an effective long-term treatment is even greater. Effectiveness that lasts is important because you want improvements that you can rely on over time.



I've tried every type of drug. Every once in a while, one would work for 6 or 8 weeks, and occasionally one would work for 6 or 8 months; but then my symptoms would slowly come back and we'd have to either increase or combine or try something new.

Marna, diagnosed with depression in 1980

Hope for the long-term treatment of chronic or recurrent depression

Now a unique approach specifically for the treatment of chronic or recurrent depression, called VNS (vagus nerve stimulation) Therapy, is available. It's not another medication, and it differs from other treatments because it works long term. It is a safe, effective treatment that improves over time. Adding VNS Therapy™ to your current treatment has been shown to succeed when many other antidepressant treatments have not worked, or have stopped working.⁴



“The prospect of VNS Therapy gave me something that I had not had in a very long time, and that was hope.”

Karmen, diagnosed with depression in 1989

Chronic or recurrent depression requires treatment that provides long-term advantages

Talk to your psychiatrist

Consider what an ideal treatment would offer you⁵:

- Lasting improvements in vitality, social functioning, emotional well-being, and mental health
- Prevention of another episode of depression
- Minimal side effects

When you next visit your psychiatrist, ask:

- About chronic or recurrent depression
- What your long-term treatment options are
- If you can benefit from VNS Therapy

TIP Complete the self-assessment questionnaire included in this brochure and discuss it with your psychiatrist.



“As I was thinking about VNS Therapy, the thing that intrigued me was that it was a completely different alternative to the traditional antidepressants, and I thought it offered me a new hope for improvement in my mood.”

Charles, diagnosed with depression in 1981

If you would like to find out more about VNS Therapy™, talk to your psychiatrist or call 1-877-NOW-4VNS (1-877-669-4867) to talk to a VNS Therapy nurse case manager who can answer your questions. Visit www.VNSTherapy.com to find additional information and to obtain educational materials about VNS Therapy.

SAFETY INFORMATION FOR THE VNS THERAPY SYSTEM*

INTENDED USE/INDICATIONS – UNITED STATES

VNS Therapy is indicated for the adjunctive long-term treatment of chronic or recurrent depression for patients 18 years of age or older who are experiencing a major depressive episode and have not had an adequate response to four or more adequate antidepressant treatments.

CONTRAINDICATIONS

The VNS Therapy System cannot be used in patients after a bilateral or left cervical vagotomy. Do not use short-wave diathermy, microwave diathermy, or therapeutic ultrasound diathermy on patients implanted with the VNS Therapy System. Diagnostic ultrasound is not included in this contraindication.

WARNINGS

Physicians should inform patients about all potential risks and adverse events discussed in the VNS Therapy System *Physician's Manual*, including information that VNS Therapy has not been determined to be a cure for depression. Patients being treated with adjunctive VNS Therapy should be observed closely for clinical worsening and suicidality, especially at the time of VNS Therapy stimulation parameter changes or drug or drug dose changes.

Patients who have pre-existing swallowing, cardiac, or respiratory difficulties (including, but not limited to, obstructive sleep apnea and chronic pulmonary disease) should discuss with their physicians whether VNS Therapy is appropriate for them since there is the possibility that stimulation might worsen their condition. Patients with the VNS Therapy System or any part of the VNS Therapy System implanted should not have full body MRI.

ADVERSE EVENTS

The most commonly reported ($\geq 10\%$) side effects from stimulation included hoarseness, increased cough, neck pain, dyspnea (shortness of breath), dysphagia (difficulty swallowing), paresthesia (prickling feeling in the skin), and laryngismus (sore throat). The most commonly reported ($\geq 10\%$) side effects from the implant procedure included incision pain, hoarseness, incision site reaction, device site pain, device site reaction, pharyngitis (sore throat), dysphagia, and hypesthesia (numbness).

*THE INFORMATION CONTAINED IN THIS SUMMARY REPRESENTS PARTIAL EXCERPTS OF IMPORTANT PRESCRIBING INFORMATION TAKEN FROM THE PRODUCT LABELING. THE INFORMATION IS NOT INTENDED TO SERVE AS A SUBSTITUTE FOR A COMPLETE AND THOROUGH UNDERSTANDING OF THE VNS THERAPY SYSTEM, NOR DOES THIS INFORMATION REPRESENT FULL DISCLOSURE OF ALL PERTINENT INFORMATION CONCERNING THE USE OF THIS PRODUCT. (CAUTION: U.S. FEDERAL LAW RESTRICTS THIS DEVICE TO SALE BY OR ON THE ORDER OF A PHYSICIAN.)

References:

1. American Psychiatric Association. Practice guideline for the treatment of patients with major depressive disorder (revision). *Am J Psychiatry*. April 2000;157(suppl):1-45. 2. Fava M, Rush AJ, Trivedi MH, et al. Background and rationale for the Sequenced Treatment Alternatives to Relieve Depression (STAR*D) study. *Psychiatr Clin North Am*. 2003;26:457-494. 3. Fava M, Davidson KG. Definition and epidemiology of treatment-resistant depression. *Psychiatr Clin North Am*. 1996;19:179-200. 4. *Depression Physician's Manual*. VNS Therapy™ Pulse Model 102 Generator and VNS Therapy™ Pulse Duo Model 102R Generator. Houston, Tex: Cyberonics, Inc.; May 2005. 5. *Clinical Practice Guideline Number 5: Depression in Primary Care, 2: Treatment of Major Depression*. Rockville, Md: Agency for Health Care Policy and Research, US Dept of Health and Human Services; 1993. AHCPR Publication 93-0551.

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