Depression is the most commonly diagnosed mental health disorder, with 350 million people diagnosed worldwide, and the number is rising. Depression is a life threatening disorder, characterised by a range of symptoms; including a persistent low mood, inability to experience pleasure, disturbed sleep and energy, and suicidal thoughts.

Despite its prevalence, the pathology of depression is poorly understood, and multiple factors interact to cause biological changes that impact behaviour. The treatment of depression also depicts a complicated picture, the primary approach is antidepressant medication, but over 30 different kinds of antidepressants are currently available. There is significant variation both within GP prescribing patterns and individual response; generally only a third of patients no longer have symptoms of depression after their first prescription, and up to a third of patients with depression do not respond to multiple antidepressant treatments.

There is currently very little known about which specific antidepressant is the most effective for individual patients, and there is no way to determine how someone with depression will respond to treatment. Doctors often use a trial and error based approach to find a successful antidepressant. Given the high prevalence and debilitating symptoms of depression there is an urgent clinical need to develop a clinical diagnostic test that will improve the time between diagnosis and effect treatment outcome.

In order to comprehensively and reliably investigate the outcomes of antidepressant treatment, at individual level, it is valuable to have an up-to-date, and representative account of commonly prescribed antidepressants and an awareness of demographic and social influences on prescribing patterns.