Dear Sir,

        I should like to make a submission to the committee on the subject of
depression. I think it would fit into items b and/or o of the commmittee's
terms of reference.

        The term 'depression' as being used medically is a generic not a
specific. To say someone has depression is no more use than saying they have an
infection. Faced with an infection patient a general practitioner would deploy
various skills to ascertain which infection and then proceed to a specific
treatment. Faced with a depression patient s/he would not be able to - there
are apparently few, if any, skills available to ascertain which type of
depression the patient is suffering. As a consequence G.P.s have to experiment
with different treatments in the hope of finding one which will benefit. At the
depression support group in which I participate (The Mental Health Foundation,
Phillip ACT, phone (02)-6282-6658) we regularly find a person for whom treatment
A has failed but who has successfully moved to treatment B - and then someone
for whom treatment B has failed but who has successfully moved to treatment A.
There are obviously more causal factors involved than G.P.'s have been equipped
to handle. My suggestion to the committee is that that deficiency should be
remedied.

        Specifically I suggest the development of a database to contain for each
person entered :
        - personal details such as age, gender, status (single, married),
height, weight, and any relevant personal health matters ;
        - their indicators of depression - this, as we have found in Phillip,
will be a lengthy list ; and
        - treatments undertaken and the results therof (again, this may become
lengthy).

        If such a database could be compiled it would be eminently suitable for
computer analysis and enable interrogation by a G.P. who could supply the first
two categories of the patient's information and in return receive an indication
of which treatments had been found successful for such a combination of patient
parameters.

        To be fair, and based on the experience we have in Phillip, depression
is such a diverse condition that the database may have to become very large
before it could produce reliable results. But if the committee feel the idea
has merit and could initiate some sort of a trial we in Philip would be willing
to provide an initial nucleus of data.

Keith Sayers